FY 2021 BUDGET SUBMISSION

" To care for him who shall have borne the battle, and for his widow, and his orphan…."

Construction, Long Range Capital Plan and Appendix

Volume 4 of 4

February 2020

Table of Contents –Volume 4

Construction Appropriations

Construction Appropriations	Page No.
Pocket Guide	*i*-3
Introduction	*i*-5
Construction Summary	1-1
Construction, Major Projects	2-1
Budgetary Highlights/Summary of Budget Request	2-4
Program Line Item Request	2-83
Construction, Minor Projects	3-1
Grants for Construction of Veterans Cemeteries	4-1
Grants for Construction of State Extended Care Facilities	5-1
VA Lease Notification, Major Medical Facility Projects and Lease Authorizations	6-1
Strategic Capital Investment Planning Process Project List	7-1
Long Range Capital Plan	
Strategic Capital Investment Planning (SCIP) Report	8-1
Enhanced Use Lease (EUL) Program and Consideration Report	9.1-1
CHIP In for Veterans Act of 2016	9.2-1
Appendices	10-1

Page Intentionally Left Blank.

Pocket Guide to
VA Congressional Budget Volume 4
Construction, Long Range Capital Plan, and Appendices

The Pocket Guide below provides key topics that are found in VA's Volume 4 Construction and Long Range Capital Plan. Along with each topic are associated frequently asked questions and the corresponding location of additional information in the volume.

Topic	Frequently Asked Question	Page
Funding and Project Requests	Where can I find a list of major construction projects that are being requested for funding in FY 2021?	2-7
	Where can I find a list of new minor construction projects that are being requested for funding in FY 2021?	8.2-11
	Where can I find a list/description of new non-recurring maintenance projects proposed for FY 2021?	8.2-24
Authorization Requests	Where can I find a list of projects and leases that are being requested for authorization in FY 2021?	6-3
Status of Authorized Leases	Where can I find a list of previously-authorized leases and their status?	6-89
Strategic Capital Investment Planning (SCIP)	What is the Strategic Capital Investment Planning (SCIP) process?	Intro Sec. D
	Where can I find an explanation for why some projects are ranked and others are not?	Intro Sec. F
	Why isn't a specific project on the plan or the priority list?	Intro Sec. F
	Why did a specific project's priority score change from last year?	Intro Sec. F
	What are the Legislative and Executive requirements that are fulfilled by the SCIP?	Intro sec. E
Funded Projects	Where can I find the list of all projects proposed for funding in FY 2021?	8.2-11
Outyear Projects	Where can I find a list of future year potential (unfunded) projects?	8.2-41
Five-Year Development Plan (FYDP)	What is the Five-Year Development Plan (FYDP) and where is the list of planned major projects for FY 2021 and four years following?	8.2-14
Construction (general)	Where can I find a summary of how much funding VA is requesting for all construction programs?	1-1
	Where can I find information on how VA decides which projects to fund?	8.2-16

Topic	Frequently Asked Question	Page
Major/Minor Construction	Where can I find the definition of a "major construction" project?	1-3
	Where can I find the definition of a "minor construction" project?	1-3
	Where can I find detailed information on how much VA is requesting for major construction?	2-7
	Where can I find detailed descriptions (or prospectuses) for major construction projects that VA is proposing to be authorized or funded in FY 2021?	2-11 thru 2-82
	Where can I find a list of previously-authorized major construction projects and their status?	6-85
	Where can I find minor construction projects that were not proposed for funding this year, but are in VA's long-term plan?	8.2-41
	Where can I find major construction projects that were not proposed for funding this year, but are in VA's long-term plan?	8.2-41
	Where can I find status information on major construction projects that are already underway?	10-31 thru 10-39
	Where can I find the estimated total cost of a previously-authorized or partially-funded project?	6-85 and 10-31 thru 10-39
	Where can I find an update on the West Los Angeles project?	2-8
Non-Recurring Maintenance (NRM)	Where can I find the definition of "NRM" projects?	1-3
Leases	Where can I find a list of potential lease projects for FY 2021?	8.2-19
Enhanced Use Lease (EUL)	Where can I find list the history of all awarded EUL projects?	10-27
Other Reporting Requirements	Where can I find a description of the reporting requirements satisfied in Volume 4?	8.1-3

VA Congressional Budget Volume 4 –
Construction, Long Range Capital Plan, and Appendices

A. Introduction

Volume 4: Construction, Long Range Capital Plan, and Appendices, provides information on how VA plans to address its capital requirements over a 10 year planning horizon. This includes short-term (budget year request) and long-term (outyear projects) needs to meet existing and potential gaps to ensure Veterans are cared for and receive benefits in safe and modern facilities. The Volume also provides specific information in the following areas:

(1) Appropriations requested for capital projects and activities (Section B); and,
(2) Authorizations requested for new capital projects (Section D), or continuing those already underway, including changes to projects.

The following sections provide an overview of the information contained in this Volume, including key information and Frequently Asked Questions (FAQs).

B. Types of VA Capital Projects

VA undertakes four types of capital projects: major construction, minor construction, non-recurring maintenance (NRM), and leases. Projects must meet legislative, budget, and policy specifications for each project type. The table below shows the numbers of new projects in the FY 2021 VA request, across each of the four project categories.

Types of Capital Projects Proposed for Funding in FY 2021

Project Type	New Projects Proposed for Funding in FY 2021*
Major Construction	3
Minor Construction	37
Leases**	173
NRM**	544
Total	**757**

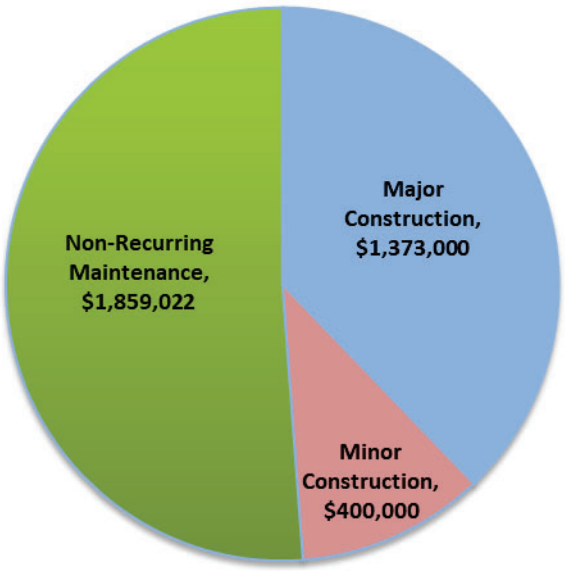
*New projects for 2021 – does not include prior year projects
**Number of Leases and NRM projects are subject to funding availability that is determined at the Administration level (VHA, NCA, VBA, and Staff).

C. Congressional Requests

Funding Requests

VA's 2021 Budget requests funding for capital projects to serve Veterans and their families. Projects can include new construction or changes to existing facilities. As shown in the chart on the following page, there are three main funding accounts used for capital projects:

FY 2021 VA Capital Budget Request*
(in $000)



*Leases are funded out of Medical Facilities appropriation and not included in the chart above. NRM amount planned for FY2021 obligations listed above.

- **Construction, Major Projects**
  This account includes the funding request for construction projects that are expected to cost more than $20 million. For each of these projects, VA is required to submit detailed information (called a "prospectus") supporting the funding request.

- **Construction, Minor Projects**
  This account includes the funding request for construction projects that are expected to cost equal to or less than $20 million.

- **Non-Recurring Maintenance**
  The Medical Facilities account includes VA's request to fund upkeep construction projects and maintain building systems.

Requests for Authorization
VA must request authorization from Congress to spend funds on major medical facility construction projects exceeding $20 million and lease projects with annual rent exceeding $1 million. VA must provide prospectuses for major construction and major lease projects to support the authorization requests. Design and planning funds do not require authorization.

D. Overview of Process for Creating VA's Strategic Capital Investment Plan (SCIP)

Purpose
The SCIP process is conducted annually to collect and assess information on Department-wide, long-range capital needs systematically, analytically, and holistically. This section provides high-level information describing SCIP and what it is, and is not, intended to do. More detailed information on the process is contained in section 8.2 of this Volume.

The annual SCIP process focuses the Department on understanding how capital assets help meet VA's mission, and aligning the resources necessary to meet critical infrastructure needs. The resulting priorities are based on clearly defined standards consistent with projected health care workload and current and future health care practices, taking into account VA mission considerations. The process is designed to inform and support the annual capital budget and estimate future funding requirements.

What SCIP Is
The SCIP process determines the critical unmet infrastructure needs relative to each other, across the Department, and is based on clearly defined standards, ongoing assessments, and stakeholder input. It is intended to identify capital projects over a 10-year planning horizon required to address performance gaps in a variety of areas: safety, security, utilization, access, seismic, facility condition, space, parking, and energy. The SCIP process includes a formal executive review process and is approved by the Secretary to ensure the Plan is closely aligned with the Department's strategic goals and mission. It encompasses non-capital and alternative strategies, such as telemedicine or extended hours for provision of services.

One of the end products of the SCIP process is a prioritized list of potential planned budget year projects, as well as potential future year projects to correct the identified performance gaps. This prioritized list includes all new major construction, minor construction, lease, and VHA NRM projects reviewed in FY 2021, in priority order. VA updates this list annually, based on agency-wide analyses, described generally below.

SCIP is undertaken by the VA Medical Centers and associated offices (Veterans Health Administation (VHA), Veterans Benefits Administration (VBA), National Cemetery Administration (NCA), and Staff Offices) to identify capital and non-capital means of addressing system-wide needs. The process is comprised of three parts:

(1) **Gap Analysis:** VA conducts an annual assessment of Veterans' unmet needs and identifies service gaps, such as utilization/workload, space, and facility condition over a 10-year time period.

(2) **Long-Range Action Plans:** VA creates capital project plans to address the identified gaps.

(3) **Action Plan and Business Case:** Projects identified in the first year (budget year) of these plans are developed in more detail by completing a business case. NRM projects are scored based on their action plan submission. Each business case is reviewed and scored by a panel of subject matter experts, and assigned a score based on Secretarial and Departmental priorities. These prioritized projects become the SCIP List.

The remaining projects – those that are not prioritized – are not part of the SCIP List but are included in the outyears (after the budget year) of the Long Range Capital Plan.

What SCIP Is Not

Because the SCIP process encompasses a wide range of analyses, there is sometimes a misunderstanding of the process's purpose. The SCIP process does not provide funding for construction programs; instead, it identifies overall needs. The SCIP process determines the relative criticality of projects for the budget year, and long-range potential projects, after a rigorous evaluation process using specific criteria. Capital projects involve many different steps before and throughout the construction process, and steps may need to be taken before a project receives, or continues to receive, funding, if at all. For example, new major construction projects require Congressional authorization, in addition to funding, before construction (active development) can begin. Major projects not on the Five-Year Development Plan and not included in annual funding requests must be resubmitted for consideration each year.

E. Capital Investment Budget and Reporting Requirements

This budget volume also fulfills several statutory requirements for notifications and authorization requests including:

- **Prospectuses:** VA is required to provide a prospectus to Congress for each major facility construction and each major medical facility lease project for which VA is requesting appropriations and/or authorization.
- **Notifications:** VA is required to notify Congress prior to making an obligation in excess of $500,000 from the Advance Planning and Design Fund toward design or development of a major medical facility project.
- **Status Reporting:** VA is required to provide a status report for authorized major medical facility construction projects and leases.
- **Disposal and Reuse Report:** Appendix D fulfills requirements of the Federal Property Management Reform Act of 2016 (P.L. 114-318) and guidance from the Federal Real Property Counsel (FRPC) with the Disposal and Reuse Report and the Summary of Potential Disposals and Enhanced-Use Leases (EULs) FY 2020 – FY 2024.

- **EUL Reporting:** Chapter 9.1 fulfills VA's requirement under 38 U.S.C. 8168 to report to Congress on EULs, including the EUL Consideration Report in Appendix E.

F. Frequently Asked Questions (FAQs)

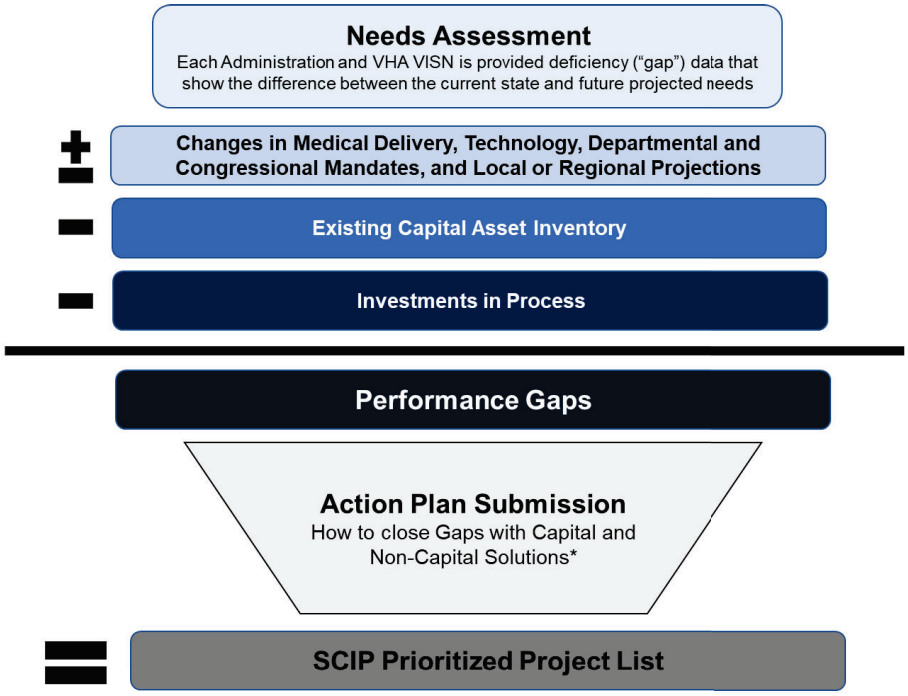
(1) How does a project get placed on the SCIP list?

As shown in the figure below, each year, each Administration (VHA, NCA, VBA) and Staff Offices are provided deficiency ("gap") data that show the difference between the current state and future projected needs, i.e., unmet needs based on certain established performance goals or targets. The SCIP process is revisited each year to make updates based on changes in medical delivery, technology, Departmental and Congressional mandates, and local or regional projections. The SCIP process takes into account the existing portfolio of capital assets, as well as those that are in the process of being built and compares them with future needs.

From the 10-year Action Plan, projects in the first year (or budget year) that are above established thresholds are more fully developed into business cases. The Business Case is structured to align with the SCIP decision criteria (and model), which have priority weights developed by the SCIP Board and approved through the VA Governance process. The only exception is the NRM program; the Action Plan is used to score those projects.

Business Cases are submitted for review and those that meet certain requirements are scored by the SCIP Panel. Project scores (or ratings) are based on how well a project addresses the decision criteria in the SCIP decision model. SCIP Panel ratings are combined with the decision criteria priority weights to calculate a project's total score, which determines its priority rank on the SCIP list.

How a Project is Placed on SCIP List



*Non-Capital solutions enable the field to close gaps without the need for capital projects (ex: extended facility hours, tele-health can help address increasing utilization, but don't typically require capital dollars)

(2) Why is my project listed as a future outyear projects instead of the prioritized SCIP list?

The project was identified by the submitting administration or staff office as needed to close a SCIP gap or gaps, but was not requested in the budget year. The project would need to be re-submitted in a future year for funding consideration. Projects may be submitted in out years due to various reasons, including an inability to execute it in the budget year or a dependency on another project to be completed first.

(3) Why was my project included on the prioritized list last year, but is not included on the list this year?

There are several reasons why a project can be included on the prioritized list in one year, but not included in the next year's list. A project would not be included in the next year's list if it was funded in the previous year; not submitted through the Department-wide SCIP process; or determined not to be a candidate based on VA's assessment of when it would be ready to request funding for the next phase of the project, which is based on project schedules (ability to obligate) and Departmental funding levels. Individual project scores may change each year based on changes to the Business Case application and modifications to the SCIP decision model and weights.

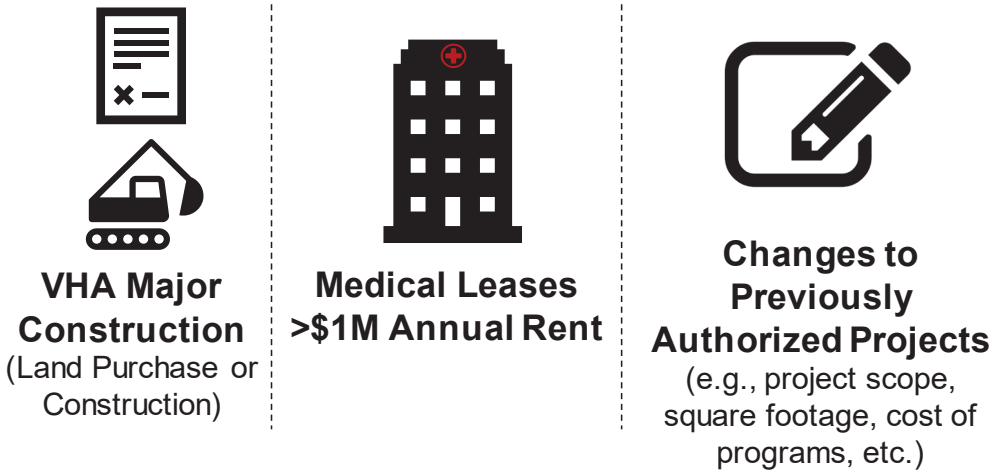
(4) How are prioritized projects funded? Why is VA requesting funding for projects that are lower on the priority list than others that are not proposed for funding?

The projects selected to be included in the funding requests are approved through the VA governance and budget processes. Occasionally projects are funded out of priority order due to policy decisions about certain types of projects, ongoing studies, or scheduling conflicts with other projects at the facility. Funding for a major construction project from the Five Year Development Plan and is based on its priority rank and ability to award a contract in the current fiscal year.

(5) What projects require Congressional Authorization?

Authorization is required for major medical facility construction projects and major medical facility lease projects that require rent payments of $1 million or more per year. Proposed changes to previously-authorized projects, e.g., project scope, square footage, cost of programs, etc., must also receive authorization by Congress before moving forward, even if funding is already available for the project.

Figure 1: Projects Requiring Congressional Authorization



G. Summary of FY 2021 Budget Request

($000)	VHA	NCA	VBA	SO	Total
NRM*	$1,859,022	$0	$0	$0	**$1,859,022**
Major Construction	$1,269,286	$94,000	$0	$9,714	**$1,373,000**
Minor Construction	$243,995	$86,030	$26,475	$43,500	**$400,000**
Total	**$3,372,303**	**$180,030**	**$26,475**	**$53,214**	**$3,632,022**

* NRM amount planned FY 2021 obligations (including plus up funding received in 2018 and 2019).

Page Intentionally Left Blank.

Construction Summary

Budget Highlights

A total of $1,908,000,000 is requested in new budget authority for 2021 for all construction programs. This consists of $1,373,000,000 for Construction, Major; $400,000,000 for Construction, Minor; $90,000,000 for Grants for State Extended Care Facilities; and $45,000,000 for Grants for Construction of Veterans Cemeteries.

Construction Summary of 2021 Request
(Dollars in thousands)

	2019 Actual	2020 Budget Estimate	2020 Current Estimate	2021 Request
Major Construction				
Veterans Health Administration	$2,054,286	$1,053,700	$1,053,700	$1,269,286
National Cemetery Administration	$117,200	$172,000	$172,000	$94,000
Veterans Benefits Administration	$0	$0	$0	$0
General Administration - Staff Offices	$6,000	$9,500	$9,500	$9,714
Total, Major Construction	**$2,177,486**	**$1,235,200**	**$1,235,200**	**$1,373,000**
Minor Construction				
Veterans Health Administration	$530,394	$237,775	$237,775	$243,995
National Cemetery Administration	$190,174	$80,520	$80,520	$86,030
Veterans Benefits Administration	$43,020	$43,395	$43,395	$26,475
General Administration - Staff Offices	$35,926	$32,110	$32,110	$43,500
Total, Minor Construction	**$799,514**	**$398,800**	**$398,800**	**$400,000**
Grants for State Extended Care Facilities	**$150,000**	**$90,000**	**$90,000**	**$90,000**
Grants for State Veterans Cemeteries	**$45,000**	**$45,000**	**$45,000**	**$45,000**

The table above includes additional funding provided by Congress in 2019 for Major Construction and Minor Construction. In 2019, Congress provided additional funding for Non-Recurring Maintenance (NRM) ($800 million); Minor Construction ($150 million); and Major Construction ($1.05 billion).

Capital Mission

The overall mission of VA's capital program focuses on enabling the delivery of benefits and services to Veterans. The primary goal is to have an effective and efficient infrastructure in place that enables these services and benefits to be delivered with high quality and consistency. While having a reliable and flexible infrastructure may not directly drive service improvements, not having the appropriate infrastructure in place can have an immediate and detrimental impact on service delivery. VA leverages the Strategic Capital Investment Planning (SCIP) process to drive this enabler function, by allowing VA to adapt to changes in demographics, medical and information technology and healthcare delivery. The SCIP process continually monitors and assesses performance gaps at our facilities and implements the latest policies affecting capital investments, health care and benefits delivery services. VA's capital programs will continue to strive to fulfill this enabler mission, through leasing, construction, and grants.

Vision/Strategy

To fulfill the mission of VA's infrastructure being the most effective and efficient enabler of service and benefit delivery, capital programs must be constantly monitored, evaluated, and adjusted to meet evolving needs. Determining the construction programs budget requires finding the right balance between the need to fund new projects and the remaining needs of prior year projects. This balance helps to ensure that new projects are being developed for future budget cycles, while not overburdening the system and causing designed projects to become outdated or stale. This strategy creates a rolling plan, adjusted each year based on budget availability and new priorities that may emerge. This also creates agility in the capital programs, allowing them to adapt to changing technologies, standards, and policies that can impact their desired contribution to delivering the mission.

The tool VA uses to help implement this strategy is the SCIP process. Within SCIP, VA has the ability to emphasize critical priority projects at both the national and local level. Departmental priorities are considered in the setting of the criteria used to score and rank projects that are requesting budget resources. Unique local and market level priorities and factors are also direct inputs into these criteria. The outputs of the SCIP process can then be used to balance the need for new projects and priorities versus completing prior year projects. SCIP also provides necessary agility and flexibility across capital programs by identifying the next set of priority projects in the event budget resources shift or become available.

2021 Budget Overview

Funding for the various capital programs are appropriated with funding comprising of one-year, two-year, five-year or no-year funding. This is the amount of time the funding is available to be obligated. If the appropriated funds are not obligated and obligational authority is not extended, then the funds expire and they are returned to the U.S. Department of Treasury. Major Construction and Minor Construction are typically available for five-years, unless specifically identified as otherwise in the appropriation language. Funding for NRM and leasing are included in the *Medical Facilities* appropriation. These funds typically have one-year and two-year funding availability, unless other availability is specifically identified in the appropriation language. Grant funds are no-year and are available until expended. A summary description of each capital program is detailed below:

(1) Major Construction (All Administrations and Staff Offices)

This category includes capital projects to construct, alter, extend, or improve a facility or service where the cost is expected to exceed $20 million (or where funds were previously provided by Congress under the Major Construction appropriation). Projects may address gaps, enhance outpatient and inpatient care, and update special program space, such as spinal cord injury, blind rehabilitation, seriously mentally ill, and long-term care. These projects also include seismic retrofit projects to correct seismic deficiencies. Projects for medical facilities must receive authorization through legislation and must be reviewed and approved through the Congressional budget process. Design and planning funds for medical projects do not require authorization, nor do projects and programs administered by the Veterans Benefits Administration (VBA), National Cemetery Administration (NCA), or Staff Offices. As required by law, VA provides a *Five-Year Development Plan (FYDP)* located on page 8.2-14. to outline planned major projects for the budget year and four years after. In 2021, the major construction request includes funding for seven prior year projects; two new cemetery expansions in San Antonio, TX; and San Diego, CA; and one donation for Community Helping Invest Through Property and Improvements Needed for Veterans Act of 2016 (CHIP-IN) project in Tulsa, OK. For additional information on CHIP-IN projects and requirements, see Chapter 9.2.

(2) Minor Construction (All Administrations and Staff Offices)

This category includes capital projects that construct, alter, extend, or improve any facility with costs equal to or less than $20 million. Minor construction funds can also be used for planning and assessments of needs, which may lead to spending on capital investments and other costs. In FY 2021, the Minor Construction request includes funding for 37 new projects ($101.7 million), completion of prior year projects ($197.5 million), and unplanned urgent need projects, under $1 million in total cost, enhanced use lease (EUL) contributions, or land acquisition ($100.8 million).

(3) Non-Recurring Maintenance (NRM) (Exclusive to the Veterans Health Administration (VHA) and funded out of Medical Facilities Appropriation)

NRM projects are intended to improve existing space without constructing new space. There are three types of NRM projects:

(a) **NRM Sustainment –** These projects involve converting functional space to a different program function within existing buildings or spaces, without adding any new space, at a cost equal to or less than $20 million.

(b) **NRM Infrastructure Modernization –** These projects involve making improvements to, and providing for new, building systems without changing the function of the existing space. There are no dollar limits on project costs, but any work over and above that done on the underlying building system cannot exceed 25% of the total project cost.

(c) **Clinical Specific Initiatives** – These projects are emergent needs that cannot be planned due to dynamic health care environments. Examples of projects include women's health, mental health, high-tech/high-cost medical equipment site prep & installation; donated building site preparation (e.g. Fisher House), and reducing the footprint reduction (demolition or conversion of underutilized space to clinical functions).

(4) Leases (All Administrations and Staff Offices)

In addition to construction, VA leases property from the private sector when a lease is better aligned with the agency's overall capital strategy. VA must receive funding through the annual appropriations process, and approval from the General Services Administration through a delegation of its leasing authority, in advance of entering into an agreement. Leases are funded through appropriations to VA's Medical Facilities account. VA routinely evaluates and revises its leasing process to ensure it is grounded in private sector real estate best practices for healthcare delivery, responsive to the emerging demands of the Veteran population, and fully aligned with Federal budget processes. Leases for medical facilities with rent payments of more than $1 million per year require Congressional authorization; other leases do not require authorization. In FY 2021, VA is requesting funding of $1.05 billion to support ongoing leases and delivery of additional leased facilities during the year.

(5) Grants

VA also engages with states to provide grants for extended homes and cemeteries. Grants assist the states to construct State home facilities, expand, remodel or alter existing buildings, for furnishing domiciliary or nursing home care to Veterans in State homes, or for the establishment, expansion, or improvement of state and tribal Veterans cemeteries. In FY 2021, VA is requesting funding of $90 million for state extended care grants and $45 million for state veterans cemetery grants.

SCIP Process

VA leverages the SCIP process to create an integrated prioritized list of projects from all capital investment accounts (Major Construction, Minor Construction, Major lease, and Minor lease). NRM projects are prioritized independently using a streamlined SCIP process and criteria based on VISN priority, facility condition and VA planning priorities. VA made this change for the FY 2019 process due to the significant number of NRM projects and type of projects (mainly maintenance and building systems corrections).

SCIP is a Department-wide planning process that is designed to improve the delivery of services and benefits to Veterans, their families and survivors by addressing VA's most critical needs and/or performance gaps first, investing wisely in VA's future and significantly improving the efficiency of VA's far-reaching and wide range of activities.

Additionally, SCIP provides a long range strategic plan that allows the Department to adapt to changes in demographics, medical and information technology, and health care and benefits delivery, while at the same time incorporating green building technologies, sustainability, and other infrastructure enhancements. The SCIP process ensures that all project requests are scrutinized and centrally considered at the corporate level with equitable and consistent

distribution across markets and competing capital needs. Each project request is reviewed against performance gaps and evaluated based on its contribution towards addressing those gaps. This process ensures resources are efficiently allocated to address the most critical needs.

Based upon the current cost estimates to remediate all gaps as projected, the full implementation of SCIP would require total resources of approximately $62-$76 billion for capital infrastructure and activation costs. It is important to note that this estimate is a snapshot in time, and it is based on current market conditions, baseline capital portfolio, demographic data and projected needs. The costs provided will likely change as projects move through the investment process and cost estimating and project requirements become more refined. For example, estimates are fine-tuned from action plan to business case to project prospectus (for Major Construction) to final design and construction documents. The need for capital projects may change based on new technology, use of alternative workspace, and increased emphasis on the use of non-capital solutions.

The total magnitude estimate also includes an estimate of activation costs. Activation costs are the logistical and operational requirements to bring a new facility into full planned operation. Estimates of the total cost by administration of all projects included in the SCIP Plan are included in the table below.

Table 1-1: VA Estimated Cost of Full SCIP Implementation by Investment Type, by Administration

Estimated Cost of Full SCIP Implementation ($ in millions)							
	Major	**Leases**	**Minor**	**NRM**	**Other**	**Activation**	**Total Range[1]**
VHA	15,874	1,593	14,970	20,286	23	14,061	66,808
VBA	0	52	225	0	0	1,323	1,599
NCA	512	0	282	0	0	14	809
OIT	0	0	86	0	0	0	86
Staff Offices	0	23	41	0	0	99	163
Total Range	**$14,748-$18,025**	**$1,501-$1,834**	**$14,044-$17,165**	**$18,257-$22,315**	**$21-$26**	**$13,947-$17,046**	**$62,518-$76,411**

[1]Includes activation costs; without these costs the range is $49B to $59B.

Legislative Proposals

VA is requesting three legislative changes that would impact capital programs. VA is requesting language to modify Title 38 to eliminate statutory impediments to develop joint medical facility projects with the Department of Defense. An additional proposal expands VA's EUL authority to give VA more opportunities to engage the private sector and local governments to further repurpose vacant and underutilized VA property beyond supportive housing and reduce the financial burden to maintain these properties. Another proposal requests a change in the

Administrative Provisions (recurring section 209) in annual appropriations legislation that would allow the use of amounts deducted from EUL proceeds to be available until expended. Detailed information about capital legislative proposals are included in *Volume 1, Part 2 Legislative Summaries*.

Conclusion

VA capital programs are geared towards managing priorities for the Department and providing funding for projects that modernize, fix, and upgrade VA facilities and address projected safety, security, seismic, access and capacity needs across the Department. The 2021 budget request provides essential capital investments needed to continue to support the mission. The request will provide much needed new facilities and make high priority improvements at existing facilities and further enable VA to provide the Nation's Veterans with the high-quality health care and timely access to benefits and services that they have earned, while pursuing improved efficiency and fiscal responsibility.

Construction – Major Projects

Budget Request.....$1,373,000,000

Appropriation Language

For constructing, altering, extending, and improving any of the facilities, including parking projects, under the jurisdiction or for the use of the Department of Veterans Affairs, or for any of the purposes set forth in sections 316, 2404, 2406 and chapter 81 of title 38, United States Code, not otherwise provided for, including planning, architectural and engineering services, construction management services, maintenance or guarantee period services costs associated with equipment guarantees provided under the project, services of claims analysts, offsite utility and storm drainage system construction costs, and site acquisition, where the estimated cost of a project is more than the amount set forth in section 8104(a)(3)(A) of title 38, United States Code, or where funds for a project were made available in a previous major project appropriation, [$1,235,200,000] *$1,373,000,000*, of which [$1,036,600,000] *$980,638,000* shall remain available until September 30, [2024] 2025, and of which [$198,600,000] *$392,362,000* shall remain available until expended, of which [$35,000,000] *$237,198,000* shall be available for seismic improvement projects and seismic program management activities, including for projects that would otherwise be funded by the Construction, Minor Projects, Medical Facilities, or National Cemetery Administration accounts: *Provided*, That except for advance planning activities, including needs assessments which may or may not lead to capital investments, and other capital asset management related activities, including portfolio development and management activities, *and planning cost estimating and design for major medical facility projects and major medical facility leases* and investment strategy studies funded through the advance planning fund and the planning and design activities funded through the design fund, including needs assessments which may or may not lead to capital investments, and funds provided for the purchase, security, and maintenance of land for the National Cemetery Administration through the land acquisition line item, *funds provided for construction of gravesite expansion projects at existing National Cemeteries, and legal expenses incurred for programs and activities funded by this account,* none of the funds made available under this heading shall be used for any project that has not been notified to Congress through the budgetary process or that has not been approved by the Congress through statute, joint resolution, or in the explanatory statement accompanying such Act and presented to the President at the time of enrollment: Provided further, That such sums as may be

necessary shall be available to reimburse the "General Administration" account for payment of salaries and expenses of all Office of Construction and Facilities Management employees to support the full range of capital infrastructure services provided, including minor construction and leasing services: Provided further, That funds made available under this heading for fiscal year [2020] 2021, for each approved project shall be obligated: (1) by the awarding of a construction documents contract by September 30, [2020] 2021; and (2) by the awarding of a construction contract by September 30, [2021] 2022: *Provided further*, That the Secretary of Veterans Affairs shall promptly submit to the Committees on Appropriations of both Houses of Congress a written report on any approved major construction project for which obligations are not incurred within the time limitations established above: *Provided further*, That notwithstanding the requirements of section 8104(a) of title 38, United States Code, amounts made available under this heading for seismic improvement projects and seismic program management activities shall be available for the completion of both new and existing seismic projects of the Department *(Military Construction, Veterans Affairs, and Related Agencies Appropriation, 2020.)*

Construction, Major Projects

Program Description

The Construction, Major Projects appropriation provides for constructing, altering, extending, and improving any VA facility, including planning, architectural and engineering services, assessments, and site acquisition, where the estimated cost of a project is over $20,000,000, or where funds for a project were made available in a previous appropriation under this heading.

An amount $1,373,000,000 is requested for the 2021 Construction, Major, appropriation. The projects selected for inclusion in the 2021 budget request represent the top Departmental priority projects developed through a comprehensive analysis to ensure national cemeteries remain open and to address critical medical center requirements for the Veterans Health Administration. (VHA). The major construction request includes funding for medical facility projects at American Lake, WA; Long Beach, CA; Canandaigua, NY; Alameda, CA; San Diego, CA; Livermore, CA; and Dallas, TX; and two national cemetery expansion programs in the areas of San Antonio, TX and San Diego, CA. The request also includes funds for a CHIP-IN-eligible project in Tulsa, OK that would provide an inpatient facility. The request also includes funding for various requirements that support the Major Construction program, such as asbestos, seismic corrections, and land acquisition for cemeteries.

In 2010, VA developed the Strategic Capital Investment Planning (SCIP) Process to identify and prioritize the capital infrastructure needed to meet existing gaps in safety, security, access, utilization, space, facility condition and other areas. Since the 2012 budget request, the SCIP process has served as the basis for prioritizing projects and informing VA capital investment funding decisions. Prior year partially funded major projects were integrated and reprioritized into the 2015 SCIP process using current gaps to ensure these projects were appropriately scoped to meet existing and current projected needs (space, utilization, access, etc.).

VA has undergone a profound transformation in the delivery of health care over the two last decades, moving from a hospital-driven health care system to an integrated delivery system that emphasizes a full continuum of care. New technology and treatment modalities have changed how and where care is provided, with a significant shift from inpatient to outpatient services. Most of VHA's infrastructure was designed and built decades ago, under a different concept of health care delivery (i.e., hospital-centered inpatient care and long admissions for diagnosis and treatment). As a result, VHA's capital assets often do not fully align with current health care delivery practices for optimal efficiency, access, patient safety and security. VA is continuing to invest its capital dollars to address these areas and provide for additional burial services and benefits delivery.

The goal of the VHA major construction program is to ensure VA facilities are safe and modern, to enhance outpatient and inpatient care, as well as to update special program space, such as spinal cord injury, blind rehabilitation, seriously mentally ill, and long-term care through the appropriate sizing, upgrading, and location of VA facilities.

Major Appropriation Highlights - Summary

(Dollars in thousands)

		2020			
	2019 Actual	Budget Estimate	Current Estimate	2021 Request	2020-2021 Inc./Dec.
Appropriation	$2,177,486	$1,235,200	$1,235,200	$1,373,000	$137,800
Recoveries of Prior Year Obligations	$31,498	$0	$0	$0	$0
Other Appropriations Realized*	$326,300	$0	$35,000	$0	($35,000)
Total Budgetary Resources	$2,535,284	$1,235,200	$1,270,200	$1,373,000	$102,800
Un-obligated Balance brought Forward**	$1,488,570	$2,186,267	$2,807,777	$2,275,425	($532,352)
Un-obligated Balance end of year	$2,807,777	$1,404,947	$2,275,425	$2,006,179	($269,246)
Obligations**	$1,216,077	$2,016,520	$1,802,552	$1,642,246	($160,306)
Outlays	$1,117,176	$2,055,247	$1,345,727	$1,358,727	$13,000

* These are funds for prior fiscal years (FY 2016, FY 2017 and FY 2018) that were previously withheld from the Major Construction appropriation for Super Projects (>$100M). Congress legislated that these funds could only be released dependent on the acceptance by a non-departmental Federal entity to manage the projects, and Congressional notification that the acceptance occurred. After congressional notification, the funds were made available to VA. This appropriation language also stated funds from prior years were not subject to this requirement.

** Includes funds from expired budgetary resources

Summary of Budget Request
(dollars in thousands)

$1,373,000,000 is requested for the 2021 Construction, Major, appropriation. A summary of the program funding level by activity follows:

	2021 Request ($000)
Veterans Health Administration	$1,269,286
National Cemetery Administration	$94,000
General Administration - Staff Offices	$9,714
Total, Construction Major Program	**$1,373,000**

Changes from Original 2020 Budget Estimates
(dollars in thousands)

	Budget Estimate	Current Estimate	Increase (+) Decrease (-)
Appropriation	$1,235,200	$1,235,200	$0
Other Appropriations Realized*	$0	$35,000	$35,000
Budgetary Resources	$1,235,200	$1,270,200	$35,000
Un-obligated Balance brought Forward**	$2,186,267	$2,807,777	$621,510
Un-obligated Balance end of year	$1,404,947	$2,275,425	$870,478
Obligations**	$2,016,520	$1,802,552	($213,968)
Outlays	$2,055,247	$1,345,727	($709,520)

* These are funds for prior fiscal years (FY 2016, FY 2017 and FY 2018) that were previously withheld from the Major Construction appropriation for Super Projects (>$100M). Congress legislated that these funds could only be released dependent on the acceptance by a non-departmental Federal entity to manage the projects, and Congressional notification that the acceptance occurred. After congressional notification, the funds were made available to VA. This appropriation language also stated funds from prior years were not subject to this requirement.

** Includes funds from expired budgetary resources

Major Appropriation Highlights by Administration (Dollars in thousands)		2020			
	2019 Actual	Budget Estimate	Current Estimate	2021 Request	2020-2021 Inc./Dec.
Veterans Health Administration (VHA)					
Appropriation	$ 2,054,286	$ 1,053,700	$ 1,053,700	$ 1,269,286	$ 215,586
Recoveries of Prior Year Obligations	$ 27,377		$ -	$ -	$ -
Other Appropriations Realized*	$ 326,300		$ 35,000	$ -	$ (35,000)
Budgetary Resources	$ 2,407,963	$ 1,053,700	$ 1,088,700	$ 1,269,286	$ 180,586
Un-obligated Balance brought Forward**	$ 1,154,776	$ 2,359,739	$ 2,541,524	$ 2,027,222	$ (514,302)
Un-obligated Balance end of year	$ 2,541,524	$ 1,593,075	$ 2,027,222	$ 1,777,407	$ (249,815)
Obligations**	$ 1,021,215	$ 1,820,364	$ 1,603,002	$ 1,519,101	$ (83,901)
Outlays	$ 970,044	$ 1,909,563	$ 1,200,043	$ 1,211,898	$ 11,855
National Cemetery Administration (NCA)					
Appropriation	$ 117,200	$ 172,000	$ 172,000	$ 94,000	$ (78,000)
Recoveries of Prior Year Obligations	$ 3,994		$ -	$ -	$ -
Budgetary Resources	$ 121,194	$ 172,000	$ 172,000	$ 94,000	$ (78,000)
Un-obligated Balance brought Forward**	$ 325,824	$ 186,858	$ 257,182	$ 239,632	$ (17,550)
Un-obligated Balance end of year	$ 257,182	$ 172,202	$ 239,632	$ 220,487	$ (19,145)
Obligations**	$ 189,836	$ 186,656	$ 189,550	$ 113,145	$ (76,405)
Outlays	$ 140,623	$ 140,939	$ 140,939	$ 141,305	$ 366
General Administration - Staff Offices					
Appropriation	$ 6,000	$ 9,500	$ 9,500	$ 9,714	$ 214
Recoveries of Prior Year Obligations	$ 127	$ -	$ -	$ -	$ -
Budgetary Resources	$ 6,127	$ 9,500	$ 9,500	$ 9,714	$ 214
Un-obligated Balance brought Forward**	$ 7,970	$ 970	$ 9,071	$ 8,571	$ (500)
Un-obligated Balance end of year	$ 9,071	$ 970	$ 8,571	$ 8,285	$ (286)
Obligations**	$ 5,026	$ 9,500	$ 10,000	$ 10,000	$ -
Outlays	$ 6,509	$ 4,745	$ 4,745	$ 5,524	$ 779

* These are funds for prior fiscal years (FY 2016, FY 2017 and FY2018) that were previously withheld from the Major Construction appropriation for Super Projects (>$100M). Congress legislated that these funds could only be released dependent on the acceptance by a non-departmental Federal entity to manage the projects, and Congressional notification that the acceptance occurred. After congressional notification the funds were made available to VA. This appropriation language also stated funds from prior years were not subject to this requirement.

** Includes funds from expired budgetary resources

Detail of Request
(Dollars in thousands)

Major Construction Detail of Request ($ in 000's) (Dollars in thousands)				
Location	**Description**	**Total Estimated Cost**	**Funding Through 2020**	**2021 Request**
Veterans Health Administration (VHA)				
American Lake, WA	Construction of New Specialty Care Building 201	$ 110,600	$ 16,260	$ 94,340
Long Beach, CA	Mental Health & Community Living Center	$ 367,300	$ 317,300	$ 50,000
Canandaigua, NY	Construction & Renovation	$ 443,900	$ 353,741	$ 30,000
Alameda, CA	Community Based Outpatient Clinic & National Cemetery	$ 310,500	$ 113,332	$ 152,868
San Diego, CA	SCI and Seismic Building 11	$ 311,700	$ 230,840	$ 21,260
Livermore, CA	Realignment and Closure of the Livermore Campus	$ 505,000	$ 311,730	$ 143,270
Dallas, TX	Spinal Cord Injury	$ 265,600	$ 170,500	$ 78,500
Tulsa, OK	Construct Inpatient Facility	$ 220,900	$ -	$ 120,000
Advance Planning and Design Fund	Various Stations			$ 117,781
Asbestos	Various Stations			$ 15,000
Construction & Facilities Management Staff	Various Stations			$ 102,719
Hazardous Waste	Various Stations			$ 2,000
Judgment Fund	Various Stations			$ 25,000
Non-Departmental Federal Entity Project Management Support	Various Stations			$ 79,350
Seismic Corrections	Various Stations			$ 237,198
	Subtotal, Line Items			**$ 579,048**
Total VHA		**$ 2,535,500**	**$ 1,513,703**	**$ 1,269,286**
National Cemetery Administration (NCA)				
San Antonio, TX	Ft. Sam Houston Expansion	$ 56,000	$ -	$ 56,000
San Diego, CA	Miramar Phase 2 Expansion	$ 31,000	$ -	$ 31,000
Advance Planning Fund	Various Stations			$ 2,000
NCA Land Acquisition Fund	Various Stations			$ 5,000
	Subtotal, Line Items			**$ 7,000**
Total NCA		**$ 87,000**	**$ -**	**$ 94,000**
General Administration/Staff Offices				
Department APDF for Major				$ 9,714
Total Staff Offices				**$ 9,714**
Total, Major Construction		**$ 2,622,500**	**$ 1,513,703**	**$ 1,373,000**

Update on West Los Angeles Campus:

In January 2016, a framework Draft Master Plan was adopted to revitalize the 388-acre West Los Angeles (WLA) Campus into a welcoming and vibrant community where Veterans can live and receive state-of-the-art healthcare, benefits, services, and support. The Los Angeles Leasing Act of 2016 (Public Law 114-226) modified VA's Enhanced Use Lease (EUL) authority to enable partnerships with qualified developers to revitalize certain buildings and land on the West LA campus. The goal was to provide permanent housing and supportive services for homeless Veterans. The developers are responsible for financing, designing, building, and operating these EUL projects over the full term of the lease.

VA entered into an EUL in May 2017, with the Veterans Housing Partnership, LLC (Shangri-La Construction, LLC with Step Up, Inc. as the service provider) for Building 209 on the Greater Los Angeles Healthcare System (GLAHS)-WLA campus. The project consists of 55 units of permanent housing for Veterans and their families.

VA selected Shangri-La Construction in June 2017 as the preferred developer to renovate, maintain and operate Buildings 205 and 208 on the GLAHS – WLA campus. The project will yield 122 units (120 units plus 2 managers units) of permanent supportive housing for Veterans. VA and Building 205 Holdings, LLC, and Building 208 Holdings, LLC (Shangri-La Construction, LLC) entered into an EUL in December 2019.

A West LA Veterans Collective, LLC, was selected in November 2018, as Principal Developer (PD). The PD will provide at least 900 units of housing, bringing the total to approximately 1,200 units of supportive housing for homeless Veterans. The Department is proceeding with executing the first phase of that plan, consisting of approximately 490 units of housing to be delivered over the next several years, with the balance of housing to be phased in over 10 years. The first building to be developed by the PD is Building 207, and the initial due diligence is underway. Buildings 156 and 157 are also under consideration for reuse by the PD, and the phasing of these buildings will be determined by the developer. VA will continue to keep Congress informed throughout the ongoing, revitalization efforts.

In addition to the EULs, WLA has a robust Major Construction Program to address seismic risks and modernize healthcare delivery and medical research.

Major Project Prospectuses Index

Location	Description	Page No.
Veterans Health Administration (VHA)		
American Lake, WA	Construction of New Specialty Care Building 201	2-11
Long Beach, CA	Mental Health & Community Living Center	2-19
Canandaigua, NY	Construction & Renovation	2-27
Alameda, CA	Community Based Outpatient Clinic & National Cemetery	2-35
San Diego, CA	SCI and Seismic Building 11	2-43
Livermore, CA	Realignment and Closure of Livermore Campus	2-51
Dallas, TX	Spinal Cord Injury	2-61
Tulsa, OK	Construct Inpatient Facility	2-69
National Cemetery Administration (NCA)		
San Antonio, TX	Fort Sam Houston – Gravesite Expansion	2-75
San Diego, CA	Miramar – Phase 2 Expansion	2-79
Departmental Line-Items		
Advance Planning and Design Fund	Various Stations	2-83
Asbestos	Various Stations	2-85
Hazardous Waste	Various Stations	2-86
Construction & Facilities Management Staff	Various Stations	2-87
Judgment Fund	Various Stations	2-88
Non-Departmental Federal Entity Project Management Support	Various Stations	2-89
NCA Land Acquisition Fund	Various Station	2-90
Seismic Corrections	Various Stations	2-91

Page Intentionally Left Blank

Tacoma, Washington
American Lake VAMC: Construction of New Specialty Care Building 201

Funding of $94,340,000 requested in this FY 2021 budget will provide for construction of Building 201, a new outpatient clinic.

This project constructs a new outpatient facility, renovates Building 18, and includes all necessary site work, a parking expansion, and the demolition of ancillary buildings in the footprint of the new building.

I. Budget Authority:

Total Estimated Cost	Available Through 2020 Request	2021 Request	Future Request
$110,600,000	$16,260,000	$94,340,000	$0

Detail of Project Phases

The project phase being requested this year is the construction of the outpatient clinic and the associated site work. Design was funded in FY 2009. Building demolition preceding new construction, the renovation of Building 18, and construction documents for the renovation of Buildings 81/81AC were funded and authorized in FY 2016. The project elements documented in previous budget submissions related to Building 81/81AC are being executed using seismic funding. The table below provides more details on the phases being requested this year.

Project Phases Included in the FY 2021 Request

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
Construction of Building 201: Outpatient Clinic	$94,340	0	76,125	$0	$0

The table below provides details on all phases in this project, listed by the fiscal year funds were requested and then by phase. Major construction project funds are required to be appropriated and authorized.

Total Project Scope (Sorted by Fiscal Year and Phase)

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
FY 2009					
Design	$7,352	0	0	$0	$5,260
FY 2016					
Renovation of Building 18, Site Preparation for Building 201, and Construction Documents for Renovation of Buildings 81/81AC	$8,908	19,651	0	$16,260	$11,000
FY 2021					
Construction of Building 201: Outpatient Clinic	$94,340	0	76,125	$0	$0
American Lake Totals	**$110,600**	**19,651**	**76,125**	**$16,260**	**$16,260**

II. Priority Score: FY 2015 – 0.4712
Major Construction projects are funded based on their priority ranking and on their ability to award construction contracts in the current fiscal year.

III. Description of Project:
This project is located at the American Lake Division of the VA Puget Sound Health Care System (VAPSHCS) and constructs a 76,125 gross square feet (GSF) seismically-safe modern outpatient medical facility (Building 201) to accommodate functions being relocated out of seismically-deficient Building 81 (circa 1947 main hospital building). The new building will house ambulatory Specialty Care, Ancillary and Diagnostic services, and necessary support services. Site work, parking expansion and demolition of ancillary buildings in the footprint of the new building is included. Building 18 will also be renovated to accommodate select functions being displaced out of the buildings being demolished.

Subsequent renovations completed using seismic funding will seismically upgrade Building 81 and fully renovate all interior spaces therein. The renovations will also include the adjacent Building 81AC as it will be impacted by the structural improvements associated with Building 81.

IV. Alternatives to Construction Considered
Status Quo:
The status quo alternative would maintain the services at the original, antiquated, 70-year-old American Lake facilities. The original design and layout of these facilities do not permit VA to provide healthcare services in an operationally efficient manner. The campus is a nominee for the National Register of Historic Places, which limits any potential improvements to the building

footprint for inpatient care through building additions and alterations. Recurring maintenance costs for underutilized buildings place an additional burden on VA. This alternative would not address any facility condition and current or projected workload deficiencies, and would not correct seismic deficiencies at the facility, which makes it the least preferred alternative.

Alternative 1: New Construction and Renovation (Preferred Alternative)
This alternative would construct a new 76,125 GSF multi-story ambulatory medical building, renovate Building 18, expand parking, and demolish several ancillary buildings on the existing American Lake campus. The new building would house ambulatory care functions for specialty care, outpatient surgery and support services, would be built to Leadership in Energy and Environmental Design (LEED) Silver standards and would meet historical, architectural, security and life safety standards. The proposed new building would address significant improvements in space planning, functional layout, patient privacy, wayfinding, staffing efficiencies, and utility services to meet current and projected gaps associated with workload and space. Due to the expected improvements in satisfaction for both patients and employees, this alternative is the preferred alternative.

Alternative 2: Renovation
In this alternative, Building 81 (96,577 GSF) would be renovated to correct seismic and life safety deficiencies. The interior of Building 81 would be totally renovated to accommodate Primary Care demand and improve space planning, functional layout, patient privacy, wayfinding, staffing efficiencies, and utility upgrades. However, renovation alone of Building 81 cannot mitigate the overall space gap, nor provide space to accommodate the necessary Specialty Care or Ancillary and Diagnostic spaces to meet demand. Furthermore, the renovation of Building 81 has been removed from the scope of this project, because it will be completed using seismic funding. For these reasons, this alternative is not the preferred alternative and has been excluded from the quantitative analysis below.

Alternative 3: Lease
In this alternative, VA would lease an approximately 70,945 net usable square feet (NUSF) (equivalent to the approximately 95,776 GSF required for this project) facility in the vicinity of the American Lake VAMC to provide the same Primary Care, Specialty Care, and support services that would be provided in the preferred alternative. Although VA services would occupy space that meets all seismic and life safety standards, this alternative would likely disrupt the continuity of care currently offered at the existing campus. A leased facility may not be located proximate to the existing campus and patients may be required to travel between multiple points of care for treatment. In addition, this alternative is not cost effective, relative to the preferred alternative. For these reasons, this alternative is not the preferred alternative.

Alternative 4: Contract Out
This alternative would involve contracting out existing services in Building 81, which include Primary Care, Emergency Services, Women's Health and Geriatric Care; Specialty Care including Cardiology, Dermatology, Gastroenterology, Podiatry and Urology; Ambulatory Surgery and Recovery and Sterile Processing and Distribution; all ancillary services for Pharmacy, Radiology,

Laboratory and Pathology; all diagnostic services for Electrocardiogram (EKG), Electroencephalogram (EEG), CAT Scan (CT) and Dexascan. There may not be sufficient, qualified private healthcare providers in the Tacoma, WA area to absorb the current and projected Veteran workload. In addition, this alternative would not provide for the correction of seismic deficiencies or the renovation and reuse of Building 18 and may be more costly and result in a loss of quality and control over Veteran healthcare. For these reasons, this alternative is not the preferred alternative.

Alternative 5: Acquisition of an Existing Facility through Purchase

This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and to accommodate all project requirements in the same manner as the new construction alternative. However, high-level market research and interviews with local VA planners has indicated that a suitable facility for possible acquisition and subsequent renovation that would meet all project requirements in the same manner as the preferred alternative does not exist in the delineated market area (10-mile radius of the American Lake VAMC) of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6: Collaboration with DoD for a Joint Facility

This alternative proposes to lease a new facility, with the Department of Defense (DoD) as a sub-lessee. This alternative would address all project requirements in the same manner as the preferred alternative. However, according to VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no facility sharing opportunities in the vicinity of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquisition*	Ancillary Services**	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE
Status Quo	$14,816	$3,383,700	$0	$3,398,516	471	N/A
New Construction and Renovation	$121,039	$3,148,331	$39,603	$3,308,972	525	54
Renovation	N/A	N/A	N/A	N/A	N/A	N/A
Lease	$29,159	$3,171,394	$39,603	$3,240,155	525	54
Contract Out	$74,027	$4,838,530	$0	$4,912,557	0	(471)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A

*This is the total estimated cost for construction/renovation projects or build-out (special purpose renovations) for leases, in discounted dollars.

**This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template)

VI. Analysis of Benefits

The preferred alternative, New Construction and Renovation, delivers the best benefit to VA by reusing an existing asset (Building 18) and constructing a new building to house care and services currently provided in the seismically deficient Building 81, the existing concrete frame main

hospital at the American Lake VAMC. As discussed in the previous section: Status Quo does not address any of the existing facility deficiencies or current and projected workload gaps; Lease would negatively impact the continuity of care; Contract Out could result in a loss of quality and control over Veteran health care; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. This project will allow VA to continue delivering world-class health care to Veterans in a modern, seismically safe environment of care. By building a new outpatient care building to house patients currently treated in Building 81, this project mitigates numerous seismic concerns and life safety risks.

The relocation of existing services from Building 81 to the newly constructed Building 201 will allow for a subsequent renovation and necessary seismic corrections of Buildings 81 and 81AC. Building 81 currently serves as the primary health care delivery site and provides all the core medical services of Primary and Specialty Care, surgical procedures and ancillary services on this campus. Building 81, with unreinforced concrete masonry infill walls, was built in 1947 and poses a life-safety risk to patients. Building 81 is on the VA priority ranking list of seismically Exceptionally High Risk (EHR) Buildings and is classified as mission critical by VHA and VISN 20.

The New Construction alternative, with total life cycle costs of $3.3 billion, would be the best solution to support VA's strategic goals and objectives and close gaps identified by the SCIP process. As VA has already begun planning for this alternative, the proposed project would also enable VA to achieve service and mission goals and objectives sooner than the other alternatives.

The proposed projects align with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
    - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
    - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner
2. Excellent Customer Service and Highly Reliable and Integrated Care
    - VA has collaborative, high-performing and integrated delivery networks that enhance Veteran well-being and independence
3. Improved Trust, Accountability, and Transparency
    - VA is always transparent to enhance Veterans' choices, to maintain trust, and to be openly accountable for its actions
4. Transform Business Operations
    - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change (2017-2037)
Veteran Population	379,415	351,717	325,768	282,220	-25.6%
Enrollees	143,543	157,323	163,600	162,400	13.1%

*Data reflects the VISN 20, Western Washington market.

VIII. Workload*

	2017	2022	2027	2037	Change (2017-2037)
Ambulatory Procedures	89,609	115,917	135,532	158,697	77.1%
Ambulatory Services	1,183,509	1,575,310	1,874,641	2,239,515	89.2%
Mental Health Stops	67,951	81,134	76,952	69,803	2.7%
Mental Health Services	215,034	286,238	352,603	465,318	116.4%

*Data reflects workload for VISN 20, Western Washington market; Pharmacy and Laboratory and Pathology Stops are excluded.

IX. Schedule – This Phase

Award Construction Documents	February 2019
Award Construction Contract	September 2021
Complete Construction	June 2024

X. Project Cost Summary of the Chosen Option

New Construction:	76,125 GSF	$53,634,000
Renovation:	19,651 GSF	$4,312,000
Demolition:	22,854 GSF	$594,000
Other Construction Costs:		
Pre-Design Development Allowance		$4,879,000
Total Other Costs (Utilities, etc.)		$25,016,000
Subtotal Estimated Base Construction Cost		**$88,435,000**
Other Non-Construction Costs:		
Construction Contingency		$4,617,000
Technical Services		$8,844,000
Impact Costs		$0
Construction Management		$235,000
Site Acquisition		$0
Utility Agreements		$0
Subtotal Estimated Base Costs		**$102,131,000**
Inflation Allowance / Locality Adjustment		$8,469,000
Total Estimated Cost		**$110,600,000**

XI. Operating Costs of the Chosen Option

Present Facility	
Square Footage Involved	Building 18: 19,651 GSF
Current FTE	975
Total Operating Costs[1]	**$124,593,214**
Ancillary Services	*$12,092,292*
Personnel Services	*$112,500,922*
Other Recurring Costs	*N/A*
Proposed Project	
Square Footage Involved	New Construction: 76,125 GSF Renovation: 19,651 GSF Demolition: 22,854 GSF
Net New FTE	54
Incremental Operating Costs[2]	**$6,900,547**
Ancillary Services	*$669,727*
Personnel Services	*$6,230,820*
Other Recurring Costs	*N/A*
Total Operating Costs[1]	**$131,493,761**
Non-Recurring Activations	**$31,108,426**
Furniture, Fixtures & Equipment (FF&E)	*$24,886,741*
Non-Recurring Support	*$6,221,685*

[1]Operating costs recur on an annual basis for resources (including staff) necessary to support services to be provided from the space being built or remodeled.
[2]Incremental operating costs are net of present facility. These are not indicative of the total operating costs for the project at completion.

Page Intentionally Left Blank

Long Beach, California
Mental Health and Community Living Center

Funding of $50,000,000 requested in this FY 2021 budget will provide for the completion of previously authorized project phases and provide sufficient contingencies to ensure project completion.

This project is for the demolition of seismically deficient buildings, construction of a Mental Health Facility (Phase One), a Community Living Center (CLC) (Phase Two), parking structure, and combined heat and power (CHP) plant at the VA Long Beach Healthcare System (VALBHS) in Long Beach, CA.

I. Budget Authority:

Total Estimated Cost	Available Through 2020 Request	2021 Request	Future Request
$367,300,000	$317,300,000	$50,000,000	$0

Detail of Project Phases
The funding requested this year will provide for construction funding and sufficient contingencies to ensure project completion. Design was funded in FY 2010. Construction of the mental health facility and parking structure was funded in FY 2015. The first portion of the construction of the CLC was funded in FY 2016 and the CHP and remaining balance was funded in FY 2017. No future funding will be required for the completion of this project. The table below provides more details on the phases being requested this year.

Project Phases Included in the FY 2021 Request

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
Completion of Project	$50,000	0	0	$0	$0

The table below provides details on all phases in this project, listed by the fiscal year funds were requested and then by phase. Major construction project funds are required to be appropriated and authorized.

Total Project Scope (Sorted by Fiscal Year and Phase)

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
FY 2010					
Design	$24,200	0	0	$0	$24,200
FY 2015					
Construction of Mental Health Facility, Demolition, and Parking Structure	$101,900	0	162,000	$126,100	$101,900
FY 2016					
Initial Construction of CLC and Demolition	$161,000	0	181,000	$161,000	$161,000
FY 2017					
Complete Construction of CLC and CHP	$30,200	0	Included in FY 2016	$30,200	$30,200
FY 2021					
Completion of Project	$50,000	0	0	$0	$0
Long Beach, CA Totals	**$367,300**	**0**	**343,000**	**$317,300**	**$317,300**

II. Priority Score: FY 2015 – 0.3575
Major Construction projects are funded based on their priority ranking and on their ability to award construction contracts in the current fiscal year.

III. Description of Project:
This project proposes to construct a new 120-bed CLC, a Mental Health Inpatient and Outpatient Facility, a parking structure, and a CHP plant to replace existing, seismically deficient buildings.

Existing Buildings 128 (Mental Health) and 133 (CLC) will be demolished along with several minor buildings and structures. Buildings 128 and 133 are identified in the Degenkolb Exceptionally High Risk (EHR) building status list. Other buildings that will be demolished include buildings 3, 4, 11, 47, 89, 90, 136, and T162. Four structures identified as buildings 40, 92, 123 and 154 will also be demolished. Construction will also include a new parking structure of approximately 500 spaces and installation of a CHP plant and renewable energy sources. Construction of the facilities, infrastructure enhancements and site development work, such as utilities and landscaping, surface parking, connecting corridors, and temporary swing spaces are included within the scope of this project.

IV. Alternatives Considered
Status Quo:
The status quo alternative would continue to house the CLC and Mental Health services in the existing, high-risk seismically deficient buildings. In addition to the seismic life safety issues, this

alternative also does not address any of the other current facility condition deficiencies, which hamper the VAMC's ability to provide modern healthcare to Veterans. Therefore, this alternative is the least preferred.

Alternative 1: New Construction (Preferred Alternative)
This alternative involves demolishing Building 133 (CLC) and Building 128 (Mental Health) and replacing them with two new seismically compliant buildings. This option also reduces recurring operating costs and maintenance costs by replacing old maintenance-intense and energy inefficient building service equipment with new energy efficient equipment and provides new, state-of-the-art space to deliver the best possible care to Veterans. For these reasons, this is the preferred option.

Alternative 2: Renovation
This alternative renovates Buildings 133 and 128 only. VA would not construct permanent new buildings. The likely result of renovation is the aggravation and increased dysfunction of building space. New seismic shear walls required to comply with seismic codes will segment the building space, disrupting operational efficiency and breaking up contiguous spaces. In addition, it is not physically possible to renovate Building 133 in a way that would eliminate semi-private rooms and replace them with private rooms, baths and showers to comply with current privacy standards. Since this alternative is not feasible, it was excluded from financial analysis.

Alternative 3: Lease
With this alternative, VA would lease an approximately 254,074 net usable square feet (NUSF) (equivalent to approximately 343,000 GSF) facility off campus that could accommodate CLC and Mental Health facilities in the same manner as the New Construction alternative. However, care would be provided in a location apart from the existing clinical and ancillary support services at the VALBHS, which would negatively impact the continuity of care if Veterans would have to travel to different places for different services. Further, this alternative would not address the existing seismic deficiencies at the VALBHS. For these reasons, this alternative is not the preferred alternative.

Alternative 4: Contract Out
This alternative proposes to contract out all inpatient and outpatient services to other area healthcare providers in the community. This alternative assumes that all services and programs currently housed in Buildings 128 and 133 would be contracted out to providers in the local community. There may not be sufficient, qualified private healthcare providers in the Long Beach, CA area to absorb the current and projected Veteran workload. In addition, this alternative may be more costly and result in a loss of quality and control over Veteran healthcare. For these reasons this alternative is not the preferred alternative.

Alternative 5: Acquisition of an Existing Facility through Purchase
This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and that would accommodate all project requirements in the same manner as the preferred alternative. However, high-level market research and interviews with local VA planners has indicated that a suitable facility for possible acquisition and subsequent renovation that would

meet all project requirements in the same manner as the preferred alternative does not exist in the delineated market area (10-mile radius of the VALBHS) of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6: Collaboration with DoD for a Joint Facility

This alternative proposes to construct a new integrated facility in collaboration with the Department of Defense (DoD) in the vicinity of the existing VAMC to provide space for existing services and functions. Although VA has a strong collaboration and various sharing agreements in place with DoD, and serves as a TRICARE provider for the LA and Orange County areas, there are currently no concrete plans for a joint facility. Therefore, this alternative has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquisition*	Ancillary Services**	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE
Status Quo	$39,393	$3,595,359	$0	$3,634,752	3,179	N/A
New Construction	$412,978	$3,484,233	$29,895	$3,927,105	3,379	200
Renovation	N/A	N/A	N/A	N/A	N/A	N/A
Lease	$112,128	$3,624,766	$29,895	$3,766,788	3,379	200
Contract Out	$168,203	$3,957,280	$0	$4,125,483	2,000	(1,179)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A

*This is the total estimated cost for construction/renovation projects or build-out (special purpose renovations) for leases, in discounted dollars.

**This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template)

VI. Analysis of Benefits

The preferred alternative, New Construction, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo would not address any of the existing facility deficiencies; New Lease would negatively impact the continuity of care; Contract Out could result in a loss of quality and control over Veteran health care; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. New Construction, with a total life cycle cost of $3.9 billion, offers the best value solution to address VA's existing facility condition deficiencies and support strategic goals and objectives to provide high-quality, reliable, and efficient care. The preferred alternative will provide state-of-the-art CLC and Mental Health facilities, offering local Veterans access to high quality care.

The proposed projects align with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
   - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner

2. Excellent Customer Service and Highly Reliable and Integrated Care
   - VA has collaborative, high-performing and integrated delivery networks that enhance Veteran well-being and independence
3. Improved Trust, Accountability, and Transparency
   - VA is always transparent to enhance Veterans' choices, to maintain trust, and to be openly accountable for its actions
4. Transform Business Operations
   - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change (2017-2037)
Veteran Population	490,911	393,780	321,521	227,452	-53.7%
Enrollees	213,609	206,226	192,447	163,109	-23.6%

*Data reflects the VISN 22, Greater Los Angeles market.

VIII. Workload*

	2017	2022	2027	2037	Change (2017-2037)
CLC Bed Days of Care	98,933	93,227	88,429	74,315	-24.9%
Mental Health Beds Days of Care	31,073	28,224	24,212	19,351	-37.7%
Ambulatory Mental Health Stops	316,160	272,316	231,550	179,167	-43.3%
Ambulatory Mental Health Services	413,626	499,674	562,502	649,677	57.1%

* Data reflects the VISN 22, Greater Los Angeles market .

IX. Schedule

Award Construction Documents	February 2022
Award Construction Contract	November 2022
Complete Construction	November 2023

X. Project Cost Summary of the Chosen Option

New Construction:	343,000 GSF	$173,540,000
Renovation:	0 GSF	$0
Demolition:	300,859 GSF	$10,756,000
Parking:	500 Spaces	$24,610,000
Other Construction Costs:		
Pre-Design Development Allowance		$5,309,000
Total Other Costs (Site Improvements, Utilities, etc.)		$73,275,000
Subtotal Estimated Base Construction Cost		**$287,490,000**
Other Non-Construction Costs:		
Construction Contingency		$39,591,000
Technical Services		$28,577,000
Impact Costs		$5,000,000
Construction Management		$0
Site Acquisition		$0
Utility Agreements		$0
Subtotal Estimated Base Costs		**$360,658,000**
Inflation Allowance / Locality Adjustment		$6,642,000
Total Estimated Cost		**$367,300,000**

XI. Operating Costs of the Chosen Option

Present Facility	
Square Footage Involved	Building 128: 93,939 GSF Building 133: 64,566 GSF
Current FTE	3,179
Total Operating Costs[1]	**$588,650,977**
Ancillary Services	*$155,101,327*
Personnel Services	*$433,549,650*
Other Recurring Costs	*N/A*
Proposed Project	
Square Footage Involved	New Construction: 343,000 GSF Demolition: 300,000 GSF
Net New FTE	200
Incremental Operating Costs[2]	**$37,033,720**
Ancillary Services	*$9,757,869*
Personnel Services	*$27,275,851*
Other Recurring Costs	*N/A*
Total Operating Costs[1]	**$625,684,697**
Non-Recurring Activations	**$63,493,580**
Furniture, Fixtures & Equipment (FF&E)	*$50,935,734*
Non-Recurring Support	*$12,557,846*

[1]Operating costs recur on an annual basis for resources (including staff) necessary to support services to be provided from the space being built or remodeled.
[2]Incremental operating costs are net of present facility. These are not indicative of the total operating costs for the project at completion.

Page Intentionally Left Blank

Canandaigua, New York
Construction & Renovation - Community Living Center, Domiciliary, and Outpatient Facilities

Funding of $30,000,000 requested in the FY 2021 budget will provide for renovation of Building 3.

This project is for the construction of a new 120-bed CLC, outpatient clinic, and a renovated 50-bed domiciliary facility along with complete renovation of several existing buildings for administrative/logistical services at the VA Medical Center in Canandaigua, New York.

I. Budget Authority:

Total Estimated Cost	Available Through 2020 Request	2021 Request	Future Request
$443,900,000	$353,741,000	$30,000,000	$60,159,000

Detail of Project Phases

The funding request will provide for the renovation of Building 3. Design was funded and authorized in FY 2010. New construction of Building 1 and Chiller plant, and renovation of Building 2 was funded and authorized in 2015. New construction of CLC, Building 9 loading dock, and renovation of 50 beds in the Domiciliary was funded and authorized in FY 2019. The renovation of Buildings 4 and 5, HVAC upgrades, and the completion of the new Community Living Center (CLC) building will be requested in a future year as market conditions and project escalations have prevented full construction awards. The table below provides more details on the phases being requested this year.

Project Phases Included in the FY 2021 Request

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
Phase 3 – Renovate Building 3	$30,000	53,858	0	$0	$0

The table below provides details on all phases in this project, listed by the fiscal year funds were requested and then by phase. Major construction project funds are required to be appropriated and authorized.

Total Project Scope (Sorted by Request Year and Phase)

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
FY 2010					
Design	$36,580	0	0	$0	$36,580
FY 2015					
Phase 1 – Renovate OPC and Construct New Chiller Plant	$122,400	85,477	95,723	$158,980	$122,400
FY 2018					
Reprogramming	$3,000	0	0	$0	$3,000
FY 2019					
Phase 2 – Construct 96 New CLC beds, Loading Dock, and Renovate 50 beds in Domiciliary	$190,000	51,026	105,682	$193,000	$190,000
Reprogramming	$1,761	0	0	$0	$1,761
FY 2021					
Phase 3 – Renov. Bldg 3	$30,000	53,858	0	$0	$0
Future Year					
Phase 4 – Renovate Buildings 4 and 5, Complete CLC (24 additional beds), and HVAC Upgrades	$60,159	65,127	21,110	$0	$0
Canandaigua, NY Totals	**$443,900**	**255,488**	**222,515**	**$351,980**	**$353,741**

II. Priority Score: FY2015 – 0.3535
Major Construction projects are funded based on their priority ranking and on their ability to award construction contracts in the current fiscal year.

III. Description of Project:
The project will demolish buildings 2, 33 and 34, as well as tunnels associated with building 2, a portion of building 1, and common areas shared between buildings 33 and 34 (approximately 130,000 gross square feet (GSF)) to allow for the construction of a new, 124,000 GSF 120-bed CLC, which would include gero-psychiatric services and hospice care, and approximately 84,000 GSF addition (between Buildings 1 and 2) for the Outpatient Clinic. Buildings 1, 3, 4, 5 and 9 (255,000 GSF) will be renovated to house a 50-bed domiciliary/residential rehabilitation facility, Outpatient Services, Behavioral Health Services, and Logistic/Administrative support departments to provide a right- sized, modern facility to enhance health care provision to Veterans. The CLC and Domiciliary will meet up to date patient privacy standards that will benefit both men and women Veterans. Security access issues caused by multiple entry points to the facility will be mitigated by new construction.

IV. Alternatives to Construction Considered

Status Quo:

The status quo alternative would maintain the services at the original, antiquated, 80-year old Canandaigua VAMC facilities. The original design and layout of these facilities do not permit VA to provide healthcare services in an operationally efficient manner. The campus is a nominee for the National Register of Historic Places, which limits any potential improvements to the building footprint for inpatient care through building additions and alterations. Recurring maintenance costs for underutilized buildings place an additional burden on VA. This does not address any facility condition and current or projected workload deficiencies, which makes it the least preferred alternative.

Alternative 1: New Construction and Renovation (Preferred Alternative)

This alternative proposes to construct a new CLC and domiciliary/residential rehabilitation facility and renovate numerous buildings to house the outpatient functions for Canandaigua. In addition, New Construction and Renovation would reduce the overall operating costs for the campus by demolishing underutilized and inefficient space. This alternative is the preferred alternative because it addresses inpatient privacy issues, provides for the continuum of care, and addresses gaps identified through the SCIP process.

Alternative 2 – Renovation

This alternative proposes to relocate the existing services to buildings in Courtyard 2 on the Canandaigua campus, including the nursing home, domiciliary/residential rehabilitation, behavioral health, outpatient services and logistic/administrative support departments. These renovations achieve a more modern, safe, and secure healthcare environment than is currently provided. However, this alternative is more complex to implement and would take longer than the New Construction and Renovation alternative. Due to the historic nature of the existing buildings, the complexity of the proposed remodel, and the high operating costs, this is not the preferred alternative.

Alternative 3: Lease

With this alternative, VA would lease an approximately 343,000 net usable square feet (NUSF) (equivalent to the approximately 478,000 GSF required for this project) facility off campus that could accommodate a CLC domiciliary and outpatient services in the same manner as the New Construction and Renovation alternative. However, care would be provided in a location away from the existing clinical and ancillary support services at the Canandaigua VAMC, which would negatively impact the continuity of care if patients are required to travel to multiple locations for services. For these reasons, this alternative is not the preferred alternative.

Alternative 4: Contract Out

This alternative proposes to contract out all inpatient and outpatient services to other area healthcare providers in the community. There may not be sufficient, qualified private healthcare providers in the Canandaigua, NY area to absorb the current and projected Veteran workload. In addition, this alternative may be more costly and result in a loss of quality and control over Veteran healthcare. For these reasons this alternative is not the preferred alternative.

Alternative 5: Acquisition of an Existing Facility through Purchase
This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and that would accommodate all project requirements in the same manner as the preferred alternative. However, high-level market research and interviews with local VA planners has indicated that a suitable facility for possible acquisition and subsequent renovation, which would meet all project requirements in the same manner as the preferred alternative, does not exist in the delineated market area (10- mile radius of the Canandaigua VAMC) of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6: Collaboration with DoD for a Joint Facility
This alternative proposes to construct a new integrated facility in collaboration with the Department of Defense (DoD) in the vicinity of the existing VAMC to provide space for existing services and functions. However, according to VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no facility sharing opportunities in the vicinity of the proposed project. Therefore, this alternative has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquisition*	Ancillary Services**	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE
Status Quo	$58,997	$3,272,354	$0	$3,331,351	990	N/A
New Construction and Renovation	$492,632	$3,015,979	$37,058	$3,545,669	1,699	709
Renovation	$359,536	$3,015,979	$37,058	$3,412,573	1,699	709
Lease	$142,000	$3,216,162	$36,476	$3,394,639	1,699	709
Contract Out	$113,268	$3,851,150	$0	$3,964,418	50	(940)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A

*This is the total estimated cost for construction/renovation projects or build-out (special purpose renovations) for leases, in discounted dollars.
**This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template)

VI. Analysis of Benefits
The preferred alternative, New Construction and Renovation, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo would not address any of the existing gaps: Lease would negatively impact the continuity of care; Renovation would take longer to implement due to the complexity of renovating historic buildings; Contract Out could result in a loss of quality and control over Veteran health care; and the Acquire an Existing Facility and VA/DoD Collaboration alternatives are not viable. New Construction and Renovation, with total life cycle costs of approximately $3.5 billion would be the best solution to support VA's strategic goals and objectives and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable and efficient care for Veterans.

This project would address the space and facility condition gaps at the existing campus to enhance Veteran health care services. Constructing new buildings on the existing campus would ensure coordinated care with a team of clinicians for all levels of services in a single location. In addition, this reduces the patient's travel between sites as well as staff's travel, which assists in reducing costs and increasing efficiencies. Due to the projected increases in workload, providing care solely in the existing VAMC alone would be impossible. By providing services in newly constructed and renovated facilities, operational efficiencies would be realized from the decompression of the VAMC and the overall Veteran health care experience would be improved.

The Canandaigua campus is a nominee for the National Register of Historic Places, which limits any potential improvements to the building footprint through building additions. With the current conditions, recurring maintenance costs for underutilized buildings place an additional burden on VA and would require significant capital expenditures over the next 20 years to upgrade facilities to modern, safe and secure standards. This option allows for the preservation of historic buildings and provision of healthcare services in state-of-the-art facilities.

The proposed project aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
   - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner
2. Excellent Customer Service and Highly Reliable and Integrated Care
   - VA has collaborative, high-performing and integrated delivery networks that enhance Veteran well-being and independence
3. Improved Trust, Accountability, and Transparency
   - VA is always transparent to enhance Veterans' choices, to maintain trust, and to be openly accountable for its actions
4. Transform Business Operations
   - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2036	Change (2017-2037)
Veteran Population	56,958	47,853	40,599	29,478	-48.2%
Enrollees	26,883	25,276	23,603	19,709	-26.7%

*Data reflects the VISN 2, Finger Lakes market.

VIII. Workload*

	2017	2022	2027	2036	Change (2017-2037)
Ambulatory Procedures	19,323	24,781	27,601	29,204	51.1%
Ambulatory Services	254,648	297,739	327,921	341,289	34.0%
Mental Health Stops	34,900	32,969	29,320	23,749	-32.0%
Mental Health Services	50,033	62,964	72,586	83,686	67.3%
CLC Bed Days of Care	33,052	31,133	30,719	27,994	-15.3%

*Data reflects workload for the VISN 2, Finger Lakes market; Pharmacy and Laboratory and Pathology Stops are excluded.

IX. Schedule – This Phase

Award Construction Documents	June 2014
Award Construction Contract	February 2021
Complete Construction	February 2024

X. Project Cost Summary of the Chosen Option

New Construction:	222,515 GSF	$181,111,000
Renovation:	255,488 GSF	$105,418,000
Demolition:	129,824 GSF	$2,384,000
Other Construction Costs:		
Pre-Design Development Allowance		$0
Total Other Costs (Utilities, etc.)		$72,202,100
Subtotal Estimated Base Construction Cost		**$361,115,100**
Other Non-Construction Costs:		
Construction Contingency		$35,751,000
Technical Services		$14,911,000
Impact Costs		$20,052,000
Construction Management		$0
Site Acquisition		$0
Utility Agreements		$0
Subtotal Estimated Base Costs		**$431,829,100**
Inflation Allowance / Locality Adjustment		$12,070,900
Total Estimated Cost		**$443,900,000**

IX. Operating Costs of the Chosen Option

Present Facility	
Square Footage Involved	Building 1 – 71,445 GSF
	Building 3 – 53,858 GSF
	Building 4 – 45,030 GSF
	Building 5 – 20,097 GSF
	Building 9 – 51,026 GSF
	Building 33 – 54,630 GSF
	Building 34 – 54,690 GSF
Current FTE	990
Total Operating Costs[1]	**$127,716,056**
Ancillary Services	*$34,946,665*
Personnel Services	*$92,769,391*
Other Recurring Costs	*N/A*
Proposed Project	
Square Footage Involved	New Construction: 222,515 GSF
	Renovation: 255,488 GSF
	Demolition: 129,824 GSF
Net New FTE	709
Incremental Operating Costs[2]	**$91,465,337**
Ancillary Services	*$25,027,460*
Personnel Services	*$66,437,877*
Other Recurring Costs	*N/A*
Total Operating Costs[1]	**$219,181,393**
Non-Recurring Activations	**$29,509,470**
Furniture, Fixtures & Equipment (FF&E)	*$24,605,613*
Non-Recurring Support	*$4,903,857*

[1]Operating costs recur on an annual basis for resources (including staff) necessary to support services to be provided from the space being built or remodeled.

[2]Incremental operating costs are net of present facility. These are not indicative of the total operating costs for the project at completion.

Page Intentionally Left Blank

Alameda Point, California
Community Based Outpatient Clinic and National Cemetery

Funding of $152,868,000 requested in this FY 2021 budget will provide for the construction of a Community Based Outpatient Clinic (CBOC) on the Alameda Point BRAC property to consolidate leased space and properly serve Veterans in the Oakland area.

This project includes the construction of a CBOC, parking, an NCA and VBA administration office, a conservation management office, and a new columbarium at the Alameda Point BRAC site. This project will be executed in three phases. Phase I includes site work, offsite utilities, wetland mitigation, and columbarium. In FY 2020, VA requested authorization to include the columbarium in Phase I, in order to accelerate its delivery to NCA. Phase II includes the construction of an outpatient clinic. Phase III will provide for the construction of a conservation management office, landscaping, parking, and the completion of the columbarium.

I. Budget Authority:

Total Estimated Cost	Available Through 2020 Request	2021 Request	Future Request
$310,500,000	$113,332,000	$152,868,000	$44,300,000

Detail of Project Phases

The funding request this year will provide for Phase II funding to construct an approximately 158,000 gross square foot (GSF) CBOC. Design was funded in FY 2011 and the first portion of the columbarium site work, off-site utilities, and wetlands mitigation was funded and authorized in FY 2016. FY 2020 funding provides for additional Phase I funding to complete the columbarium, site work, off-site utilities, and wetlands mitigation. Future Phase III will include construction of a conservation management office, landscaping, parking, and completion of columbarium. The table below provides more details on the phases being requested this year.

Project Phases Included in the FY 2021 Request

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
Phase II – Community Based Outpatient Clinic	$152,868	0	158,000	$0	$0

The table below provides details on all phases in this project, listed by the fiscal year funds were requested and then by phase. Major construction project funds are required to be appropriated and authorized.

Total Project Scope (Sorted by Fiscal Year and Phase)

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
FY 2011					
Design	$17,332	0	0	$0	$17,332
FY 2016					
Phase I – Site Work, Off-Site Utilities, and Wetlands Mitigation	$70,000	0	0	$87,332	$70,000
FY 2020					
Phase I – Columbarium, Site Work, Off-Site Utilities, and Wetlands Mitigation	$26,000	0	0	$0	$26,000
FY 2021					
Phase II – Community Based Outpatient Clinic	$152,868	0	158,000	$0	$0
Future Year					
Phase III – Conservation Management Office, Landscaping, Parking, and Completion of Columbarium	$44,300	0	2,700	$0	$0
Alameda, CA Totals	**$310,500**	**0**	**160,700**	**$87,332**	**$113,332**

II. Priority Score: FY 2015 - 0.3452
Major Construction projects are funded based on their priority ranking and on their ability to award construction contracts in the current fiscal year.

III. Description of Project:
This project proposes to construct a new, approximately 158,000 gross square foot (GSF) Outpatient Clinic (OPC), which includes NCA and VBA administrative space and 750 parking spaces. Also included in the project is the construction of a 2,700 GSF conservation management office. The project will consolidate two existing outpatient clinic leases; one will expire in July 2020 and the other in August 2024. The project will also construct the first phase of a national cemetery with columbaria capacity for 25,000 niches of the planned total 300,000 niches. The project will be constructed on a 624-acre former Naval Air Station at Alameda Point that has been acquired through a no-cost Federal- to-Federal transfer as a result of the Base Realignment and Closure (BRAC) process. This new, state- of-the-art OPC and administrative space will provide Primary Care, Specialty Care, Ancillary Services, Mental Health, Substance Abuse, and Ambulatory Surgery in a right-sized, modern facility.

IV. Alternatives Considered:

Status Quo:

The Status Quo would continue to maintain two undersized, seismically-deficient leased VHA outpatient clinics in Oakland, a leased trailer, and leased parking with no means of providing access for NCA Columbaria or VBA benefit support. This alternative does not address identified clinical or burial access deficiencies and it does not address the projected workload in the Alameda and Oakland markets. For these reasons, the status quo alternative is not preferred.

Alternative 1: New Construction - Alameda Point BRAC Site (Preferred Alternative)

This alternative would construct a new CBOC, a new Columbarium, administrative support space for NCA and VBA, and all associated parking on the Alameda Point BRAC property. This alternative would enhance efficiencies by ensuring a continuum of care for patients in a single facility, reducing patient and staff travel between the two sites, and reducing operating expenses by eliminating leases to provide services in-house. This new VA campus would provide a state-of-the-art, right-sized CBOC, a new columbarium for families that is closer to where they reside, and VBA benefits support. For these reasons, this is the preferred alternative.

Alternative 2: Renovation

This alternative proposes to renovate vacant or underutilized VA owned buildings to provide an approximately 160,700 GSF facility with associated parking. For this alternative to be viable, VA would need to own a building in the Alameda area that has sufficient space to accommodate the same services proposed in this project. High level market research and interviews with local VA planners has indicated that a suitable facility in the Alameda area does not exist. In addition, Renovation would not provide a new columbarium. For these reasons, this alternative is not viable and has been excluded from the quantitative analysis below.

Alternative 3: Lease

This alternative proposes to lease an approximately 119,000 net usable square feet (NUSF) (equivalent to approximately 160,700 GSF) facility off campus to accommodate Primary Care, Specialty Care, Ancillary Services, Mental Health, Substance Abuse, and Ambulatory Surgery functions. The lease would provide for expanded services in the same manner as the preferred alternative but could not include the proposed columbarium in the same manner as the New Construction alternative. Therefore, this is not the preferred alternative.

Alternative 4: Contract Out

This alternative assumes that all services proposed in the project would be contracted out to fee-basis providers in the Alameda area. There may not be sufficient, qualified private health care providers in the Alameda area to absorb the current and projected Veteran workload. In addition, this alternative does not allow for the collocation of NCA Columbaria or VBA assets, may be more costly and could result in a loss of quality and control over Veteran health care. . For these reasons this alternative is not optimal and is the least preferred.

Alternative 5: Acquisition of an Existing Facility through Purchase
This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and able to accommodate all project requirements in the same manner as the preferred alternative. However, high-level market research and interviews with local VA planners has indicated that a suitable facility for possible acquisition and subsequent renovation that would meet all project requirements in the same manner as the preferred alternative does not exist in the delineated market area of the proposed project. Therefore, this option is not viable and has been excluded from the quantitative analysis below.

Alternative 6: Collaboration with DoD for a Joint Project
This alternative proposes to construct a new joint VA/DoD facility at Alameda Point. Although VA/DoD collaboration is strong in this market and the proposed project may foster additional VA/DoD sharing agreements with the U.S. Air Force in Ambulatory Surgery and a partnership with the U.S. Coast Guard in Women's Health, there are currently no plans for an integrated joint facility in this market. Therefore, this option is not viable and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquisition*	Ancillary Services**	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE
Status Quo	$0	$1,048,413	$0	$1,048,413	200	N/A
New Construction	$326,107	$1,097,376	$21,049	$1,444,532	253	53
Renovation	N/A	N/A	N/A	N/A	N/A	N/A
Lease	$49,127	$1,230,500	$21,225	$1,300,852	253	53
Contract Out	$30,580	$1,406,595	$0	$1,437,175	0	(200)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A

*This is the total estimated cost for construction/renovation projects or build-out (special purpose renovations) for leases, in discounted dollars.
**This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template)

VI. Analysis of Benefits
The preferred alternative, New Construction, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo would not address any of the existing space, utilization, burial access, or parking gaps; Lease could not include the proposed columbarium; Contract Out could result in a loss of quality and control over Veteran healthcare; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. New Construction, with total life cycle costs of approximately $1.4 billion, would be the best solution to support VA's strategic goals and objectives and close deficiencies identified by the SCIP process in a timely and efficient manner and to provide high-quality and reliable care.

This project would address the space, utilization, and parking gaps at the existing clinics to enhance Veteran health care services. Consolidating two clinics into a modern healthcare campus would ensure coordinated care with a team of clinicians for all levels of outpatient services in a single location. In addition, this reduces the patients' and staff's travel between sites, which assists in

reducing costs and increasing efficiencies. Due to the projected increases in workload, providing care solely in the existing clinics would be increasingly difficult. By relocating services into a newly constructed facility, operational efficiencies could be realized from combining the clinics. This project would enhance the overall Veteran health care experience by serving the Veterans and DoD beneficiaries of northern Alameda County and providing a columbarium burial option to Veterans of the greater Bay Area.

The proposed project aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
   - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner
2. Excellent Customer Service and Highly Reliable and Integrated Care
   - VA has collaborative, high-performing and integrated delivery networks that enhance Veteran well-being and independence
3. Improved Trust, Accountability, and Transparency
   - VA is always transparent to enhance Veterans' choices, to maintain trust, and to be openly accountable for its actions
4. Transform Business Operations
   - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change (2017-2037)
Veteran Population	244,161	208,962	179,171	134,459	-44.9%
Enrollees	108,170	109,359	105,883	92,698	-14.3%

*Data reflects the VISN 21, North Valley market.

	2017	2022	2027	2037	Change (2027-2037)
Annual Interments			740	518	-30.0%
Cumulative Gravesites	Planned Opening		3,776	9,280	145.8%
Cumulative Internments	September 2022		4,006	10,162	153.7%
Estimated Veterans Deaths			10,414	6,862	-34.1%

VIII. Workload*

	2017	2022	207	2037	Change (2017-2037)
Ambulatory Procedures	106,181	125,138	135,134	140,531	32.4%
Ambulatory Services	1,169,178	1,392,022	1,530,681	1,605,708	37.3%
Mental Health Stops	42,775	40,208	35,499	28,778	-32.7%
Mental Health Services	145,684	180,565	209,366	248,898	70.8%

*Data reflects workload for the VISN 21, North Valley, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule – This Phase

Award Construction Documents	August 2016
Award Construction Contract	September 2021
Complete Construction	April 2026

X. Project Cost Summary of the Chosen Option

New Construction:	160,700 GSF	$109,003,000
Renovation:	0 GSF	$0
Demolition:	0 GSF	$0
Other Construction Costs:		
Pre-Design Development Allowance		$9,690,000
Total Other Costs (Utilities, etc.)		$130,175,000
Subtotal Estimated Base Construction Cost		**$248,868,000**
Other Non-Construction Costs:		
Construction Contingency		$12,624,000
Technical Services		$22,779,000
Impact Costs		$0
Construction Management		$0
Site Acquisition		$0
Utility Agreements		$0
Subtotal Estimated Base Costs		**$284,271,000**
Inflation Allowance / Locality Adjustment		$26,229,000
Total Estimated Cost		**$310,500,000**

XI. Operating Costs of the Chosen Option

Present Facility	
Square Footage Involved	Oakland Outpatient Clinic: 29,683 NUSF Oakland Behavioral Health Clinic: 13,263 NUSF
Current FTE	200
Total Operating Costs[1]	**$33,659,442**
Ancillary Services	*$11,685,684*
Personnel Services	*$21,973,757*
Other Recurring Costs	*N/A*
Proposed Project	
Square Footage Involved	New Construction of Outpatient Clinic: 158,000 GSF New Construction of Conservation Management Office: 2,700 GSF
Net New FTE	50
Incremental Operating Costs[2]	**$8,414,860**
Ancillary Services	*$2,921,421*
Personnel Services	*$5,493,439*
Other Recurring Costs	*N/A*
Total Operating Costs[1]	**$42,074,302**
Non-Recurring Activations	**$44,381,692**
Furniture, Fixtures & Equipment (FF&E)	*$35,505,353*
Non-Recurring Support	*$8,876,338*

[1]Operating costs recur on an annual basis for resources (including staff) necessary to support services to be provided from the space being built or remodeled.
[2]Incremental operating costs are net of present facility. These are not indicative of the total operating costs for the project at completion.

Page Intentionally Left Blank

San Diego, California
Spinal Cord Injury and Seismic Building 11

Funding of $21,260,000 requested in this FY 2021 budget will provide for the completion of the new Spinal Cord Injury (SCI) building, a Community Living Center (CLC), and a parking garage.

This project includes the construction of a new SCI building with a CLC, partial renovation of Building 1, upgrades to the central energy plant, construction of a parking garage, and the seismic retrofit of the existing SCI building at the VA San Diego Health Care System (VASDHS) in San Diego, CA.

I. Budget Authority:

Total Estimated Cost	Available Through 2020 Request	2021 Request	Future Request
$311,700,000	$230,840,000	$21,260,000	$59,600,000

Detail of Project Phases

This funding request will provide for the completion of the new SCI building with a CLC and the parking garage. Design was funded in FY 2010. The main portion of the construction of a SCI building with a CLC and construction of the parking garage was funded FY 2015 and FY 2020. The seismic retrofit of the existing SCI building will be requested in a future year. The table below provides more details on the phase being requested this year.

Project Phase Included in the FY 2021 Request

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
Continue Construction of CLC, SCI and Parking Garage	$21,260	0	0	$0	$0

The table below provides details on all phases in this project, listed by the fiscal year funds were requested and then by phase. For major construction projects funds are required to be appropriated and authorized.

Total Project Scope (Sorted by Fiscal Year and Phase)

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
FY 2010					
Design	$18,340	0	0	$0	$18,340
FY 2015					
Initial Construction of CLC, SCI and Parking Garage	$187,500	0	197,000	$205,840	$187,500
FY 2019					
Reprogramming	$5,000	0	0	$0	$5,000
FY 2020					
Construction of CLC, SCI and Parking Garage	$20,000	0	0	$0	$20,000
FY 2021					
Continue Construction of CLC, SCI and Parking Garage	$21,260	0	0	$0	$0
Future Year					
Seismic Retrofit of Building 11	$59,600	124,000	0	$0	$0
San Diego, CA Totals	**$311,700**	**124,000**	**197,000**	**$205,840**	**$230,840**

II. Priority Score: FY2015 – 0.3243
Major Construction projects are funded based on their priority ranking and on their ability to award construction contracts in the current fiscal year.

III. Description of Project:
This project will construct a new 50-bed SCI Center and a CLC and hospice nursing unit to comply with VA space standards and close existing inpatient bed gaps; the project will result in 43 CLC beds. The existing Building 11 containing current SCI beds and clinic does not meet VA design or seismic criteria and is on the Degenkolb seismic report extremely high- risk list. This building will be structurally and non-structurally upgraded to meet seismic standards and provide continued functional space post retrofit. In addition, a portion of Building 1 will be renovated to accommodate 11 of the 43 CLC beds noted above. The new construction will be supported by a structured parking garage, resulting in a net of approximately 800 new parking spaces, and upgrades to the existing central energy plant to meet additional demand and meet disaster preparedness criteria for the new construction footprint.

IV. Alternatives to Construction Considered

Status Quo:

In this alternative, the facility will remain in its current condition and continue to have significant seismic deficiencies, cramped floors, and limited bed capacity. Moreover, VASDHS's ability to achieve a high standard of care in infection control, patient privacy, and a healing rehabilitation treatment environment will continue to be inhibited as patients will be lodged in four-bed rooms with a single shared bathroom that are not ADA compliant.

Alternative 1: New Construction and Renovation (Preferred Alternative)

In this alternative, the new SCI/CLC facility and renovated Building 1 will provide 30 private inpatient beds, 20 private SCI long term care beds, and 43 CLC beds. The new parking structure will assist with the current parking deficit. The existing SCI Building 11 will be seismically retrofitted and central energy plant (CEP) will be upgraded. These facilities will allow VA to more adequately serve Veteran patients with higher quality of care by increasing patient privacy needs. For these reasons this is the preferred alternative.

Alternative 2: Renovation

This alternative proposes to renovate vacant or underutilized VA owned buildings to provide an approximately 321,000 GSF facility with associated parking. For this alternative to be viable, VA would need to own a building in the San Diego area that has sufficient space to accommodate the same services proposed in this project. In addition, as part of the SCIP process, VA identified an overall space gap (deficit) for this market that would not be resolved through renovating space. For these reasons, this alternative is not viable and has been excluded from the quantitative analysis below.

Alternative 3: Lease

This alternative proposes to lease an approximately 237,778 net usable square foot (NUSF) (equivalent to the approximately 321,000 GSF required for this project) facility off campus to accommodate SCI and CLC functions. The lease would provide space for a CLC and inpatient and outpatient SCI facilities in the same manner as the preferred alternative. However, care would be provided in a location apart from the existing clinical and ancillary support services at the San Diego VA Medical Center, which would negatively impact the continuity of care if Veterans would have to travel to different places for different services. In addition, this alternative would not provide for the correction of seismic deficiencies in Building 11 or the renovation and reuse of Building 1. For these reasons this alternative is not the preferred alternative.

Alternative 4: Contract Out

This alternative would contract out all services that pertain to this project to local private providers. There may not be sufficient, qualified private healthcare providers in the San Diego, CA area to absorb the current and projected Veteran workload. In addition, this alternative may be more costly and result in a loss of quality and control over Veteran healthcare. For these reasons, this alternative is not the preferred alternative.

Alternative 5: Acquisition of an Existing Facility through Purchase
This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and would accommodate all project requirements in the same manner as the preferred alternative. However, high-level market research and interviews with local VA planners has indicated that a suitable facility for possible acquisition and subsequent renovation that would meet all project requirements in the same manner as the preferred alternative does not exist in the delineated market area of the proposed project; therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6: Collaboration with DoD for a Joint Construction or Lease Project
This alternative proposes to construct a new facility in collaboration with the Department of Defense (DoD) in the vicinity of the existing San Diego VAMC to accommodate the CLC and SCI functions addressed by the project. VA San Diego Healthcare System has developed a close relationship with the San Diego Naval Medical Center and several sharing agreements for various services are in place; however, there is no opportunity for joint construction for this requirement. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquisition*	Ancillary Services**	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE
Status Quo	$14,838	$2,322,151	$0	$2,336,990	3,468	N/A
New Construction and Renovation	$345,981	$2,150,744	$54,363	$2,551,088	3,568	100
Renovation	N/A	N/A	N/A	N/A	N/A	N/A
Lease	$95,393	$2,283,970	$54,363	$2,443,726	3,568	100
Contract Out	$159,385	$2,564,445	$0	$2,723,831	2,000	(1,468)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A

*This is the total estimated cost for construction/renovation projects or build-out (special purpose renovations) for leases, in discounted dollars.
**This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template)

VI. Analysis of Benefits
The preferred alternative, New Construction and Renovation, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo would not address any of the existing privacy, condition, or parking gaps; Lease would negatively impact the continuity of care; Contract Out could result in a loss of quality and control over Veteran health care; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. New Construction and Renovation, with total life cycle costs of approximately $2.6 billion would be the best solution to support VA's strategic goals and objectives and close gaps identified by the SCIP process in an efficient manner to provide high-quality, reliable, and efficient care.

The preferred alternative delivers the best benefit to VA by addressing space and parking deficits at the VA San Diego HCS and correcting the seismic deficiencies that exist on campus. This project will ensure that VA is able to adequately meet current and projected demand in modern, efficient space that meets all seismic and life safety standards. In addition, this alternative will help to alleviate the severe parking shortage which exists at the Medical Center.

This project addresses existing seismic deficiencies at the VA San Diego campus. The existing SCI building, Building 11, would be greatly damaged or could collapse in a seismic event. Should this occur, the safety of building occupants would be at risk, and patient care would be disrupted for a period of up to several years. The proposed project would change the occupancy of this building from inpatient to ambulatory care, and seismically upgrade the building to meet seismic standards preventing risk to Veterans and staff.

The proposed project aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
   - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner
2. Improved Trust, Accountability, and Transparency
   - VA is always transparent to enhance Veterans' choices, to maintain trust, and to be openly accountable for its actions
3. Transform Business Operations
   - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change (2017-2037)
Veteran Population	238,981	225,679	214,983	202,297	-15.4%
Enrollees	117,341	121,318	124,598	125,626	7.1%

*Data reflects the VISN 22, San Diego market.

VIII. Workload*

	2017	2022	2027	2037	Change (2017-2037)
Ambulatory Procedures	50,823	63,482	74,846	88,509	74.2%
Ambulatory Services	1,062,399	1,280,824	1,486,809	1,796,119	69.1%
Mental Health Stops	60,743	58,554	55,046	49,859	-17.9%
Mental Health Services	177,088	227,495	285,056	389,478	119.9%
CLC Bed Days of Care	8,650	8,754	8,993	8,339	-3.6%
SCI Bed Days of Care	4,819	4,769	4,651	4,185	-13.2%

*Data reflects workload for the VISN 22, San Diego market, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule - (Continue Construction of CLC, SCI and Parking Garage)

Award Construction Documents	September 2016
Award Construction Contract	July 2020
Complete Construction	July 2023

X. Project Cost Summary of the Chosen Option

New Construction:	197,000 GSF	$114,595,000
Renovation:	124,000 GSF	$34,970,000
Demolition:	0 GSF	$0
Parking Structure:	909 Spaces	$51,300,000
Other Construction Costs:		
Pre-Design Development Allowance		$3,465,000
Total Other Costs (Site Improvements, Utilities, etc.)		$35,235,000
Subtotal Estimated Base Construction Cost		**$239,565,000**
Other Non-Construction Costs:		
Construction Contingency		$13,267,000
Technical Services		$22,730,000
Impact Costs		$8,750,000
Construction Management		$7,315,000
Site Acquisition		$0
Utility Agreements		$0
Subtotal Estimated Base Costs		**$291,627,000**
Inflation Allowance / Locality Adjustment		$20,073,000
Total Estimated Cost		**$311,700,000**

XI. Operating Costs of the Chosen Option

Present Facility	
Square Footage Involved	Building 11: 100,381 GSF Building 1: 12,619 GSF
Current FTE	3,468
Total Operating Costs[1]	**$670,231,153**
Ancillary Services	*$208,930,209*
Personnel Services	*$461,300,944*
Other Recurring Costs	*N/A*
Proposed Project	
Square Footage Involved	New Construction: 197,000 GSF Renovation: 124,000 GSF
Net New FTE	100
Incremental Operating Costs[2]	**$19,326,158**
Ancillary Services	*$6,024,516*
Personnel Services	*$13,301,642*
Other Recurring Costs	*N/A*
Total Operating Costs[1]	**$689,557,311**
Non-Recurring Activations	**$37,167,210**
Furniture, Fixtures & Equipment (FF&E)	*$29,733,768*
Non-Recurring Support	*$7,433,442*

[1]Operating costs recur on an annual basis for resources (including staff) necessary to support services to be provided from the space being built or remodeled.
[2]Incremental operating costs are net of present facility. These are not indicative of the total operating costs for the project at completion.

Page Intentionally Left Blank

Livermore, California
Realignment and Closure:
Phase III: New East Bay CBOC and Phase VII: Central Valley CLC

Funding of $143,270,000 requested in this FY 2021 budget will provide for the construction of up to an additional 40 CLC beds at the Central Valley Community Living Center (CLC) and the new East Bay Community Based Outpatient Clinic (CBOC) with necessary flood plain mitigation.

The complete project includes land purchases, construction of a new CBOC in the East Bay area, a new Central Valley CBOC collocated with a new 120-bed CLC, a new Central Valley engineering and logistics building, enhanced flood plain mitigation at both CBOC sites, renovation of existing space for a minimally-invasive Procedure Center at the Palo Alto VA Medical Center (VAMC), and closure of the Livermore VAMC.

I. Budget Authority:

Total Estimated Cost	Available Through 2020 Request	2021 Request	Future Request
$505,000,000	$311,730,000	$143,270,000	$50,000,000

Detail of Project Phases
Design was funded in FY 2010 and construction of the Central Valley CBOC, Phase II, was funded and authorized in FY 2016. Phases III, V, and enhanced flood plain mitigation at the two CBOC sites were funded and authorized in FY 2018. In FY 2020, VA requested Congressional authorization to use funding appropriated in FY 2018 for the construction of a new Central Valley CLC, instead of the construction of the new East Bay CBOC. The new Engineering and Logistics building and enhanced flood plain mitigation at the Central Valley site will still be completed using the funding appropriated in FY 2018. The reassignment of the FY 2018 funding allowed for an accelerated completion of the Central Valley Campus and provides for a complete and usable 80-bed CLC.

This year's funding request would provide for the East Bay CBOC portion of Phase III, including the enhanced flood plain mitigation at the East Bay site, and for Phase VII, which is the construction of the remaining 40 of the planned 120 beds of the new Central Valley CLC. Additional future phases will include Phase IV, renovations at Palo Alto for a minimally invasive Procedure Center, and Phase VI, divestiture of the Livermore VAMC. The table below provides more details on the phase being requested this year.

Project Phases Included in the FY 2021 Request

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
Phase III - New East Bay CBOC and Flood Plain Mitigation at the East Bay Site	$143,270	0	35,000	$0	$0
Phase VII - Central Valley CLC, additional 40 beds	Cost included in Phase III	0	39,447	$0	$0

The table below provides details on all phases in this project, listed by the fiscal year funds were requested and then by phase. Major construction project funds are required to be appropriated and authorized.

Total Project Scope (Sorted by Fiscal Year and Phase)

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
FY 2010					
Design and Land	$55,430	0	0	$55,430	$55,430
FY 2016					
Phase II - New Central Valley CBOC	$158,400	0	158,000	$139,000	$139,000
FY 2018*					
Phase III - New East Bay CBOC and Flood Plain Mitigation at both CBOCs	[$117,300]*	0	[80,000]	$117,300	$117,300
Phase V - New Central Valley Engineering/ Logistics Facility	[Cost included in Phase III]*	0	[20,222]	Included in Phase III	Included in Phase III
FY 2020					
Phase I - New Central Valley CLC, initial 80 beds, and Flood Plain Mitigation at the Central Valley Site	$117,300	0	110,553	$0	$0
Phase V - New Central Valley Engineering/ Logistics Facility	Cost included in Phase I	0	20,222	$0	$0

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
FY 2021					
Phase III - New East Bay CBOC and Flood Plain Mitigation at the East Bay Site	$143,270	0	35,000	$0	$0
Phase VII - Central Valley CLC, additional 40 beds	Cost included in Phase III	0	39,447	$0	$0
Future Year					
Phase IV - Palo Alto Procedure Center Renovation	TBD	30,000	0	$0	$0
Phase VI – Livermore VAMC Divestiture	TBD	0	0	$0	$0
Livermore, CA Totals	**$505,000**	**30,000**	**378,873**	**$311,730**	**$311,730**

*Funding received as a part of the FY 2018 request was requested to be reassigned to Phases I and V in FY 2020 to allow for accelerated completion of the Central Valley Campus.

II. Priority Score: FY 2015 – 0.2854
Major Construction projects are funded based on their priority ranking and on their ability to award construction contracts in the current fiscal year.

III. Description of Project:
This project will purchase land and construct a new East Bay CBOC in the City of Fremont, a new Stockton/French Camp (Central Valley) CBOC, that will be collocated with a new 120-bed CLC and a new Engineering and Logistics building, and enhanced flood plain mitigation at both CBOCs. This project also will renovate existing space for a minimally invasive Procedure Center at the Palo Alto VAMC to consolidate specialized services. Subsequent to the completion of these phases, inpatient and outpatient programs will be relocated to the new replacement facilities, and the Livermore VAMC campus will close. The Livermore VAMC Realignment and Closure Project total square footage (new construction and renovation) is approximately 408,873 gross square feet (GSF).

Phase I – New Central Valley CLC: This phase will construct a new approximately 110,000 GSF CLC with approximately 80 beds. This facility will be collocated with the Central Valley CBOC (Phase II) and the Engineering/Logistics Support Facility (Phase V). Construction of this CLC will include infrastructure enhancements and site development work, such as utilities, parking and landscaping, as appropriate.

Phase II – New Central Valley CBOC: VA has acquired a parcel of land in San Joaquin County in French Camp, CA on which to construct a new approximately 158,000 GSF CBOC collocated with the CLC (Phases I and VII) and the Phase V Engineering/Logistics Support Facility. Construction of this CBOC will include infrastructure enhancements and site development work, such as utilities, parking, flood plain mitigation, and landscaping, as appropriate. Upon completion of this CBOC, VA will terminate the existing 9,997 NUSF Stockton CBOC lease.

Phase III – New East Bay CBOC: VA has acquired a parcel of land in southern Alameda County in Fremont, CA on which to construct a new approximately 35,000 GSF CBOC. Construction of this CBOC will include infrastructure enhancements and site development work, such as utilities, parking, flood plain mitigation and landscaping, as appropriate. Upon completion of the project, VA will terminate the existing 9,925 NUSF Fremont CBOC lease.

Phase IV – Palo Alto Procedure Center Renovation: VA will renovate approximately 30,000 GSF at the Palo Alto VAMC tertiary care campus to establish a Specialty Procedure Center in an effort to consolidate minimally invasive procedures into a single state-of-the-art procedure center.

Phase V – New Central Valley Engineering/Logistics Support Facility: This phase will construct a new approximately 20,000 GSF engineering/logistics support facility collocated with the new Phases I & VII CLC and Phase II CBOC. Construction of this facility will include infrastructure enhancements and site development work, such as utilities, parking and landscaping, as appropriate.

Phase VI – Livermore VAMC Divestiture: Upon completion of other project phases, programs at the Livermore VAMC can be relocated and the 113-acre campus and the existing facilities will be closed. Campus-wide environmental remediation and other costs associated with divestiture would be included in the scope of this phase.

Phase VII – Central Valley CLC, additional 40 beds: This phase will construct approximately 40,000 GSF, for an additional 40 beds at the Central Valley CLC (Phase I).

IV. Alternatives Considered

Status Quo:

With the Status Quo alternative, VA would continue to operate the Livermore VAMC's 113- acre campus and maintain 249,000 GSF of aging capital infrastructure. The Status Quo neither adequately meets demand, nor improves delivery of services; it does not align with Veteran needs in areas where Veteran populations have grown. For these reasons, this is not the preferred alternative.

Alternative 1: New Construction and Renovation (Preferred Alternative)

This alternative proposes purchase land to construct a new East Bay CBOC; a new Central Valley CBOC collocated with a 120-bed CLC and an Engineering/Logistics support facility, to provide enhanced flood plain mitigation at both CBOC sites, and to renovate existing space for a minimally invasive Procedure Center at the Palo Alto VAMC. Following construction and activation, VA

will relocate Livermore VAMC inpatient and outpatient programs to these two replacement facilities in preparation for the Livermore VAMC closure. This alternative best meets patient demand for services. For this reason, the New Construction and Renovation alternative is preferred.

Alternative 2: Renovation

This alternative would either renovate the existing Livermore VAMC campus or would renovate space in the identified East Bay and Central Valley markets to provide inpatient and outpatient services. For this alternative to be viable, VA would need to own a building at the existing Livermore VAMC (or nearby) that has sufficient space to meet project requirements current and projected demand for services. Because there is no available space at the existing Livermore VAMC or in the East Bay and Central Valley markets, this alternative is not viable and has been excluded from the quantitative analysis below.

Alternative 3: Lease

This alternative proposes to lease multiple facilities totaling approximately 302,869 net useable square feet (NUSF) (equivalent to the approximately 408,873 GSF required for this project) off campus for a new CBOC in East Bay, a new CBOC in Central Valley that would be collocated with a new leased 120-bed CLC, and a new specialty procedure center in the Palo Alto market. Following lease award, construction, and activation, VA would relocate Livermore VAMC's inpatient and outpatient programs and specialty procedures center to these new leased facilities in preparation for Livermore VAMC closure. As planning is underway for the New Construction and Renovation alternative, including the land purchase, the Lease alternative would not provide the shortest timeline or allow for reuse of existing VA space, and would delay completion of the project. For this reason, this is not the preferred alternative.

Alternative 4: Contract Out

This alternative would contract out all of the Livermore VAMC's current and projected inpatient and outpatient workload and workload for the Palo Alto Specialty Procedure Center. There may not be sufficient, qualified private health care providers in the Livermore area to absorb current and projected Veteran workload. In addition, this alternative this alternative may be more costly and result in a loss of quality and control over Veteran health care. For these reasons, this alternative is not the preferred alternative.

Alternative 5: Acquisition of an Existing Facility through Purchase

This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and that would accommodate all project requirements in the same manner as the preferred alternative. However, high-level market research and interviews with local VA planners has indicated that suitable facilities for possible acquisition and subsequent renovation that would meet all project requirements in the same manner as the preferred alternative do not exist in the delineated market areas of the proposed project (10-mile radius of Fremont, CA (East Bay), French Camp, CA (Central Valley), and Palo Alto VAMC). Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6: Collaboration with DoD for a Joint Facility
This alternative proposes to lease a new facility, with the Department of Defense (DoD) as a sub-lessee. This alternative would address all project requirements in the same manner as the preferred alternative. However, according to VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no facility sharing opportunities in the vicinity of the proposed project markets. In addition, the nearest DoD locations are more than 50, 44, and 58 miles away from Freemont (East Bay), French Camp (Central Valley), the Palo Alto VAMC respectively. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquisition*	Ancillary Services**	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE
Status Quo	$30,300	$2,988,402	$0	$3,018,703	351	N/A
New Construction and Renovation	$769,380	$2,441,551	$90,940	$3,301,871	419	68
Renovation	N/A	N/A	N/A	N/A	N/A	N/A
Lease	$121,053	$2,620,462	$90,940	$2,832,454	419	68
Contract Out	$59,653	$3,414,447	$0	$3,474,100	0	(351)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A

*This is the total estimated cost for construction/renovation projects or medical and other related alterations (lump sum payment) for leases, in discounted dollars.
**This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template)

VI. Analysis of Benefits
The preferred alternative, New Construction and Renovation, will directly benefit Veterans in VISN 21 by realigning inpatient and outpatient services to accommodate geographic regions or sub-markets with growing patient demand for services. Establishing services in the East Bay and Central Valley sub-markets and renovating space to provide for a minimally invasive Procedure Center at the Palo Alto VAMC delivers the best benefit to VA by meeting all patient demand for services in modern, efficient, VA space. This alternative would also enable VA to vacate the Livermore VAMC campus to avoid unnecessary operating costs and to potentially pursue redevelopment opportunities. Additionally, the proposed project enables VA to terminate approximately 20,000 NUSF in leased space. With total life cycle costs of $3.3 billion, this alternative delivers the best benefit to VA compared to all other alternatives.

As discussed in the previous section: Status Quo would not address any of the workload gaps; Lease would delay completion of the project; Contract Out could result in a loss of quality and control over Veteran health care; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. As VA has already begun planning for the New Construction and Renovation alternative and has acquired land in the target markets, the proposed project would also enable VA to achieve service and mission goals and objectives sooner than the other alternatives would.

VII. Demographic Data*

	2017	2022	2027	2037	Change (2017-2037)
Veteran Population	166,228	134,769	108,648	74,168	-55.4%
Enrollees	75,451	70,988	64,899	52,519	-30.4%

*Data reflects the VISN 21, South Coast Market.

VIII. Workload*

	2017	2022	2027	2037	Change (2017-2037)
Ambulatory Procedures	51,931	58,163	59,809	58,857	13.3%
Ambulatory Services	880,125	988,872	1,033,275	1,000,308	13.7%
Mental Health Stops	82,926	74,877	63,629	49,080	-40.8%
Mental Health Services	137,876	163,558	179,413	199,617	44.8%
CLC Bed Days of Care	69,860	64,315	60,144	49,803	-28.7%

*Data reflects the VISN 21 South Coast market.

IX. Schedule

Award Construction Documents	September 2021
Award Construction Contract	September 2022
Complete Construction	April 2025

X. Project Cost Summary of the Chosen Option

New Construction:	378,873 GSF	$226,188,000
Renovation:	0 GSF	$0
Demolition:	0 GSF	$0
Parking Structure:	0 Spaces	$0
Other Construction Costs:		
Pre-Design Development Allowance		$29,807,000
Management Reserve		$15,500,000
Total Other Costs (Site Improvements, Utilities, etc.)		$69,671,000
Subtotal Estimated Base Construction Cost		**$341,166,000**
Other Non-Construction Costs:		
Construction Contingency		$16,119,000
Technical Services		$0
Impact Costs		$1,650,000
Construction Management		$0
Site Acquisition		$22,467,000
Utility Agreements		$26,000,000
Subtotal Estimated Base Costs		**$407,402,000**
Inflation Allowance / Locality Adjustment		$47,598,000
Total Estimated Cost, Phases I-III, V, VII		**$455,000,000**
Total Estimated Cost, Phases IV and VI		**$50,000,000**
Renovation	30,000 GSF	
Total Estimated Cost		**$505,000,000**

XI. Operating Costs of the Chosen Option

Present Facility	
Square Footage Involved	Livermore VAMC Campus: 249,000 GSF
Current FTE	351
Total Operating Costs[1]	**$44,670,220**
Ancillary Services	*$14,132,623*
Personnel Services	*$30,537,597*
Other Recurring Costs	*N/A*
Proposed Project	
Square Footage Involved	Central Valley CLC (Phase I and VII): 150,000 GSF Central Valley CBOC: 158,000 GSF Termination of Stockton CBOC Lease: 9,997 NUSF East Bay CBOC: 35,000 GSF Termination of Fremont CBOC Lease: 9,925 NUSF Palo Alto Procedure Center Renovation: 30,000 GSF Central Valley Engineering/Logistics: 20,222 GSF Livermore VAMC Campus Divestiture: 249,000 GSF
Net New FTE	68
Incremental Operating Costs[2]	**$8,654,060**
Ancillary Services	*$2,737,944*
Personnel Services	*$5,916,116*
Other Recurring Costs	*N/A*
Total Operating Costs[1]	**$53,324,280**
Non-Recurring Activations	**$92,736,780**
Furniture, Fixtures & Equipment (FF&E)	*$75,067,415*
Non-Recurring Support	*$17,669,365*

[1]Operating costs recur on an annual basis for resources (including staff) necessary to support services to be provided from the space being built or remodeled.
[2]Incremental operating costs are net of present facility. These are not indicative of the total operating costs for the project at completion.

Page Intentionally Left Blank

Dallas, Texas
Construct Long Term Care Spinal Cord Injury Unit

Funding of $78,500,000 requested in this FY 2021 budget will provide for continued construction of 30-bed Long Term Care Spinal Cord Injury Unit.

This project constructs a 30-bed Long Term Care Spinal Cord Injury Unit, a warehouse/ administration building, parking garage, and central plant improvements and provides for the reworking of site work at the Dallas VAMC.

I. Budget Authority:

Total Estimated Cost	Available Through 2020 Request	2021 Request	Future Request
$265,600,000	$170,500,000	$78,500,000	$16,600,000

Detail of Project Phases
The project phase being requested this year is Phases IIA, which continues the construction of the Long Term Care Spinal Cord Injury (LTC-SCI) unit and connects to adjacent spaces of the Acute SCI Building.

Design was funded in FY 2009. Phase I was appropriated and authorized in FY 2013 to support the construction of the parking garage and associated site work, which included the rerouting of Liberty Loop Road on the campus. Initial funding for Phases II and III was provided in FY 2019. This year's funding request will provide additional funding to continue through construction award of the LTC-SCI building. Future funding will be requested to continue construction of the Phase III. To maintain continuity of project management, this project will be administered solely by VA. The table below provides more details on the phases being requested this year.

Project Phases Included in the FY 2021 Request

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
Phase IIA – Continue Construction of Long-Term Spinal Cord Injury Center	$78,500	0	Included in FY 2019	$0	$0

The table below provides details on all phases in this project, listed by the fiscal year funds were requested and then by phase. Major construction project funds are required to be appropriated and authorized.

Total Project Scope (Sorted by Request Year and Phase)

Phase/Description	Total Est. Cost ($000)	Gross Square Feet (GSF)		Authorized ($000)	Appropriated ($000)
		Renov.	New		
FY 2009					
Design	$8,900	0	0	$0	$8,900
FY 2013					
Phase I –Construct Parking Garage, Site Work, Demolition, and Road Work	$25,339	0	0	$155,200	$33,500
FY 2016					
Reprogramming	($7,586)	0	0	$0	($7,586)
FY 2019					
Phase II – Initial Construction of Long-Term Spinal Cord Injury Center	$109,100	0	185,000	$0	$124,100
Phase III – Initial Funding for Construction of Warehouse and Renovation of Portion of Bldg 2	$34,747	7,310	79,000	$0	$11,586
FY 2021					
Phase IIA – Continue Construction of Long-Term Spinal Cord Injury Center	$78,500	0	Included in FY 2019	$0	$0
Future Year					
Phase IIIA – Continue Construction of Warehouse and Renovation of Portion of Bldg 2	$16,600	Included in FY 2019	Included in FY 2019	$0	$0
Dallas Totals	**$265,600**	**7,310**	**264,000**	**$155,200**	**$170,500**

II. Priority Score: FY 2015 – 0.2964
Major Construction projects are funded based on their priority ranking and on their ability to award construction contracts in the current fiscal year.

III. Description of Project:
This project proposes to construct approximately 264,000 gross square feet (GSF) for a 30-bed LTC-SCI unit with future expansion capabilities, a combined warehouse and administration building, utility upgrades at the CUP, and includes necessary sitework, renovation of the laundry in building 2, and demolition of approximately 35,000 GSF of buildings within the new warehouse and administration building's planned footprint. The 30-bed LTC-SCI facility will be operationally integrated with the existing 30-bed acute SCI center at the Dallas campus. The project also constructs a new parking garage and additional surface parking. These parking additions will help mitigate the existing parking deficiency at the campus. Construction of this project includes temporary parking, provision of temporary swing space, modification and realignment of the campus loop road, and upgrading the cost-efficient Energy Center.

IV. Alternatives to Construction Considered
Status Quo:
This alternative would leave the LTC-SCI beds that the Dallas VAMC currently contracts out in the community with private providers. The number of qualified LTC-SCI care providers in the community is limited and there is a risk that these providers may not adequately meet patient demand for services. Currently, within VISN 17, all 132 LTC-SCI beds are contracted out. Leaving all of the LTC-SCI beds contracted out to the community does not provide the continuum of care needed for these critical patients. As such, this is not the preferred alternative.

Alternative 1: New Construction and Renovation (Preferred Alternative)
This alternative would construct a 30-bed LTC-SCI unit with future expansion capabilities as well as associated clinical, administrative and support space, and adequate parking. New construction provides the greatest benefit to current and future patient populations by meeting current and projected patient demand. A new LTC-SCI facility would minimize the need for contracting out LTC-SCI beds in the community. This alternative would also improve opportunities for potential Department of Defense (DoD) collaboration. This alternative helps the Dallas Health Care System meet the projected workload demands and SCIP gaps in the timeliest manner. For these reasons, this is the preferred alternative.

Alternative 2: Renovation
This alternative proposes to renovate existing vacant or underutilized VA-owned buildings on the Dallas VAMC campus to accommodate the entire proposed project. For this alternative to be viable, VA would need to own a building, both within the same geographical area and with a floor plan able to accommodate the requirements as proposed in this project. Local VA planners have confirmed that there are no existing VA-owned facilities that are suitable for renovation that fit the project requirements. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 3: Lease
This alternative proposes that VA would lease an approximately 201,000 net usable square feet (NUSF) (equivalent to the approximately 271,000 GSF required for this project) facility off campus to provide a new 30-bed LTC-SCI unit with associated clinical and administrative support spaces, a warehouse, and adequate parking. This alternative would be operationally inefficient because the LTC-SCI facility would be separate from the existing Dallas Health Care System's acute SCI, clinical, and ancillary support. This option would also require Veterans and staff to travel from leased space to the medical center regularly, thereby reducing efficiency and incurring additional costs. For these reasons, this is not the preferred alternative.

Alternative 4: Contract Out
This alternative would contract out services to providers in the community. Due to the complexity of SCI care, the quality of care provided to Veterans and their families in the community is considered less than optimal. This alternative would also disrupt the continuity of care Veterans currently receive from VA providers and would likely reduce teaching programs and clinical research opportunities. For these reasons, this is not the preferred alternative.

Alternative 5: Acquisition of an Existing Facility through Purchase
This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and that would accommodate all project requirements in the same manner as the preferred alternative. However, high-level market research has indicated that a suitable facility for possible acquisition and subsequent renovation, which would meet all project requirements in the same manner as the preferred alternative, does not exist in the delineated market area (10- mile radius of the Dallas VAMC) of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6: Collaboration with DoD for a Joint Facility
This alternative proposes to construct a new joint facility in collaboration with the Department of Defense (DoD) in the vicinity of the existing VAMC to provide space for existing services and functions. However, according to VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no facility sharing opportunities in the vicinity of the proposed project. In addition, the nearest DoD location, the Naval Branch Health Clinic in Fort Worth, is approximately 40 miles away. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquisition*	Ancillary Services**	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE
Status Quo	$5,335	$1,316,402	$0	$1,321,736	4,647	N/A
New Construction	$293,948	$991,216	$52,240	$1,337,403	4,723	76
Renovation	N/A	N/A	N/A	N/A	N/A	N/A
Lease	$81,882	$1,068,975	$52,240	$1,203,096	4,723	76
Contract Out	$63,189	$1,554,398	$0	$1,617,587	4,034	(613)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A

*This is the total estimated cost for construction/renovation projects or build-out (special purpose renovations) for leases, in discounted dollars.
**This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template)

VI. Analysis of Benefits

The preferred alternative, New Construction and Renovation, would deliver the best benefit to VA by addressing all current and projected workload needs at the Dallas SCI center. Two principal concerns that will be addressed are adding capacity to provide the highest quality of care for Veterans with SCI needs, and ensuring a continuum of care for patients across all VA services, including SCI. Construction of a new on-campus LTC-SCI center would allow VA to create a unique rehabilitative environment that meets the unique psychosocial and physical care needs of SCI patients. discussed in the previous section, the Status Quo would not address any of the existing gaps, and the Acquire an Existing Facility and VA/DoD Collaboration alternatives are not viable. New Construction, with total life cycle costs of approximately $1.3 billion would be the best solution to support VA's strategic goals and objectives and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable and efficient care for Veterans.

VII. Demographic Data*

	2017	2022	2027	2037	Change (2017-2037)
Veteran Population	422,701	401,926	379,969	338,722	-19.9%
Enrollees	184,147	199,180	205,110	203,871	10.7%

*Data reflects the VISN 17, North Texas Market.

VIII. Workload*

	2017	2022	2027	2037	Change (2017-2037)
SCI Bed Days of Care	6,096	6,326	6,226	5,573	-8.6%

*Data reflects workload for the VISN 17, North Texas Market

IX. Schedule – This Phase

Award Construction Documents	January 2019
Award Construction Contract	June 2021
Complete Construction	July 2024

X. Project Cost Summary of the Chosen Option

New Construction:	263,834 GSF	$142,976,000
Renovation:	7,310 GSF	$1,566,000
Demolition:	34,906 GSF	$623,000
Parking Structure:	1,000 Spaces	$25,339,000
Other Construction Costs:		
Pre-Design Development Allowance		$523,000
Total Other Costs (Utilities, etc.)		$39,055,000
Subtotal Estimated Base Construction Cost		**$210,082,000**
Other Non-Construction Costs:		
Construction contingency		$9,682,000
Technical services		$17,545,000
Impact costs		$1,850,000
Construction management		$5,779,000
Site Acquisition		$0
Utility Agreements		$2,500,000
Subtotal Estimated Base Costs		**$247,438,000**
Inflation Allowance / Locality Adjustment		$18,162,000
Total Estimated Cost		**$265,600,000**

IX. Operating Costs of the Chosen Option

Present Facility	
Square Footage Involved	Building 2: 559,727 GSF Building 10: 4,530 GSF Building 12: 28,270 GSF Building 27: 21,106 GSF Building 70: 33,725 GSF
Current FTE	4,647
Total Operating Costs[1]	**$855,131,198**
Ancillary Services	*$304,985,857*
Personnel Services	*$550,145,341*
Other Recurring Costs	*N/A*
Proposed Project	
Square Footage Involved	New Construction: 263,834 GSF Renovation: 7,310 GSF Demolition: 34,906 GSF
Net New FTE	76
Incremental Operating Costs[2]	**$13,985,361**
Ancillary Services	*$4,987,933*
Personnel Services	*$8,997,428*
Other Recurring Costs	*N/A*
Total Operating Costs[1]	**$869,116,559**
Non-Recurring Activations	**$49,022,037**
Furniture, Fixtures & Equipment (FF&E)	*$39,217,632*
Non-Recurring Support	*$9,804,405*

[1]Operating costs recur on an annual basis for resources (including staff) necessary to support services to be provided from the space being built or remodeled.
[2]Incremental operating costs are net of present facility. These are not indicative of the total operating costs for the project at completion.

Page Intentionally Left Blank

Tulsa, Oklahoma
Construct Inpatient Facility

I. Budget Authority:

Total Estimated Cost	Available Through 2020 Request	2021 Request	Future Request
$220,900,000	$0	$120,000,000	N/A

II. Priority Score: FY 2021 – 0.2735
Major Construction projects are funded based on their priority ranking and on their ability to award construction contracts in the current fiscal year.

III. Description of Project:
This project includes the development of an approximately 260,000 GSF inpatient facility for 58 medical/surgical, intensive care unit, and medical rehab beds; an emergency department; operating rooms; radiology; and the ancillary and support services needed to maintain these services. With the development of this facility, all medical, surgical, and rehabilitation beds would be moved from the Jack C. Montgomery VAMC in Muskogee to Tulsa, which is closer to the majority of Veterans served by the Eastern Oklahoma VA Health Care System (EOVAHCS). As an added benefit of the relocation to Tulsa, it is expected that recruiting and retention of providers, nurses, and hospital staff would become easier and that existing affiliate partnerships with Oklahoma State University (OSU), could be strengthened and new affiliate partnerships with other higher education entities and community partners could be forged. Upon completion of this project, space will be available for backfill at the Jack C. Montgomery VAMC and VA plans to convert the previous inpatient and surgical spaces to a community living center (CLC) and expand the existing inpatient mental health services through a subsequent project.

The intent is to execute this project as a public-private partnership, made possible by Public Law 114-294, the Communities Helping Invest through Property and Improvements Needed (CHIP-IN) for Veterans Act of 2016. The CHIP-IN Act is further detailed in Chapter 9.2 of *Volume IV: Construction, Long Range Capital Plan and Appendix*. In this partnership, VA would contribute this year's funding request of $120 million to the overall development of the inpatient facility described above.

IV. Alternatives to Construction Considered
Status Quo:
This alternative would continue providing inpatient services in Muskogee. A majority of Eastern Oklahoma Veterans reside in and around Tulsa. This alternative would require this large number of Veterans to continue to travel nearly an hour from the surrounding Tulsa area to Muskogee to receive care. In addition, this alternative would require VA's continued reliance on community resources for a large percentage of services and would not improve the recruitment and retention of providers and nurses. Further, the status quo alternative would continue to provide inpatient services in an outdated hospital that does not. For these reasons, this is not the preferred alternative.

Alternative 1: New Construction (Preferred Alternative)
This alternative proposes to move inpatient services from Muskogee to Tulsa into a new, state-of-the-art inpatient-focused facility. This would locate services closer to a large percentage of Eastern Oklahoma Veterans, provide opportunities for enhancing affiliations with the Tulsa medical community, improve recruitment and retention of staff, and ultimately allow for the eventual backfill of spaces at Muskogee for the introduction of a CLC and the expansion of inpatient mental health services. There is an opportunity for VA to receive a generous donation from community partners in the Tulsa area which may provide for a portion of the cost of the project. For these reasons, this is the preferred alternative.

Alternative 2: Renovation
This alternative proposes to renovate a vacant or underutilized VA-owned facility for the inpatient services being proposed. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed donated building, with a floor plan able to accommodate the requirements proposed in this project. In addition, as part of the 2021 SCIP process, the EOVAHCS identified an existing large space gap (deficit) for the market that would not be resolved through renovating space. Therefore, this option is not viable and has been excluded from the quantitative analysis below.

Alternative 3: Lease
This alternative proposes to lease an approximately 192,600 net usable square foot (NUSF) (equivalent to approximately 260,000 GSF) inpatient facility. The lease would provide for expanded inpatient services in the Tulsa area in the same manner as the preferred alternative, but may not be able to generate the same level of operational efficiencies and opportunities with affiliates and community partners as the preferred alternative. Therefore, this is not the preferred alternative.

Alternative 4: Contract Out
This alternative assumes that all services proposed in the project would be contracted out to fee-basis providers in the Tulsa area. However, there may not be sufficient, qualified private health care providers in the Tulsa market area to absorb all of the current and projected Veteran workload. In addition, this alternative may be more costly and could result in a loss of quality and control over Veteran health care. Therefore, this alternative is not optimal and is the least preferred.

Alternative 5: Acquisition of an Existing Facility through Purchase
This alternative proposes that VA purchases an existing facility that is suitable for renovation and able to accommodate all project requirements in the same manner as the preferred alternative. However, high-level market research and interviews with local VA planners has indicated that a suitable facility for possible acquisition and subsequent renovation that would meet all project requirements in the same manner as the preferred alternative is not currently available for sale in the delineated market area of the proposed project. Therefore, this option is not viable and has been excluded from the quantitative analysis below.

Alternative 6: Collaboration with DoD for a Joint Facility

This alternative proposes to construct a new joint facility, in collaboration with the Department of Defense (DoD), in the vicinity of the downtown Tulsa area to provide expanded inpatient services in the Tulsa area. However, according to VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no facility sharing opportunities in the vicinity of the proposed project. Therefore, this alternative has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquisition*	Ancillary Services**	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE
Status Quo	$0	$2,465,910	$0	$2,465,910	0	N/A
New Construction	$248,056	$2,429,227	$60,671	$2,737,954	574	574
Renovation	N/A	N/A	N/A	N/A	N/A	N/A
Lease	$77,757	$2,491,828	$60,671	$2,630,256	574	574
Contract Out	$23,451	$3,485,165	$0	$3,508,616	0	0
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A

*This is the total estimated cost for construction/renovation projects or build-out (special purpose renovations) for leases, in discounted dollars.

**This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template)

VI. Analysis of Benefits

The preferred alternative, New Construction, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo would not address concerns regarding long travel times for Tulsa area Veterans to VA services in Muskogee; Lease not be able to generate the same level of operational efficiencies and opportunities with affiliates and community partners; Contract Out could result in a loss of quality and control over Veteran health care; and the Renovation, Acquire an Existing Facility and VA/DoD Collaboration alternatives are not viable. The New Construction alternative, with total life cycle costs of approximately $2.74 billion would be the best solution to support VA's strategic goals and objectives and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable and efficient care for Veterans.

VII. Demographic Data*

	2017	2022	2027	2037	Change (2017-2037)
Veteran Population	108,999	98,846	88,972	71,560	-34.3%
Enrollees	51,391	52,949	52,548	47,678	-7.2%

*Data reflects the VISN 19, Eastern Oklahoma Market.

VIII. Workload*

	2017	2022	2027	2037	Change (2017-2037)
Ambulatory Procedures	47,019	52,740	55,117	56,046	19.2%
Ambulatory Services	1,124,841	1,333,193	1,476,857	1,573,416	39.9%
Inpatient Bed Days of Care	29,185	28,148	26,154	21,234	-27.2%

*Data reflects workload for the VISN 19, Eastern Oklahoma Market, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule – This Phase

Award Construction Documents	TBD
Award Construction Contract	TBD
Complete Construction	TBD

X. Project Cost Summary of the Chosen Option

New Construction:	260,000 GSF	$120,141,000
Renovation:	0 GSF	$0
Demolition:	0 GSF	$0
Surface Parking:	895 Spaces	$3,438,000
Other Construction Costs:		
Pre-Design Development Allowance		$15,856,000
Total Other Costs (Utilities, etc.)		$34,981,000
Subtotal Estimated Base Construction Cost		**$174,416,000**
Other Non-Construction Costs:		
Construction Contingency		$8,230,000
Technical Services		$8,230,000
Impact Costs		$0
Construction Management		$4,938,000
Site Acquisition		$9,000,000
Utility Agreements		$1,750,000
Subtotal Estimated Base Costs		**$206,564,000**
Inflation Allowance / Locality Adjustment		$14,336,000
Total Estimated Cost		**$220,900,000**

IX. Operating Costs of the Chosen Option

Present Facility	
Square Footage Involved	N/A
Current FTE	1,451
Total Operating Costs[1]	**$149,088,854**
Ancillary Services	*$16,022,670*
Personnel Services	*$133,066,185*
Other Recurring Costs	*N/A*
Proposed Project	
Square Footage Involved	New Construction – 260,000 GSF
Net New FTE	574
Incremental Operating Costs[2]	**$58,977,948**
Ancillary Services	*$6,338,396*
Personnel Services	*$52,639,552*
Other Recurring Costs	*N/A*
Total Operating Costs[1]	**$208,066,803**
Non-Recurring Activations	**$61,870,039**
Furniture, Fixtures & Equipment (FF&E)	*$49,496,031*
Non-Recurring Support	*$12,374,008*

[1]Operating costs recur on an annual basis for resources (including staff) necessary to support services to be provided from the space being built or remodeled.

[2]Incremental operating costs are net of present facility. These are not indicative of the total operating costs for the project at completion.

Page Intentionally Left Blank

Fort Sam Houston National Cemetery
Phase 3 Gravesite Development and Cemetery Improvements

Funding requested in 2021 provides gravesite expansion and improvements of infrastructure at the Fort Sam Houston National Cemetery in San Antonio, TX.

I. Budget Authority

Total Estimated Cost*	Available Through 2020	2021 Request*	Future Request
$56,000,000	$0	$56,000,000	$0

* Non-construction costs of $13,020,000 for crypts are included in the Compensation and Pension Appropriation.

II. Priority Score: FY 2021 – 0.5484

III. Description of Project

This is a gravesite expansion project that will enable Fort Sam Houston National Cemetery to continue providing burial services for eligible Veterans in and around the San Antonio Metropolitan area. In accordance with the master plan for the 338-acre site, this project will develop approximately 35 of the 136 undeveloped acres remaining at Fort Sam Houston National Cemetery. This is the third phase of cemetery development and will primarily include the construction of burial options intended to provide additional capacity until 2041. This project will provide approximately 35,000 gravesites including both casket and cremation sites in new burial sections. The remainder of the site will be developed in future 15-year phased projects.

In addition to cemetery expansion, improvements to facilities and infrastructure elements that are necessary to support the added burial capacity will also be part of this phase of construction. This will include expansion of the Administration Building and construction of a new Honor Guard Building, as the current Honor Guard building will be converted into a Public Information Center. Improvements to roads and grounds will include additional visitor parking, pavement and restoration of existing asphalt roads and concrete pavements, to include curbs and storm sewer inlets. This project will pave the area between the Columbarium and define courtyards as well as incorporate the existing Memorial Path into the design. This project will also straighten and stabilize leaning columbaria as well as correct any other deficiencies with the columbarium units.

Other improvements include several minor security improvements to include evaluating the existing perimeter wall and provide repairs or replacement sections to extend the life of the wall. This project also provides for two additional covered storage bins in the Maintenance Yard and a new Materials Storage Building to allow for drive through storage. Finally, the irrigation system will be evaluated as the San Antonio Water Supply Authority has advised that the recycled water supply is now at capacity. This project will evaluate alternate sources to expand the cemetery irrigation water system.

IV. Alternatives Considered

Four alternatives were considered: a major construction project, a combination of several minor construction projects, grant funding of a state or tribal organization Veterans cemetery, and a status quo option.

Major Construction (Preferred Alternative) – This alternative would develop approximately 35 acres of the undeveloped 136 acres remaining at Fort Sam Houston National Cemetery in a single construction project thereby providing additional full-option burial capacity for 15 years. This meets customer demand for burial options and consolidates all requirements into a single construction project with minimal disruption to cemetery operations.

Multiple Minor Construction Projects - An alternative to a major construction project is execution of several minor construction projects over multiple years. This would provide the same result as the major, but over a much longer period of time. This piece-meal approach to development would result in higher administrative project costs, higher overhead, the risk of inconsistent design resulting from multiple design contracts, and continuous disruption over several years.

State or Tribal Organization Veterans Cemetery – A third alternative to the major construction project is the development of a state or tribal organization Veterans cemetery via VA grant funding. However, there are significant risks to the success of this option.

To serve the existing veteran population, a new state and tribal veteran's cemetery would need to be constructed in proximity to the Fort Sam Houston National Cemetery which would begin to close to first interment burials in FY 2029 without an investment in Alternative #2 or #3 above. This would result in an inefficient duplication effort since this alternative would require a complete investment in a new cemetery's infrastructure. The State of Texas has already constructed four state Veterans cemeteries, the closest of which is 180 miles west of the Fort Sam Houston National Cemetery. It is unlikely the State of Texas would consider constructing a replacement cemetery to the Fort Sam Houston National Cemetery since the existing national cemetery has 136 acres remaining undeveloped and available for future cemetery expansions. Although the State of Texas has established four other veterans cemeteries throughout the state, well beyond the established 75-mile service radius of a veterans cemetery, they have shown no interest in applying for a grant to establish any additional state or tribal veterans cemeteries at this time.

Status Quo - A no-action alternative is not considered viable because it results in NCA not fulfilling its goal to assure that eligible Veterans have access to a burial option. In a no-action alternative, approximately 293,170 Veterans in Central East Texas would no longer have access to burial in a national or state Veterans cemetery within a reasonable distance from their residence.

V. Analysis of Benefits

This project will avoid gravesite depletion and loss of burial options for Veterans. NCA is currently addressing depletion of burial options in the short term with one minor construction project from 2015, which will prevent interruption of burial benefits for Veterans. The major construction project will subsequently align future depletion dates and extend all burial options for 15 years.

	Current Depletion Date*	Depletion Date After This Project*
Pre-placed Crypts (caskets)	June 2029	April 2039
In-ground Cremation Sites	February 2041	Feb 2041
Columbarium Niches (cremation)	August 2024	August 2038

*All depletion projections are based on current interment rates

A single major construction project is the best option to ensure both continuity of benefits for Veterans and minimal disruption to the cemetery's national shrine environment. This project will allow the Fort Sam Houston National Cemetery to continue to be a place of honor and memory in a majestic setting and an environment of serenity, historic sacrifice, and nobility of purpose. NCA strives to ensure that each visitor should depart feeling that the grounds, the gravesites, and the environs of the cemetery are a beautiful and awe-inspiring tribute to those who gave much to preserve our Nation's freedom and way of life.

VI. Demographic Data*

	2022	2023	2028	Change 2022-2028
Annual Est. Veteran Deaths [1]	6,646	6,630	6,612	-0.5%

* Data relevant to the Fort Sam Houston National Cemetery service area

[1] Annual estimated Veteran deaths within the cemetery's 75-mile service area

VII. Workload

	2022	2023	2028	Change 2022-2028
Annual Interments [1]	4,281	4,302	4,454	4.0%
Cumulative Gravesites [2]	176,735	181,037	202,974	14.8%

[1] Annual interments = (casket +in-ground cremains + columbaria) interments

[2] Cumulative projected interments (all categories) beginning with figures from 2022 forward

VIII. Schedule

Initiate Construction Documents	July 2020
Construction Contract Award	September 2021
Complete Construction	December 2023

IX. Project Cost Summary of the Chosen Option

Demolition	$4,640,895
Gravesite Expansion	$18,108,700
Infrastructure Improvement	$9,340,728
Pre-Design Development Allowance	$4,054,954
Site Improvements (Temp Utilities, Parking, Paving)	$5,202,405
Landscaping	
Subtotal Estimated Base Construction Costs:	**$41,347,682**
Other Non-Construction Costs:	
Technical Services	$924,483
Construction Management Firm Costs	$1,087,120
Construction Contingency	$3,773,089
Escalation/Market Condition Allowance	$970,707
Ingress/Egress/Environmental Compliance/ Permits & Mitigation	$7,896,919
Subtotal Other Costs:	**$14,652,318**
Total Estimated Cost:	**$56,000,000**

X. Operating Costs of the Chosen Option

	Project Activation Costs		Present Facility Operating Costs	
Non-recurring costs: [1]				
Equipment costs				
Total non-recurring				
Recurring costs: [2]				
Personnel and Compensation	(FTE: 0)		(FTE: 43)	$4,021,800
Other recurring (Services, Supplies, etc.)		$0		2,158,100
Total recurring		**$0**		**6,179,900**
Total Operating Cost		**$0**		

[1] Non-recurring: resources necessary to bring the project on-line

[2] Recurring: resources (including staff) necessary to support services to be provided from the space being built or remodeled on an annual basis

Miramar National Cemetery
Phase 2 Gravesite Development

Funding requested in 2021 provides gravesite expansion and improvement of infrastructure at the Miramar National Cemetery in San Diego, CA.

I. Budget Authority

Total Estimated Cost*	Available Through 2020	2021 Request*	Future Request
$31,000,000	$0	$31,000,000	$0

* Non-construction costs of $4,450,000 for crypts are included in the Compensation and Pension Appropriation.

II. Priority Score: FY 2021 – 0.4261

III. Description of Project

This is a gravesite expansion project that will enable Miramar National Cemetery to continue providing burial services for eligible Veterans in and around the San Diego Metropolitan area. This project will update and follow the master plan for the entire 313.17-acre site and develop approximately 20 of the 241 undeveloped acres remaining at Miramar National Cemetery. It comprises the second construction phase of cemetery development and will primarily include the construction of additional burial options intended to provide 15 years of service on undeveloped land. This project will provide between 25,000 and 28,000 gravesites, including both casket and cremation sites in new burial sections. The remainder of the site will be developed in future 15-year phased projects.

In addition to cemetery expansion, improvements to facilities and infrastructure elements that are necessary to support the added burial capacity will also be part of this phase of construction. This will include improvements to the Administration Building and the construction of a separate Honor Guard building within the Maintenance Complex. Improvements to the roads and grounds will include a right-hand turn deceleration lane into the main entrance, a wider service entrance to the Maintenance Yard and additional paving work for the expansion of the Memorial Walkway. Access roads with roll curbs will be constructed to access the new burial areas and close the loop that ended at the Committal Service Shelter constructed in Phase 1 and connecting to the Public Assembly Area. With the existing cemetery road network approaching fifteen years old, the entire road network will receive a slurry-seal to extend their service life. Finally, the entire cemetery pavements, including concrete roads/curbs/drainage, and walkways will be evaluated and repaired as necessary.

Other improvements include security and safety upgrades such as relocating existing fencing due to the addition of the deceleration lane on Nobel Drive and irrigation pump stations as needed. This project will also evaluate/install a security camera system at key cemetery structures and all entrances. Bollards and/or safety seat walls will be constructed, as well as pump houses as needed. This project will replace damaged piping and evaluate a treating system to reduce chloride levels as a result of pipe damage caused by the high chloride levels currently found in the reclaimed

water. The existing buildings at the cemetery will be analyzed for potential energy efficiency upgrades/replacements and the irrigation system will be expanded into the new burial areas as well as expanding the existing Geographic Information System.

IV. Alternatives Considered

Four alternatives were considered: a major construction project, a combination of several minor construction projects, a grant funding of a state or tribal organization Veterans cemetery, and a status quo option.

Major Construction (Preferred Alternative) – This alternative would develop approximately 20 acres of the undeveloped 241 acres remaining at Miramar National Cemetery in a single construction project thereby providing an additional 15 years of full-option burial capacity. This meets customer demand for burial options and consolidates all requirements into a single construction project with minimal disruption to cemetery operations.

Multiple Minor Construction Projects - An alternative to a major construction project is execution of several minor construction projects over multiple years. This would provide the same result as the major, but over a much longer period. This piece-meal approach to development would result in higher administrative project costs, higher overhead, the risk of inconsistent design resulting from multiple design contracts, and continuous disruption over several years.

State or Tribal Organization Veterans Cemetery – A third alternative to the major construction project is the development of a state or tribal organization Veterans cemetery with VA grant funding. To serve the existing Veteran population, a new state and tribal Veterans cemetery would need to be constructed in proximity to Miramar National Cemetery, which would close to first interment burials in 2028 without an investment in alternative 1 or 2 above. However, it is unlikely that the State of California would consider a replacement cemetery given the existing national cemetery has 241 acres of remaining undeveloped land available for future cemetery expansions.

Status Quo - A no-action alternative is not considered viable because it results in NCA not fulfilling its goal to assure that eligible Veterans have access to a burial option. In a no-action alternative, approximately 445,000 Veterans in the San Diego/Southern California area would no longer have access to burial in a national or state Veterans cemetery within a reasonable distance from their residence.

V. Analysis of Benefits

NCA programmed a 2018 minor construction project to provide additional gravesite capacity extending in-ground and columbarium niche cremation gravesite depletion dates to November 2027 and December 2028, respectively. This major construction project will subsequently align future depletion dates and provide an additional 15 years of full-option burial capacity.

	Current Depletion Date*	Depletion Date After This Project*
Pre-placed Crypts (caskets)	May 2028	August 2039
In-ground Cremation Sites	August 2028	October 2040
Columbarium Niches (cremation)	October 2029	Feb 2040

* All depletion projections are based on current interment rates

A single major construction project is the best option to ensure both continuity of benefits for Veterans and minimal disruption to the cemetery's national shrine environment. With this project, Miramar National Cemetery will continue to be a place of honor and memory in a majestic setting and an environment of serenity, historic sacrifice, and nobility of purpose. NCA strives to ensure that each visitor should depart feeling that the grounds, the gravesites, and the environs of the cemetery are a beautiful and awe-inspiring tribute to those who gave much to preserve our Nation's freedom and way of life.

VI. Demographic Data*

	2022	2023	2028	Change 2022-2028
Annual Est. Veteran Deaths [1]	12,503	12,085	10,319	-17.5%

* Data relevant to the Miramar National Cemetery service area

[1] Annual estimated Veteran deaths within the cemetery's 75-mile service area

VII. Workload

	2022	2023	2028	Change 2022-2028
Annual Interments [1]	3,041	2,965	2,491	-18.1%
Cumulative Gravesites [2]	28,186	31,151	44,492	57.9%

[1] Annual interments = (casket +in-ground cremains + columbaria) interments

[2] Cumulative projected interments (all categories) beginning with figures from 2022 forward

VIII. Schedule

Initiate Construction Documents	May 2020
Construction Contract Award	August 2021
Complete Construction	August 2024

IX. Project Cost Summary of the Chosen Option

Demolition	$2,651,940
Gravesite Expansion	$11,735,000
Infrastructure Improvement	$4,581,472
Pre-Design Development Allowance	$2,177,564
Site Improvements (Temp Utilities, Parking, Paving)	$3,025,000
Landscaping	
Subtotal Estimated Base Construction Costs:	**$24,170,976**
Other Non-Construction Costs:	
Technical Services	$555,932
Construction Management Firm Costs	$531,761
Construction Contingency	$1,812,823
Escalation/Market Condition Allowance	1,428,508
Ingress/Egress/Environmental Compliance	$2,500,000
Subtotal Other Costs:	**$6,829,024**
Total Estimated Cost:	**$31,000,000**

X. Operating Costs of the Chosen Option

	Project Activation Costs		Present Facility Operating Costs	
Non-recurring costs: [1]				
Equipment costs				
Total non-recurring				
Recurring costs: [2]				
Personnel and Compensation	(FTE: 0)		(FTE: 20)	$2,316,700
Other recurring (Services, Supplies, etc.)		$0		$1,673,200
Total recurring		**$0**		**$3,989,900**
Total Operating Cost		**$0**		**$3,989,900**

[1] Non-recurring: resources necessary to bring the project on-line
[2] Recurring: resources (including staff) necessary to support services to be provided from the space being built or remodeled on an annual basis

Construction, Major
Advance Planning and Design Fund

I. Budget Authority

2021 Request Veterans Health Administration ($000)…….....	$117,781
2021 Request National Cemetery Administration ($000) …….…….….....	$2,000
2021 Request General Administration (Staff Offices) ($000)……..…..	$9,741

II. Description of Program

This request includes $129,495,000 in Advance Planning and Design Funds (APDF) for support of the Veterans Health Administration (VHA), National Cemetery Administration (NCA), and General Administration/Staff Offices. This allows VA to begin planning and design activities prior to obtaining funding for the construction and/or leasing contract.

VA uses APDF for developing the scope for design of Major Construction projects and leases, standards for planning, design, and construction for all VA projects, studies for technology, environment of care design, facility performance, as well as other requirements such as space, equipment for service delivery, physical security, structural safety, electrical, plumbing, communications, transport, roadway circulation, construction standards, design guides, heating, ventilation, air conditioning, water supply, drainage, cost estimating and others. Refined project requirements and standards result in optimum control of the environment of care for Veterans. It also provides a more accurate assessment of quality, performance, definition of project scope, and cost estimates for all VA administrations and offices.

The APDF is also used in the VHA, NCA, and VBA for assessments of health care needs, design programs, facility condition assessments, and needs assessments that may or may not lead to capital investments and other capital investment activities, such as portfolio development and management activities and investment strategies. The fund can also be used for studies of utilities and capital facilities, to develop public private ventures (enhanced use leases), for costs of acquiring contracting services, to prepare master facility plans or historic preservation plans, to conduct environmental assessments, impact studies, energy studies or audits, to dispose of excess land, and design and construction-related research studies, including post-occupancy evaluations. The APDF request includes funds for activities such as master planning for new and expansion of existing national cemeteries, environmental assessments at national cemeteries, and conducting studies and facility condition assessments at national cemeteries and soldiers lots.

III. Background/Justification

In order to accomplish effective design, it is necessary to resolve functional and scope issues early in the planning process. VA utilizes a three-phase design process similar to that used in the private sector. The schematic design and design development evaluates alternative design concepts, establishes functional interrelationships, establishes floor plan layouts and selects all building systems. The contract document preparation phase produces the detailed construction drawings in order to enter a contract. This line item provides funding for schematic design, design development, and construction document phases up to 100 percent of design for Major Construction projects. This will ensure that sufficient design is completed prior to requesting construction funds.

This funding is needed to carry out planning and project development activities for projects to be submitted in future budget requests for construction funding as well as supporting capital facility related studies.

	2019 Actual	2020 Budget Estimate	2020 Current Estimate	2021 Request	2020-2021 Inc./Dec.
Veterans Health Administration	$95,000	$72,000	$72,000	$117,781	$45,781
National Cemetery Administration	$10,000	$35,000	$35,000	$2,000	($33,000)
General Administration (Staff Office)	$6,000	$9,500	$9,500	$9,741	$214
Total	$111,000	$116,500	$116,500	$129,495	$12,995

Construction, Major
Asbestos and Other Airborne Contaminates

I. Budget Authority

2021 Request ($000)……....$15,000

II. Description of Program

The Environmental Protection Agency Regulation 40 CFR, Part 61, is intended to protect the environment from asbestos emissions and OSHA Regulation 29 CFR, Part 1910, is intended to protect people in the workplace. These regulations allow for several possible means of controlling airborne contamination, including removal and containment. 40 CFR, Part 61, Subparts A & B, and 29, Part 1910 prescribe measures to be taken to reduce health hazards caused by breathing airborne contaminates (i.e., asbestos fibers, lead paint particles, etc.). The hazards must be addressed when buildings are remodeled or demolished, and when airborne concentrations exceed defined levels.

III. Background/Justification

Asbestos has been identified in Department of Veterans Affairs buildings, and a study was undertaken to determine the extent and intensity of the hazard these materials present. A substantial amount of removal work is required to meet current code requirements. Disturbance of this asbestos during renovation will require costly precautions to avoid hazards. When asbestos health hazards at Department of Veterans Affairs facilities have been identified and evaluated in association with a construction project, they will be abated in the most cost-effective manner.

	2019 Actual	2020 Budget Estimate	2020 Current Estimate	2021 Request	2020-2021 Inc./Dec.
Asbestos	$15,000	$12,000	$12,000	$15,000	$3,000

Construction, Major
Hazardous Waste Abatement

I. Budget Authority

2021 Request ($000)……	$2,000

II. Description of Program

This program provides funds for the clean up of hazardous substances, pollutants, and contaminants (other than asbestos, which is funded from a separate line item) for which VA has been identified as a Potentially Responsible Party (PRP) pursuant to the Comprehensive Environment Response, Compensation and Liability Act of 1980 (CERCLA), or a comparable State statute; and those situations where VA has itself identified an urgent need for the clean up of such substances for which it is responsible, even without being identified as a PRP. This program will not be used to fund non-urgent hazardous substance abatement activities that are routinely funded as a construction project or part of a project. However, this fund may be used for clean up of such substances where an unanticipated urgent condition involving such substances occurs or is discovered after commencement of actual construction work on the project.

III. Background/Justification

CERCLA, as amended by the Superfund Amendments and Reauthorization Act of 1986, makes all parties who have generated hazardous substances (including pollutants and contaminants), transported such substances, or are the owners or operators of the disposal site for such substances liable for the clean up costs if such substances are released or are about to be released into the environment. Such parties are identified as potentially responsible parties and are jointly and severally liable for the costs associated with clean up of such release sites. In a situation where joint and severable liability applies, if some PRP's become bankrupt or are otherwise exempted from liability, the remaining PRP's become liable for the full cost of clean up, regardless of the amount of substance contributed. VA, as a generator of hazardous substances, pollutants, and contaminants is subject to the assessment of clean up costs if there is a release or threatened release of such substances into the environment and VA is identified as a PRP. Such clean up costs may include, but are not limited to: 1) studies; 2) pre-and post-testing and monitoring; 3) cost of consultants, environmental specialists and certified industrial hygienists; and 4) the cost of removal and/or remediation.

	2019 Actual	2020 Budget Estimate	2020 Current Estimate	2021 Request	2020-2021 Inc./Dec.
Hazardous Waste Abatement	$26,200	$0	$0	$2,000	$2,000

Construction, Major
Major Construction Staff

I. Budget Authority

2021 Request ($000)…….....$102,719

II. Description

This consolidated request provides for 498 FTE for the Office of Construction and Facilities Management (CFM) in the amount of $102,719,000 to be funded from the Major Construction appropriation. The FTE requested will support the Department to serve our Nation's Veterans by planning, designing, constructing and acquiring, through purchase or lease, major facilities and real property, engaging in land management and minor construction activity, and setting design and construction standards. Funding will cover all costs for these employees, including salary, rent, contracts, training, travel, and - change of station.

III. Background/Justification

Funding for an amount of $102,719,000 is requested for staff located throughout the country at approximately 50 sites, including VA Central Office, and for construction manager contracts. This line centralizes costs and provides the flexibility to staff across all CFM programs. - The funds will be used to reimburse the CFM General Administration account. See Volume 3, Part 5 General Administration, Office of Acquisition, Logistics, and Construction (OALC).

Dollars in thousands	2019 Request	2020 Request[1]	2021 Request	2020-2021 Inc./Dec.
Major Construction Staff	$27,500	$88,700	$102,719	$14,019
Balances from Major Construction	$5,986	$0	$0	$0
Major Construction Seismic[2]	$0	$0	$9,588	$9,588
General Administration	$46,492	$0	$0	$0
Medical Facilities	$8,430	$0	$0	$0
From Supply Fund	$1,448	$1,552	$3,544	$1,992
Total Dollars	**$89,856**	**$90,252**	**$115,851**	**$25,599**
Major Construction Staff	151	450	498	48
Balances from Major Construction	33	0	0	0
Major Construction Seismic	0	0	51	51
General Administration	228	0	0	0
Medical Facility	37	0	0	0
Supply Fund	9	9	19	10
Total FTE	**458**	**459**	**568**	**109**

[1]Funds from General Administration ($46,492) and Medical Facilities ($8,430) will be transferred to this line item.
[2]Funding already exists for Seismic. No additional dollars are required.

Construction, Major
Judgment Fund

I. Budget Authority

2021 Request ($000)……..……..…..…	$25,000

II. Description of Program

This request provides funding for VA to reimburse the Judgment Fund for the payment of settled claims.

III. Background/Justification

The Judgment Fund, 31 U.S.C., Section 1304, was established by Congress to ensure a source of funds for prompt payment of final judgments and awards. The intent of the judgment appropriation is to expedite the payment of claims and settlements. The Department of Veterans Affairs should submit settlements to the Government Accountability Office for expected payment from the Judgment Fund. VA must reimburse the Judgment Fund when monies have been appropriated.

	2019 Actual	2020 Budget Estimate	2020 Current Estimate	2021 Request	2020-2021 Inc./Dec.
Judgment Fund	$25,000	$25,000	$25,000	$25,000	$0

Construction, Major
Non-Departmental Federal Entity to Provide Full Project Management Support

I. Budget Authority

2021 Request ($000)……..	$79,350

II. Description of Program

This request will assist in the management of VA Major Construction Projects with a total estimated cost of $100,000,000 or greater. VA uses the non-Departmental Federal Entity line item to provide full project management services for medical facilities projects to include project design, on site construction management, contract management, fiscal management, reporting and other requirements. It is estimated that the cost of these services will be 10 percent of the estimated construction cost and 8 percent of the design cost of a project.

The fund can also be used for Non-Departmental Federal Entity support on project audits, studies, metrics development and planning efforts -to enhance VA's ability to provide state-of-the-art major medical facilities and leases to serve Veterans.

III. Background/Justification

Public Laws 114-58 and 115-141 require a non-Departmental Federal entity provide full project management services and support in managing -VA's large major construction projects. Large construction projects are defined as medical facility projects with a total estimated cost more than $100,000,000. Funds appropriated to major construction projects do not cover these management services and support costs. The funding requested each year -is directly related to the VA projects that are in excess of $100 million.

	2019 Actual	2020 Budget Estimate	2020 Current Estimate	2021 Request	2020-2021 Inc./Dec.
Non-Departmental Federal Entity to Provide Full Project Management	38,700	120,000	120,000	79,350	(40,650)

Construction, Major
NCA Land Acquisition Fund

I. Budget Authority

2021 Request ($000)……	.....$5,000

II. Description

This request provides funding for new land acquisitions for the National Cemetery Administration

III. Background/Justification

The 2021 budget request includes $5,000,000 for the land acquisition line item in the Major Construction account. These funds will provide for the purchase, security and maintenance of land until construction funds become available and give NCA the flexibility to acquire land when an opportunity arises. Identifying and purchasing a parcel of land can be a difficult and unpredictable process. Often times, prospective sellers – particularly estates – desire to move more quickly than the multi-year pace of the Federal budget development and approval process. These funds will also be used to secure and maintain the land until a construction project has been approved for the acquired site.

NCA currently has the legal authority to acquire land for establishing new national cemeteries and to expand existing cemeteries. -

	2019 Actual	2020 Budget Estimate	2020 Current Estimate	2021 Request	2020-2021 Inc./Dec.
NCA Land Acquisition	5,000	20,000	20,000	5,000	(15,000)

Construction, Major
Seismic Corrections

I. Budget Authority

2021 Request ($000)…….....	$237,198

II. Description

This request provides funding to address critical seismic corrections for VA buildings at various locations. All costs associated with a seismic correction project, including planning/studies, design, and construction will be funded from this line item.

III. Background/Justification

The 2021 budget request includes $237,198,000 for the seismic corrections line item in the Major Construction account. VA has identified a seismic risk in excess of $7 billion at its facilities. This line item account will provide funding to correct critical seismic issues across VA facilities. The seismic program requests would be comprised of newly identified unfunded projects and existing partially funded major construction, minor construction, and non-recurring maintenance (NRM) projects. Seismic projects will be based on providing the full requirements associated - with seismic correction of singular buildings, not for campus wide seismic corrections. In addition, this fund would not be subject to authorization requirements, and it would have no limit on cost, size, and/or scope. The fund would provide for both new projects and the completion of existing projects. Additional costs, for phases of projects, -previously funded from the major construction appropriation will not be funded from this line item. For example, a major construction, minor construction or NRM seismic project that is funded for design can use this - line item to complete the construction portion of the project. When necessary, program management costs for program administration, supporting contracting, on-site resident engineers, program managers, and contracting officers would also be covered by the fund.

Projects that would be eligible to be funded from the seismic line item would need to meet all of the following criteria:

- have a documented seismic deficiency;
- add no more than 10 percent of new space associated with building replacement or renovation;
- provide similar functions as the facility/facilities being replaced or renovated; and
- maintain its original purpose.

For example, the seismic line item could not be used to make functional changes, such as an inpatient project that would change the area's purpose to outpatient. Any project that involves a change from the original function of the facility would be subject to existing major construction appropriation and authorization requirements. All projects would be designed using the latest accepted standards. The seismic fund is also available for taking seismically deficient buildings out of service, including by demolition, enhanced use leasing, etc. Beginning in 2019, the seismic

fund is the sole source of funding for all newly identified and existing partially funded seismic projects that meet the criteria above. VA will send a report on the progress of these projects to Congress on a semiannual basis.

	2020				
	2019 Actual	2020 Budget Estimate	2020 Current Estimate	2021 Request	2020-2021 Inc./Dec.
Seismic Corrections	1,150,000	35,000	35,000	237,198	202,198

Construction – Minor Projects

Budget Request.....$400,000,000

Appropriation Language

For constructing, altering, extending, and improving any of the facilities, including parking projects, under the jurisdiction or for the use of the Department of Veterans Affairs, including planning and assessments of needs which may lead to capital investments, architectural and engineering services, maintenance or guarantee period services costs associated with equipment guarantees provided under the project, services of claims analysts, offsite utility and storm drainage system construction costs, and site acquisition, or for any of the purposes set forth in sections 316, 2404, 2406 and chapter 81 of title 38, United States Code, not otherwise provided for, where the estimated cost of a project is equal to or less than the amount set forth in section 8104(a)(3)(A) of title 38, United States Code, [$398,800,000] *$400,000,000*, to remain available until September 30, [2024] *2025*, along with unobligated balances of previous "Construction, Minor Projects" appropriations which are hereby made available for any project where the estimated cost is equal to or less than the amount set forth in such section: *Provided*, That funds made available under this heading shall be for: (1) repairs to any of the nonmedical facilities under the jurisdiction or for the use of the Department which are necessary because of loss or damage caused by any natural disaster or catastrophe; and (2) temporary measures necessary to prevent or to minimize further loss by such causes. (Military Construction, Veterans Affairs, and Related Agencies Appropriations Act, 2020.)

Minor, Program Description

The Construction, Minor projects, appropriation provides for constructing, altering, extending and improving VA facilities, including planning, assessment of needs, architectural and engineering services, site acquisition and disposition, where the estimated cost of a project is equal to or less than $20,000,000. The 2021 minor construction request of $400 million includes $197.5 million in ongoing SCIP initiatives, $101.7 million for new Strategic Capital Investment Planning (SCIP) process initiatives, and $100.8 million for under threshold, emergent needs, enhanced use lease contributions, and required Department of State Capital Sharing Cost Sharing program that are not reviewed through SCIP.

Minor Appropriation Highlights

Minor Appropriation Highlights (Dollars in thousands)					
		2020			
	2019 Actual	Budget Estimate	Current Estimate	2021 Request	2020-2021 Inc./Dec.
Appropriation	$799,514	$398,800	$398,800	$400,000	$1,200
Budget Authority	$799,514	$398,800	$398,800	$400,000	$1,200
Appropriations Received	$799,514	$398,800	$398,800	$400,000	$1,200
Recoveries of Prior Year Obligations*	$79,604	$0	$0	$0	$0
Total Budgetary Resources	$879,118	$398,800	$398,800	$400,000	$1,200
Un-obligated Balance brought Forward*	$704,083	$534,947	$958,088	$665,356	($292,732)
Un-obligated Balance end of year	$958,088	$293,842	$665,356	$334,060	($331,296)
Obligations*	$713,183	$639,905	$691,532	$731,296	$39,764
Outlays	$499,567	$677,590	$728,650	$463,757	($264,893)

* Includes funds from expired budgetary resources

Minor Appropriation Highlights by Administration (Dollars in thousands)					
		2020			
	2019 Actual	Budget Estimate	Current Estimate	2021 Request	2020-2021 Inc./Dec.
Veterans Health Administration (VHA)					
Appropriation	$530,394	$237,775	$237,775	$243,995	$6,220
Appropriations Received	$530,394	$237,775	$237,775	$243,995	$6,220
Recoveries of Prior Year Obligations*	$40,675	$0	$0	$0	$0
Total Budgetary Resources	$571,069	$237,775	$237,775	$243,995	$6,220
Un-obligated Balance brought Forward*	$495,523	$315,890	$692,919	$455,694	($237,225)
Un-obligated Balance end of year	$692,919	$97,223	$455,694	$170,334	($285,360)
Obligations*	$492,673	$456,442	$475,000	$529,355	$54,355
Outlays	$378,707	$471,690	$522,399	$283,353	($239,046)
National Cemetery Administration (NCA)					
Appropriation	$190,174	$80,520	$80,520	$86,030	$5,510
Appropriations Received	$190,174	$80,520	$80,520	$86,030	$5,510
Recoveries of Prior Year Obligations*	$37,294	$0	$0	$0	$0
Total Budgetary Resources	$227,468	$80,520	$80,520	$86,030	$5,510
Un-obligated Balance brought Forward*	$62,718	$77,269	$105,060	$75,048	($30,012)
Un-obligated Balance end of year	$105,060	$51,989	$75,048	$55,137	($19,911)
Obligations*	$154,634	$105,800	$110,532	$105,941	($4,591)
Outlays	$77,960	$136,454	$136,805	$105,597	($31,208)
Veterans Benefits Administration (VBA)					
Appropriation	$43,020	$48,395	$48,395	$26,475	($21,920)
Appropriations Received	$43,020	$48,395	$48,395	$26,475	($21,920)
Recoveries of Prior Year Obligations*	$976	$0	$0	$0	$0
Total Budgetary Resources	$43,996	$48,395	$48,395	$26,475	($21,920)
Un-obligated Balance brought Forward*	$108,499	$103,519	$110,034	$97,429	($12,605)
Un-obligated Balance end of year	$110,034	$116,914	$97,429	$82,904	($14,525)
Obligations*	$42,575	$35,000	$61,000	$41,000	($20,000)
Outlays	$29,699	$39,667	$39,667	$41,228	$1,561
General Administration - Staff Offices					
Appropriation	$35,926	$32,110	$32,110	$43,500	$11,390
Appropriations Received	$35,926	$32,110	$32,110	$43,500	$11,390
Recoveries of Prior Year Obligations*	$659	$0	$0	$0	$0
Total Budgetary Resources	$36,585	$32,110	$32,110	$43,500	$11,390
Un-obligated Balance brought Forward*	$37,343	$38,269	$50,075	$37,185	($12,890)
Un-obligated Balance end of year	$50,075	$27,716	$37,185	$25,685	($11,500)
Obligations*	$23,301	$42,663	$45,000	$55,000	$10,000
Outlays	$13,201	$29,779	$29,779	$33,579	$3,800

* Includes funds from expired budgetary resources

Summary of Budget Request
(Dollars in thousands)

VA requests $400,000,000 in 2021 for Construction, Minor projects. A summary of the program funding level by activity follows:

	2021 Request ($000)
Veterans Health Administration	$243,995
National Cemetery Administration	$86,030
Veterans Benefits Administration	$26,475
Staff Offices & Office of Information Technology	$43,500
Total, Construction Minor Program	**$400,000**

Changes from Original 2019 Budget Estimates (dollars in thousands)			
	Budget Estimate	Current Estimate	Increase (+) Decrease (-)
Appropriation	$398,800	$398,800	$0
Budget Authority	$398,800	$398,800	$0
Appropriations Received	$398,800	$398,800	$0
Recoveries of Prior Year Obligations	$0	$0	$0
Total Budgetary Resources	$398,800	$398,800	$0
Un-obligated Balance brought Forward*	$534,947	$958,088	$423,141
Un-obligated Balance end of year	$293,842	$665,356	$371,514
Obligations*	$639,905	$691,532	$51,627
Outlays	$677,590	$728,650	$51,060

* Includes funds from expired budgetary resources

Veterans Health Administration
Minor Construction Projects

I. Budget Authority

2021 Request ($000)…….……...…….....	$243,995

II. Description/Justification of Program

The minor construction program is an integral component of VHA's overall construction program and permits VA to address space and functional changes to efficiently shift treatment of patients from hospital-based to outpatient care settings; realign critical services; improve management of space, including vacant and underutilized space; improve facility conditions; and other actions critical to SCIP implementation. VHA's 2020 request is based upon SCIP prioritization for construction projects that will address the most critical minor construction needs in the system by funding efforts, such as facilitating infrastructure rightsizing; enhancing women's health programs; constructing private inpatient beds; providing additional domiciliaries to further address Veterans' homelessness; improving access to healthcare, including providing additional parking structures where needed; improving safety; transforming community living centers to be more veteran-centric; enhancing patient privacy; and enhancing research capability. Additionally, $1.8 million is needed as VHA's prorated share of the Department of State's Capital Security Cost Sharing program for VHA's facilities in Manila.[1]

[1]The Secure Embassy Construction and Counterterrorism Act of 1999, Section 1000(a) (7) of Public Law 106-113, was amended to include the Capital Security Cost Sharing (CSCS) program. Agencies with personnel overseas that occupy space controlled by the Department of State (DoS) shall provide funding in advance for their share of costs for new construction. DoS is implementing a 14 year, $17.5 billion capital construction program to replace 150 Embassy and consulate compounds.

National Cemetery Administration
Minor Construction Projects

I. Budget Authority

2021 Request ($000) …….……..…….	$86,030

II. Description/Justification of Program

NCA's 2021 Minor Construction request is based upon SCIP prioritization for projects that will address the most critical minor construction needs. Funds requested in 2021 will provide for continued funding of gravesite expansion and columbaria projects to keep existing national cemeteries open and will support urban and rural initiatives. The minor request will also address infrastructure deficiencies and other requirements necessary to support National Cemetery operations including repair projects identified in the Facility Condition Assessment report and the Millennium Act study on improvements to Veterans' cemeteries. Projects for irrigation improvements, renovation and repair of buildings, and roadway repairs and drainage improvements are critical to serving Veterans and ensuring that the cemeteries are maintained as national shrines. Projects will also address administrative and management functions that support cemetery operations.

In addition, these funds may be used for any of the 156 national cemeteries, which includes 11 cemeteries being transferred from the Department of the Army, and 33 soldiers lots and monument sites under the jurisdiction of the National Cemetery Administration requiring emergency repairs because of floods, fires, hurricanes, tornadoes, earthquakes, strong winds, etc., where no other means of funding exist. Natural disasters or catastrophes are unforeseeable; however, repairs must be made to damaged facilities when they occur.

The 2021 Minor Construction request includes funding for land acquisition. NCA currently has the legal authority to acquire land for establishing new national cemeteries and to expand existing cemeteries. This will provide NCA funding to purchase land for future gravesite expansions that will be funded as minor projects. All land purchases will be evaluated through the SCIP process.

Veterans Benefits Administration
Minor Construction Projects

I. Budget Authority

2021 Request ($000)……...…….……..	$26,475

II. Description/Justification of Program

VBA's minor construction request in 2021 is based upon SCIP prioritization for projects that will address the most critical minor construction needs and includes funding to address an ongoing national need for relocations, realignments, tenant improvements, repair and alteration projects at regional office locations nationwide. Additionally, $2.2 million is needed as VBA's prorated share of the Department of State's Capital Security Cost Sharing program, for VBA's regional office in Manila.[1] These projects are critical to ensuring continued world-class service delivery of benefits to veterans and their families and to the well-being of our Federal employees.

[1]The Secure Embassy Construction and Counterterrorism Act of 1999, Section 1000(a) (7) of Public Law 106-113, was amended to include the Capital Security Cost Sharing (CSCS) program. Agencies with personnel overseas that occupy space controlled by the Department of State (DoS) shall provide funding in advance for their share of costs for new construction. DoS is implementing a 14 year, $17.5 billion capital construction program to replace 150 Embassy and consulate compounds.

General Administration/Office of Information Technology/ Staff Offices
Minor Construction Projects

I. Budget Authority

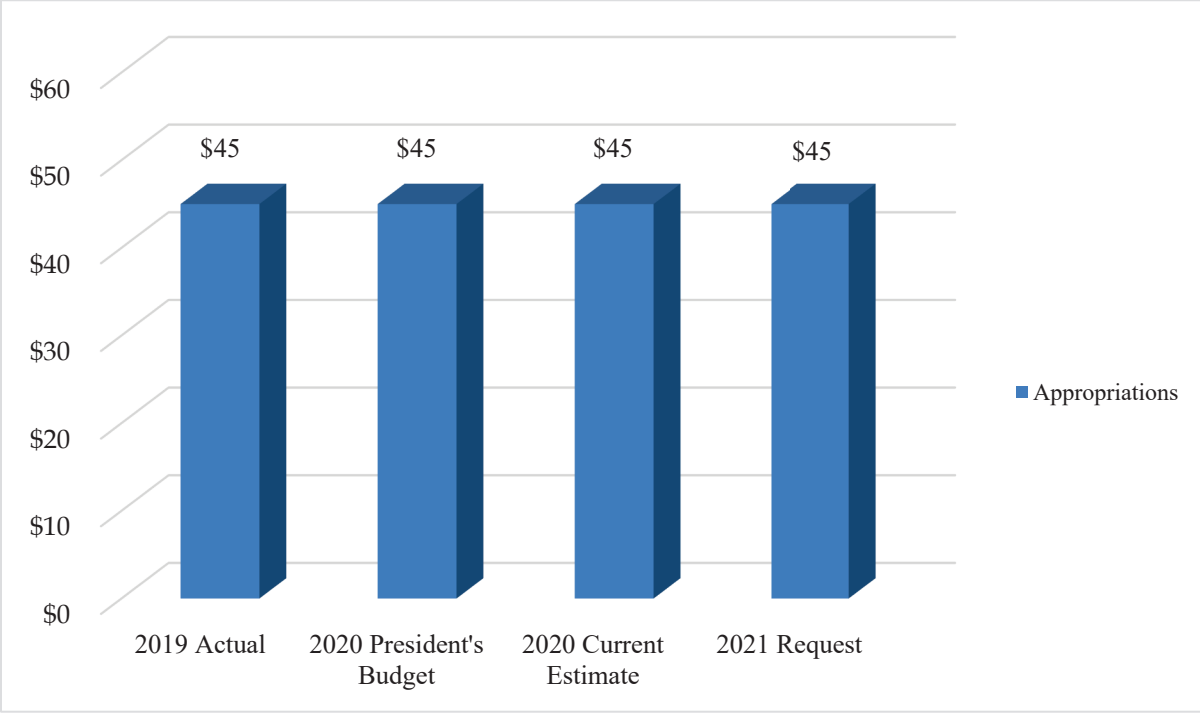
2021 Request ($000)……..…….…….……..	$43,500

II. Description/Justification of Program

Funds requested in 2021 will address the most critical minor construction needs. Funds are used to make enhancements to improve operations and provide an acceptable and operationally effective work environment for the Department's staff offices (including Office of Information & Technology), as well as to complete necessary modifications and upgrades to existing facilities to expand the Departments data capabilities. Offices contained within the Central Office buildings and other VA-occupied non-patient care buildings are also included in this program.

Grants for Construction of Veterans Cemeteries

Summary of Budget Authority – Grants for Construction of Veterans Cemeteries ($ in millions)



Appropriation Language

For grants to assist States and tribal organizations in establishing, expanding, or improving veterans cemeteries as authorized by section 2408 of title 38, United States Code, $45,000,000, to remain available until expended.

Program Description

Grants are provided to states and tribal organizations for the establishment, expansion, or improvement of state and tribal Veterans cemeteries. The state and tribal Veterans cemeteries complement the national cemeteries and are a critical part of the National Cemetery Administration (NCA) strategy for meeting the burial needs of Veterans and their families.

NCA is committed to providing access to first interment burial options (whether for casketed remains or cremated remains, either in-ground or in columbaria) in a national or state Veterans cemetery within 75 miles of the Veteran's place of residence. It is not feasible, however, for VA to build and operate national cemeteries in enough locations to provide every eligible Veteran with a burial option in a national cemetery within 75 miles of their residence. Increasing the availability of state and tribal Veterans cemeteries is a means to provide a burial option to those Veterans who may not have reasonable access to a national cemetery, particularly in rural locations, or who prefer to be interred on tribal lands.

In order to be considered for an establishment, expansion, or improvement grant of a state or tribal Veterans cemetery, a state or tribal organization must submit a preapplication via Grants.gov. All grant preapplications must be received by the Veterans Cemetery Grants Program (VCGP) no later than July 1st of the current fiscal year to be considered "actionable" for the upcoming fiscal year. Applications with complete paperwork, including legislation and 10 percent matching funds, are prioritized based on the following criteria.

- Priority Group 1: Expansion of an existing Veteran state or tribal cemetery that will deplete a burial option in less than 4 years;
- Priority Group 2: Establishment of a new Veteran state or tribal cemetery based on geographical area with the largest number of unserved Veterans;
- Priority Group 3: Expansion of an existing Veteran state or tribal cemetery that will deplete a burial option in more than 4 years; and
- Priority Group 4: Improvement of an existing cemetery to cemetery landscaping or infrastructure, such as building expansions and upgrades to roads and irrigation systems that are not directly related to the development of new gravesites. Operation and Maintenance projects are also included in this group.

The prioritized list of projects is approved by the Under Secretary for Memorial Affairs and released on NCA's webpage on October 1st of the new fiscal year. The states and tribal organizations slated to receive a grant opportunity are notified via UPS mailing.

Program Highlights

NCA continued the success of the program in 2019 by funding 16 grants for expansion, improvement or establishment of state and tribal Veterans cemeteries. This included the establishment of three new state and tribal Veterans cemeteries throughout the country, providing burial options to over 70,000 unserved Veterans and their eligible family members.

In 2019, 39,932 Veterans and eligible family members were buried in state or tribal Veterans cemeteries that are grant funded, comprising approximately 23 percent of the total annual interments in national, state and tribal cemeteries.

The VCGP also continued its major outreach campaign during 2019, with the Program Director and team visiting sites receiving 2019 grant funds to hold kickoff meetings and meet with state leadership.

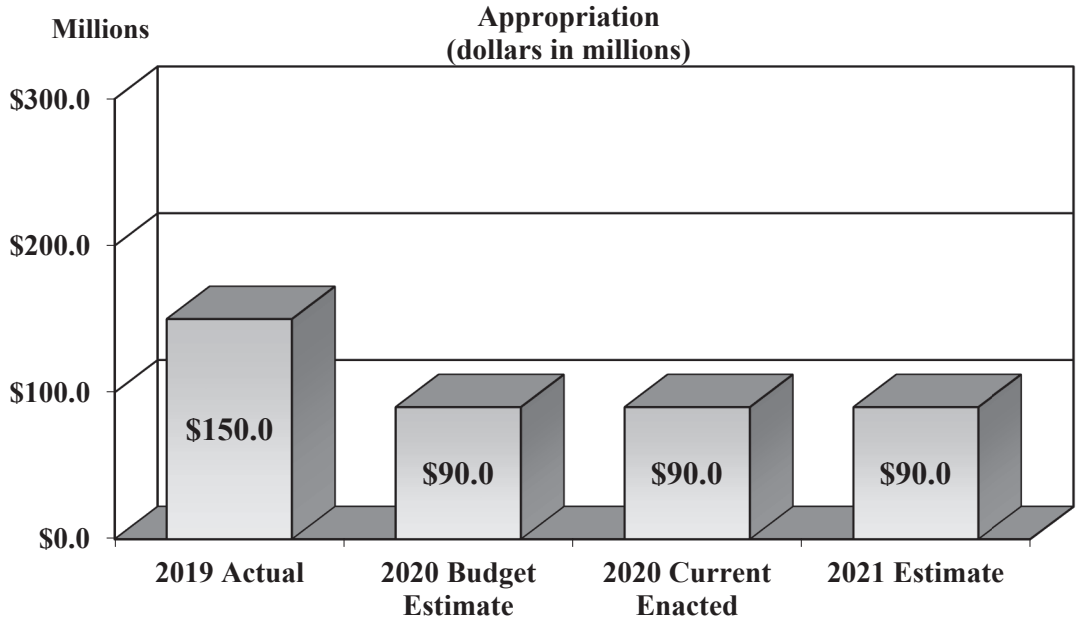
Appropriation Highlights (dollars in thousands)					
	2019 Actual	2020 President's Budget	2020 Current Estimate	2021 Request	Increase (+) Decrease (-)
Obligations	$45,008	$49,700	$50,643	$45,659	-$4,984
Unobligated balances:					
Start of year (-)	-4,170	-4,700	-6,302	-659	+5,643
Prior Year Recoveries (-)	-2,140	0	0	0	0
End of year	6,302	0	659	0	-659
Budget authority (appropriation)	**$45,000**	**$45,000**	**$45,000**	**$45,000**	**$0**

Summary of Budget Request

NCA requests $45 million to fund grants for Veterans cemeteries in 2021. Grants play a crucial role in achieving NCA's strategic target of providing 95 percent of Veterans with reasonable access to a burial option. Since 1980, the Veterans Cemetery Grants Program has awarded grants totaling almost $862 million for 115 Veterans cemeteries in 48 states and territories, including tribal trust lands, Puerto Rico, Guam, and the Commonwealth of the Northern Mariana Islands.

Total Obligations by State	
From program inception in 1980 to 30 Sep 2019	
($000)	
AK	1,083
AL	7,664
AR	24,379
AZ	26,879
CA	26,712
CO	6,007
CT	11,975
DE	21,365
GA	16,585
GU	9,267
HI	36,839
IA	8,545
ID	18,052
IL	235
IN	6,105
KS	19,503
KY	39,951
LA	36,558
MA	21,025
MD	52,348
ME	21,992
MN	27,686
MO	30,810
MP	5,261
MS	13,631
MT	12,435
NC	19,555
ND	8,639
NE	5,520
NH	9,731
NJ	40,537
NM	15,645
NV	31,240
OH	799
OK	1,802
PA	23
PR	7,135
RI	10,782
SC	8,272
SD	24,220
TN	31,417
TX	49,151
UT	5,369
VA	32,601
VT	6,555
WA	10,983
WI	21,723
WV	14,118
WY	3,084
TOTAL	861,793

Grants for Construction of State Extended Care Facilities



Appropriation Language

For grants to assist States to acquire or construct State nursing home and domiciliary facilities and to remodel, modify or alter nursing home and domiciliary facilities in State homes, for furnishing care to veterans as authorized by sections 8131 through 8137 of title 38, United States Code, $90,000,000, to remain available until expended.

Program Description

VA is requesting $90 million in 2021 funding for construction of State home facilities, for furnishing domiciliary or nursing home care to Veterans, and to expand, remodel or alter existing buildings for furnishing domiciliary or nursing home care to Veterans in State homes. VA is required by section 8135 of Title 38 to prioritize state grant applications, and its highest priority is to protect Veterans from those conditions that threaten the lives and safety of residents of an existing facility. State homes are owned and operated by the State.

VA conducts inspections, audits, and other oversight to ensure the State homes are providing quality care. States are required to fund at least 35 percent of a project's total estimated cost, and VA may fund up to 65 percent.

In 2020, the value of projects submitted and funded by States is expected to be $513.5 million at the end of the fiscal year, an increase from $250 million (or 105 percent) in 2019. The 2021 budget request, matched with State funding, will support essential life-safety renovation projects to ensure that quality care for Veterans will not be compromised. Remaining funds will be used to support new construction projects and non-life safety renovation projects.

Appropriation Highlights
(dollars in thousands)

Description	2019 Actual	2020 Budget Estimate	2020 Current Estimate	2021 Estimate	2020 to 2021 Inc/Dec
Appropriation	$150,000	$90,000	$90,000	$90,000	$0
Adjustments to Obligations:					
Unobligated Balance (SOY)	$458,522	$112,500	$159,195	$0	($159,195)
Unobligated Balance (EOY)	($159,195)	($67,500)	$0	$0	$0
Change in Unobligated Balance	($299,327)	($45,000)	($159,195)	$0	$159,195
Obligations	$502,446	$332,640	$249,195	$90,000	($159,195)

In 2019, the program offered 34 grants to States. Of the 34 grants awarded, 12 were final awards, 22 were conditional awards. To receive a final grant award, States must complete the entire grant application by June 30th of the fiscal year. If States cannot complete a final grant award, they may apply for a conditional grant award by completing part of the grant application.

Legislative History

This program was approved on August 19, 1964, and received appropriations in 1965. Public Law (P.L.) 95-62, dated July 5, 1977, authorized the VA to participate in the construction of new domiciliary as well as new nursing homes, and for sums appropriated to remain available until expended. The Veterans' Health Care Act of 1984 (P.L. 98-528, dated October 19, 1984) amended section 8132 to allow States to purchase facilities to be used as State nursing homes and domiciliary. The Veterans' Benefits Improvement and Health Care Authorization Act of 1986 (P.L. 99-576, dated October 28, 1986) amended section 8135 of title 38 to eliminate a limitation that prohibited any State from receiving in any fiscal year more than one-third of the amount appropriated in that fiscal year and required a priority list to be established on July 1 of each year. The Veterans' Benefits and Services Act of 1988 (P.L. 100-322, dated May 20, 1988) further amended section 8135 of

title 38 to change the date for compiling a priority list of grantees from July 1 to August 15. Construction grants are to be made from that list for the fiscal year beginning October 1.

The Veterans' Benefits and Services Act of 1988 also permitted VA to approve and award State home grants on a conditional basis and obligate funds for these awards. This law authorized VA to increase a conditionally-approved grant amount if: (1) the estimated cost on which VA based the conditional approval increases; and (2) VA conditionally approved the grant before the State awarded a construction or acquisition contract for the project. The final grant award increase would be limited to 10 percent of the original obligation.

The Veterans Health Care Act of 1992 (P.L. 102-585, dated November 4, 1992) granted permanent authority for this program and extended – from 90 days to 180 days, the period within which a State must complete the application for a State home grant after receiving a conditional award. The Veterans' Health Care Eligibility Reform Act of 1996 (P.L. 104-262, dated October 9, 1996) added Adult Day Health Care as another type of care that may be provided by State homes.

Under current law, a grant may not exceed 65 percent of the total cost of the project. The Veteran's Millennium Health Care and Benefits Act of 1999 (P.L. 106-117, dated November 30, 1999) provided greater specificity in directing VA to prescribe regulations for the number of beds for which grant assistance may be furnished. The following changes were enacted:

- Requires VA to establish criteria for determining the relative need for additional beds on the part of a State which already has such State home beds;

- Strengthens the requirements governing award of a grant;

- Revises provisions governing the relative priority of each application (among those projects for which States have made their funding available in advance);

- Differentiates among applications for new bed construction by reference to the relative need for such beds, by assigning a higher priority to renovation projects (with a total cost exceeding $400,000), with highest priority to renovations involving patient life or safety and by assigning second highest priority to an application from a State that has not previously applied for award of a VA construction grant or a grant for a State nursing home; and

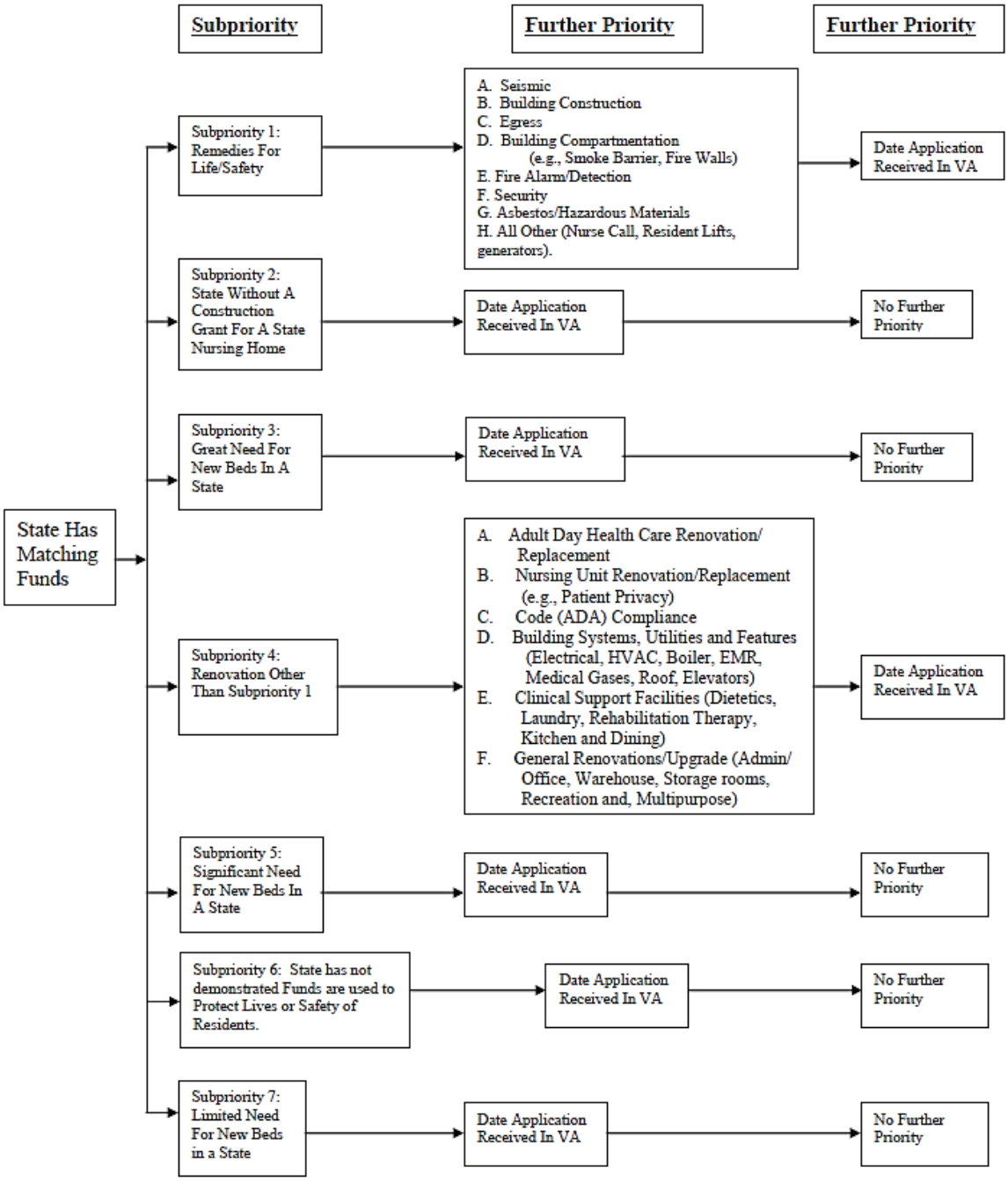
- Establishes a "transition" rule providing that current regulations and provisions governing applications for State home grants would continue in effect with respect to applications for a limited number of projects. Those "grandfathered" projects are limited to those projects on the list of approved projects, established by the Secretary on October 29, 1998, for which the State had made sufficient funds available and those priority one projects on VA's 2000 list, approved by the Secretary on November 3, 1999, submitted by States which had not received 1999 grant monies and are not included in the October 29th list. All of the

"grandfathered" projects received grants and are no longer included in the priority list.

Project Prioritization

Currently, priority one projects are those with State matching funds set aside for the project. Within priority one, there are seven subpriority classifications. The following diagram illustrates the seven subpriority classifications and provides additional information on the methodology used to prioritize grants for the construction of State home facilities.

Prioritization for Priority Group 1



Page Intentionally Left Blank.

VA Lease Notifications, Major Medical Facility Project & Lease Authorizations

Introductory Statement
This chapter fulfills several statutory requirements for notifications and authorization requests regarding major medical facility construction and leasing projects and non-medical leasing projects, and confirms two additional declaration requirements. Requirements are listed below.

- Statutory authorization for all major medical facility construction projects and all major medical facility leases exceeding $1,000,000 (including parking facilities) prior to appropriation of funds (Title 38, U.S.C., section 8104(a)(2).)
    - VA considers a "new lease of real property" as one that pertains to real property that VA has never before leased, as well as succeeding or follow-up leases that have expired or will soon expire. Lease extensions, expansions, renewals, or other leases with pre-negotiated options are not considered new leases within the meaning of Public Law 112-74.
    - VA is not required to request Congressional authorization for leases of non-major medical facility space.
    - Delegation of authority to award and obligate leases must be obtained from GSA (see below for more detail).
- Notification and submittal of a prospectus for all major medical facility construction projects and for all major medical facility leases exceeding the $1,000,000 threshold (Title 38, U.S.C., section 8104(b)).
- Status report for authorized major medical facility projects and leases (Title 38. U.S.C.)
- Report to Congressional Committees on proposed obligations in excess of $500,000 from the Advance Planning Fund of the Department toward design or development of a major medical facility project 30 days prior to the obligation (Title 38, U.S.C., section 8104(f)); projects that receive authorization are not subject to this requirement.

Page Intentionally Left Blank.

Authorization Request and Notification

The Department of Veterans Affairs requests an authorization of $2,314,600,000 for 7 major medical facility projects and $274,920,000 for thirteen major medical facility leases. Projects and leases for which authorization is being requested and notification is provided in 2021 are shown in the chart below. Prospectuses for the 2021 VHA operating leases with an annual unserviced rent that exceeds $1,000,000 can be found beginning on page 6-7. At the time this Budget was formally released, authorization was still pending for the 7 major facility projects, listed in the last section of the table below that were included in the 2020 Budget and Authorization request. Alameda, Livermore, and San Diego requested authorization in 2020, but are also included in the 2021 authorization request.

Authorization Request and Notification			
	Location[1]	**Project Name – Short Description**	**Authorization Request ($000)**
2021 Major Medical Facility Projects Authorization Request			
1	Alameda, CA[2]	Community Based Outpatient Clinic & National Cemetery	$310,500
2	American, Lake, WA[2]	Construction of New Specialty Care Building 201	$110,600
3	Canandaigua, NY[2]	Construction and Renovation	$443,900
4	Dallas, TX[2]	Spinal Cord Injury	$265,600
5	Livermore, CA[2]	Realignment and Closure of the Livermore Campus	$505,000
6	Long Beach, CA[2]	Mental Health and Community Living Center	$367,300
7	San Diego, CA[2]	SCI & Seismic Bldg 11	$311,700
		Total, 2021 Major Project Authorization Request	**$2,314,600**
2021 Major Medical Facility Lease Authorization Request and Notification			
1	Atlanta, GA	VHA Member Services	$14,146
2	Baltimore, MD	Outpatient Clinic Lease	$26,005
3	Baton Rouge, LA	Outpatient Clinic Lease	$18,923
4	Beaufort, SC	Outpatient Clinic Lease	$12,667
5	Beaumont, TX	Outpatient Clinic Lease	$9,851
6	Columbia, MO	Research Lease	$14,889
7	Hampton, VA	Outpatient Clinic Lease	$45,958
8	Jacksonville, NC	Outpatient Clinic Lease	$31,334
9	Lawrence, IN	Outpatient Clinic Lease	$9,126
10	Nashville, TN	Outpatient Clinic Lease	$34,205
11	Plano, TX	Outpatient Clinic Lease	$21,172
12	Prince George's County, MD	Outpatient Clinic Lease	$18,159
13	Salt Lake City, UT	Outpatient Clinic Lease	$18,485
		Total, 2021 Major Lease Authorization Request	**$274,920**
2020 Major Medical Facility Projects Authorization Request			
1	Alameda, CA	Community Based Outpatient Clinic & National Cemetery	In 2021 Request
2	Livermore, CA[-]	Realignment and Closure of Livermore Campus	In 2021 Request
3	Louisville, KY	New Medical Facility	$860,000
4	Manhattan, NY	Medical Center – Flood Recovery	$372,600
5	San Diego, CA	SCI and Seismic Corrections	In 2021 Request
6	San Juan, PR	Seismic Corrections – Building 1	$307,000
7	West Los Angeles, CA[-]	Build New Critical Care Center	$75,790

[1]Location for Major Leases is the vicinity in which the final chosen location is expected.

[2]Prospectus for this project can be found in Chapter 2 of this volume.

Notification of Intent to Obligate Over $500,000 in Advance Planning and Design Funds
As required by title 38, U.S.C., section 8104(f), VA may not obligate funds in an amount in excess of $500,000 from the Advance Planning and Design Fund (APDF) of the Department toward design or development of a major medical facility project unless the Secretary submits to the Congressional Committees a report on the proposed obligation 30 days prior to obligation. Projects that receive authorization are not subject to this requirement. In accordance with this requirement the Department provides notification for the following seven major medical facility projects:

Major Projects with Planned ADPF Obligations Over $500,000	
Location	**Description**
Charleston, SC	Charleston Bed Tower Replacement
Dallas, TX	Construct Clinical Expansion for Mental Health
El Paso, TX	Construct New Health Care Center
Gainesville, FL	Correct Non-Compliant Surgical, Emergency, Pharmacy and Sterile Process
Tampa, FL	Construct and Renovate SCI and Polytrauma Transitional Rehab Program Beds Bldg 38
Tampa, FL	Expand VAMC Primary Care
West Haven, CT	Construct New Surgical and Clinical Space Tower, Demolish Bldgs 7, 8, 8.5 and 9

General Services Administration Delegation of Authority
Once VA receives authorization from Congress for the major medical leases, VA will also need to request delegation of leasing authority from the General Services Administration (GSA) in order to solicit, award, and obligate these leases. This request mirrors delegation requests for hundreds of smaller VA leases and involves a thorough review by GSA. VA and GSA have worked closely together to establish the requirements and streamline the request and review process in order to comply with delegation requirements. Leases that exceed GSA's current prospectus threshold of $3.095 million (subject to annual updates) will require VA to work with GSA's committees and obtain their approval. GSA and VA work closely to ensure that GSA's requirements are met. GSA, solely, will consider each request individually and make determination to grant delegated leasing authority as determined appropriate by the Administrator of GSA.

There are eight non-medical facility replacement leases over $1,000,000 for 2021. GSA will execute these leases and VA will enter into an occupancy agreement with GSA.

Major Non-Medical Lease		
Location	**Project Name – Short Description**	**Total Estimated Cost ($000)**
Buffalo, NY	Renew Lease at Buffalo Regional Office	$2,800
New York, NY	Renew Lease at New York Regional Office	$5,703
Muskogee, OK	Renew Lease at Muskogee Regional Office	$2,195
Portland, OR	Renew Lease at Portland Regional Office	$3,360
Philadelphia, PA	Renew Lease at Philadelphia Regional Office	$8,057
Philadelphia, PA	Renew Lease at Philadelphia ITC	$1,911
Washington, DC	Lease Renewal – 1717 H St. NW	$2,055
Washington, DC	Replacement Lease – 1575 I St. NW	$2,142

Reporting Requirements
The Status Reports for Authorized Major Medical Facility Projects and Leases can be found on pages 6-85 through 6-90.

Declarations
All VA facilities, including sites, are intended to be barrier free. Due to patient care requirements, at some locations VA accessibility standards exceed the GSA minimum requirements.

All projects comply with the requirements of the Coastal Barrier Resources Act (Public Law 97-348).

Allow Transfers to/from VA Capital Accounts in Support of Joint Medical Facilities
The Budget also includes a legislative proposal to allow VA to plan, design, construct, or lease shared medical facilities with the Department of Defense (DoD) with the goal of improving the access, quality and cost effectiveness of the health care provided by the Department and DoD to their beneficiaries. The enactment of this proposal would allow the Department to transfer and/or receive funds (major and minor construction) to/from DoD for use in the planning, design, and/or construction of a shared medical facility. It would also allow the transfer (from the medical facility appropriation) or receiving of funds to/from DoD for the purpose of leasing space for a shared medical facility, after section 8104 authorization requirements have been met.

Page Intentionally Left Blank.

VHA Administrative Lease
to Support Member Services

This proposal provides for a replacement administrative lease for VHA Member Services in the vicinity of Atlanta, GA.

I. Budget Authority

Lease Authorization	2021 Request	2021 Authorization Request	Unserviced Annual Rent
Up to 20 years	$14,146,000	$14,146,000	$2,647,000

II. Priority Score: N/A – This project was not scored as the need for this renewal was not known during the normal SCIP cycle.

III. Description of Project:
This project proposes to lease approximately 76,657 net usable square feet (NUSF) of general office space in the vicinity of Atlanta, GA, including approximately 350 parking spaces, to replace the existing VHA Member Services lease. This lease would house all Atlanta-area VHA Member Services functions in a single, right-sized, and efficient facility. The current lease houses 165 employees for VHA Member Services, which operates the Income Verification Division, Enrollment and Eligibility Division, Enterprise Support Services, and the Veterans Transportation Program, and also includes Resource Management Support Staff and the National Mailroom, which transposes over 2 million formal communications to Veterans every year. In addition to these Member Services functions, the current lease also supports 24/7 operations for the Veterans Crisis Line and Military Crisis line by providing space and infrastructure for an additional 370 employees. This lease is essential as the workload for VHA Member Services continues to grow.

IV. Alternatives Considered:
Status Quo
The Status Quo alternative would continue to occupy the existing lease space. However, this alternative is not currently viable as the current lease will expire in March 2020. For this reason, the Status Quo alternative is not preferred.

Alternative 1 - New Lease (Preferred Alternative)
This alternative proposes to lease 76,657 NUSF of office space, including approximately 350 parking spaces, in the vicinity of Atlanta, GA, to house VHA Member Services, the Veterans Crisis Line, and Military Crisis Line staff. The current lease will expire in March 2020. For this reason, this is the preferred alternative.

Alternative 2 - New Construction
This alternative proposes for VA to acquire land and construct a new 103,487 gross square foot (GSF) (equivalent to 76,657 NUSF) general office facility to house VHA Member Services, with 350 parking spaces, in the Atlanta area. The new construction alternative would address the need for space to house the staff and functions in the same manner as the lease alternative. However, the new construction alternative would require a longer timeline

to implement than a new lease and the current lease will expire in March 2020, which may result in a potential lapse of VHA Member Services, as well as Veterans Crisis Line and Military Crisis Line functions. Therefore, this alternative is not preferred.

Alternative 3 - Renovation

This alternative proposes to renovate a vacant or underutilized VA-owned facility to house VHA Member Services, the Veterans Crisis Line, and Military Crisis Line staff in the vicinity of Atlanta, GA. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed lease with a floor plan able to accommodate the requirements proposed in this project. Local VA planners have confirmed that there are no existing VA-owned facilities available that are suitable for renovation and fit the project requirements. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 4 - Contract Out

This alternative assumes that all VHA Member Services, Veterans Crisis Line and Military Crisis Line functions proposed in this project would be contracted out to the private sector. Due to the inherently governmental functions of VHA Member Services and the Crisis Lines, the Contract Out alternative is not a viable option and has been excluded from the quantitative analysis below.

Alternative 5 - Acquisition of an Existing Facility through Purchase

This alternative proposes to purchase an existing facility, in the local community that is suitable for renovation and able to accommodate all project requirements in the same manner as the lease alternative. However, high-level market research and interviews with local VA planners have indicated that a suitable facility for possible acquisition and subsequent renovation does not exist in the delineated area of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6 - Collaboration with DoD for a Joint Lease Project

This alternative proposes to lease a new shared facility, with the Department of Defense (DoD) as a sub-lessee. However, according to local VA planners, there are currently no DoD facility sharing opportunities in the vicinity of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquistion[1]	Ancillary Services[2]	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE	Net Present Value
Status Quo	$0	$1,125,723	$0	$1,125,723	535	N/A	N/A
Lease	$21,926	$1,170,351	$9,216	$1,201,493	535	0	$(75,770)
New Construction	$116,054	$1,138,880	$9,216	$1,264,150	535	0	$(97,353)
Renovation	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Contract Out	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

[1]This is the total estimated cost for construction/renovation projects or medical and other related alterations (lump sum payment) for leases, in discounted dollars.
[2]This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template).

VI. Analysis of Benefits

The preferred alternative, New Lease, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo results housing the VHA Member Services and Crisis Lines staff in an expired leasehold which creates risk for a mission critical VHA service; New Construction would result in a longer timeline to meet the needs of the lease; Renovation, Contract Out, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. Relative to the New Construction alternative, the New Lease alternative, with total life cycle costs of approximately $1.2 billion and a net present value of approximately -$75.8 million, would offer the most cost-effective and flexible alternative to ensure these important administrative functions have a single, right-sized, and efficient facility to fully support Veterans and VA.

The proposed lease aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
   - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner
2. Excellent Customer Service and Highly Reliable and Integrated Care
   - VA ensures at-risk and underserved Veterans receive what they need to eliminate Veteran suicide, homelessness, and poverty
3. Improved Trust, Accountability, and Transparency
   - VA is always transparent to enhance Veterans' choices, to maintain trust, and to be openly accountable for its actions
   - VA holds its personnel and external service providers accountable for delivering excellent customer service and experiences while eliminating fraud, waste, and abuse

VII. Demographic Data*

	2017	2022	2027	2037	Change 2017-2037
Veteran Population	19,234,038	17,324,535	15,655,533	12,973,628	-32.5%
Enrollees	8,770,933	8,981,112	8,913,617	8,278,522	-5.6%

*Data reflects Veteran population and enrollees for all VISNs as VHA Member Services supports the entire healthcare system.

VIII. Workload*

	2015	2016	2017	2018	Change 2015-2018
Eligibility and Enrollment Transactions	319,753	343,274	399,312	425,128	+32.95%
Income Verification Cases Adjudicated	139,999	129,443	192,505	186,744	+33.39%

IX. Schedule

Award Lease	24 months after authorization
Complete Construction	26 months after lease award
Activation/Occupancy	4 months after construction

X. Project Cost Summary of the Chosen Option

Estimated Annual Rent	$2,647,000
Estimated Rental Rate[1]	$34.53/NUSF
Proposed Lease Authority	Up to 20 years
Net Usable Square Feet	76,657
Parking Spaces	350
Scoring[2]	Operating Lease
Medical and Other Related Alterations (Lump Sum Payment)[3]	$11,499,000

[1]This estimate may be escalated by 2.0 percent annually to the effective date of the lease to account for inflation. The proposed rental rate is unserviced (taxes, insurance, management, and maintenance and repair reserves included); however, the lease contract may include operating expenses paid by the lessor. VA will conduct a competitive procurement and negotiate with offerors to ensure that lease award is made in the best interest of the Government.

[2]Scoring detail provided in supplemental materials.

[3]Represents an estimated lump sum payment to the lessor for the purchase and installation of build-out requirements not included in the annual rent. Actual lump sum amount may vary based on offers received.

XI. Additional GSA Information

Lease Type:	Replacement
Current NUSF:	76,657
Proposed NUSF[1]:	76,657 (Approx. 91,988 ABOA SF)
Expansion/Reduction NUSF:	0
Current NUSF/Person:	Not applicable, clinical support space
Proposed NUSF/Person:	Not applicable, clinical support space
Proposed Maximum Lease Term:	20 Years
Expiration Dates of Current Leases[2]:	76,657 NUSF – 3/31/2020

Delineated Area:

- North: Interstate 285, Route 141
- East: Jimmy Carter Blvd, Mountain Industrial Blvd
- South: Memorial Dr, N Avondale Rd, E College Ave, W College Ave, E Lake Rd NE, Route 78
- West: Interstate 85, Interstate 75

Number of Official Parking Spaces[3]:	350
Scoring:	86.73%
Proposed Rental Rate:	$34.53
Proposed Total Annual Cost:	$2,647,000
Current Total Annual Cost:	$1,564,236

[1]As VA continues the modernization of its leasing program, the intent is for all acquisitions utilizing the Request for Lease Proposals (RLP) method to use a square footage metric better aligned with industry standards. The ABOA SF estimate will be finalized during pre-design.
[2]VA will coordinate with GSA to execute such interim leasing actions as are necessary to ensure continued housing of VA services prior to the effective date of the new lease.
[3]VA may pursue structured parking, instead of surface parking, during lease execution depending on land parcel availability.

VA routinely evaluates and revises its leasing process to ensure it is grounded in private-sector real estate best practices for healthcare delivery and supporting administrative space, responsive to the emerging demands of the Veteran population, and fully aligned with federal budget processes. VA also works closely with the General Services Administration to ensure it has the latest government-wide guidance, tools, and procedures in place.

Additionally, VA may expand the delineated area for this project, keeping in mind speed to market, project costs and potential existing inventory as well as Veteran demographics and maintaining sufficient competition.

Page Intentionally Left Blank.

Outpatient Clinic Lease
in Support of the Veterans Affairs Maryland Health Care System

This proposal provides for a replacement Outpatient Clinic lease in the vicinity of Baltimore, MD, to expand services currently offered at the existing Baltimore Annex, in support of the Veterans Affairs Maryland Health Care System in Baltimore, MD.

I. Budget Authority

Lease Authorization	2021 Request	2021 Authorization Request	Unserviced Annual Rent
Up to 20 years	$26,005,000	$26,005,000	$6,858,000

II. Priority Score: FY 2020 – 0.2369

III. Description of Project:
This project proposes to lease an approximately 112,624 net usable square foot (NUSF) replacement Outpatient Clinic in the vicinity of Baltimore, MD, including 800 parking spaces. The new facility would expand on care currently provided at the existing Baltimore Annex lease and allow for a decompression of the Baltimore VA Medical Center (VAMC). The lease would allow VA to enhance outpatient services by closing space gaps identified in the Strategic Capital Investment Planning (SCIP) process. The new lease would expand the current Primary Care space, allowing for the full implementation of the Patient Aligned Care Team (PACT) model of care delivery, improving operational efficiencies and the Veteran experience. The lease would also consolidate five parking leases in the Baltimore area into the full parking requirement for this lease. The newly leased right-sized, state-of-the-art, energy-efficient health care facility would provide Primary Care, Mental Health, Specialty Care, and Ancillary services to Veterans in the Baltimore area.

IV. Alternatives to Lease Considered:
Status Quo
The Status Quo would continue to provide Primary Care, Mental Health, certain Specialty Care, and Ancillary services to Veterans at the existing Baltimore Annex lease. The existing facility does not have an adequate amount of available, suitable space to properly implement the PACT model of care delivery, hindering the optimized delivery of modern healthcare at the facility. Continuing to provide healthcare services in a non-PACT setting would not improve operational efficiencies. The Status Quo alternative also does not close the space gaps identified in the SCIP process. For these reasons, the status quo alternative is not preferred.

Alternative 1 - New Lease (Preferred Alternative)
This alternative proposes to lease an approximately 112,624 NUSF replacement Outpatient Clinic in the vicinity of Baltimore, MD, including 800 parking spaces. The lease would replace the existing Baltimore Annex lease to accommodate increasing workload, and to allow for decompression at the medical center, increasing operational efficiencies. The lease would also consolidate five parking leases in the Baltimore area into the full parking requirement for this lease, improving Veteran and VA staff satisfaction. Fully implementing

PACT model standards would allow optimized care delivery, increased team coordination, and improved workflows for both Veterans and VA staff. The new lease would provide care in a modern, efficient facility, with increased operational efficiencies and sufficient space for outpatient services to addresses the current and projected space gaps identified in the SCIP process. In addition, the lease would provide VA with flexibility should Veterans' demand for outpatient services or Veteran demographics shift in the future. For these reasons, this is the preferred alternative.

Alternative 2 - New Construction

This alternative proposes for VA to acquire land and construct a new, approximately 152,042 gross square foot (GSF) (equivalent to approximately 112,624 NUSF) Outpatient Clinic in the vicinity of Baltimore, MD, including 800 parking spaces. The New Construction alternative would address space gaps in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran demographics. In addition, new construction would require a longer implementation timeline for this project. Therefore, this is not the preferred alternative.

Alternative 3 - Renovation

This alternative proposes to renovate a vacant or underutilized VA-owned facility for use as an outpatient clinic. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed lease with a floor plan able to accommodate the requirements proposed in this project. In addition, as part of the SCIP process, VA identified an overall space gap (deficit) for this market that would not be resolved through renovating space. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 4 - Contract Out

This alternative assumes that all Primary Care, Mental Health, Specialty Care, and Ancillary services proposed in this project would be contracted out to fee-basis providers in the Baltimore area. There may not be sufficient, qualified private health care providers in the Baltimore area to absorb the current and projected Veteran workload. In addition, this alternative may be more costly and could result in a loss of quality and control over Veteran health care. Therefore, this alternative is not optimal and is the least preferred.

Alternative 5 - Acquisition of an Existing Facility through Purchase

This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and able to accommodate all project requirements in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran demographics. High-level market research and interviews with local VA planners have indicated that a suitable facility for purchase and subsequent renovation does not exist in the delineated market area of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6 - Collaboration with DoD for a Joint Lease Project

This alternative proposes to lease a new shared facility with the Department of Defense (DoD) as a sub-lessee. This alternative would address all project requirement in the same manner as the lease alternative. VA Maryland Health Care System currently operates an outpatient clinic in proximity to the nearest DoD clinical location at Fort Meade, MD, which is approximately 18 miles away. However, according to local VA planners and VHA's Office of Interagency Health Affairs – Office of VA-DoD Coordination, there are currently no additional DoD facility sharing opportunities for the proposed project in the local community. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquistion[1]	Ancillary Services[2]	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE	Net Present Value
Status Quo	$10,310	$1,896,219	$0	$1,906,529	174	N/A	N/A
Lease	$36,508	$2,019,999	$19,189	$2,075,696	271	97	$(169,167)
New Construction	$232,866	1,897,510	$19,189	$2,149,566	271	97	$(166,572)
Renovation	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Contract Out	$29,304	$2,301,611	$0	$2,330,915	23	(151)	$(424,386)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

[1]This is the total estimated cost for construction/renovation projects or medical and other related alterations (lump sum payment) for leases, in discounted dollars.

[2]This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template).

VI. Analysis of Benefits

The preferred alternative, New Lease, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo does not address any of the existing gaps; New Construction would result in a longer timeline to meet the demand within this lease; Contract Out could result in a loss of quality and control over Veteran health care; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. The New Lease alternative, with total life cycle costs of approximately $2.08 billion and a net present value of approximately -$169.2 million, would offer the most flexible alternative, and would fully support VA's strategic goals and objectives and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable, accessible care to Veterans.

The proposed lease would allow the Department to open a new facility in a timely and efficient manner and provide Veterans in the Baltimore area better access to high-quality, reliable health care. A new lease would also provide the Department future flexibility. Based on changes in Veteran demographics, workload patterns, and emergent health care delivery practices, a flexible lease alternative would allow VA to scale real property assets to adapt to changes without committing the Department to long-term obligations.

The current Mental Health, Primary Care, Specialty Care, and Ancillary spaces at the Baltimore Annex Lease are inadequate and undersized for the current and projected Veteran workload demand for services. Further, inadequacy of the current space does not allow for

the full implementation of the PACT model. This project addresses space gaps and would enhance Veteran health care services in the Baltimore market. As workload for Ambulatory Services and Procedures and Mental Health Services is projected to increase over the next 20 years, this project is essential to ensure that Veterans are able to access these services in a timely manner. Being housed in a right-sized, PACT-designed, and more accessible facility, with all parking consolidated in one location, would allow better optimized VA care delivery, improved Veteran satisfaction, increased team coordination, improved workflows, and improved recruitment and retention for VA staff.

The proposed lease aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
   - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner
2. Excellent Customer Service and Highly Reliable and Integrated Care
   - VA has collaborative, high-performing and integrated delivery networks that enhance Veteran well-being and independence
3. Transform Business Operations
   - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change 2017-2037
Veteran Population	204,494	180,726	159,882	126,346	-38.2%
Enrollees	80,328	81,147	79,752	72,839	-9.3%

*Data reflects the VISN 5, Baltimore market.

VIII. Workload*

	2017	2022	2027	2037	Change 2017-2037
Ambulatory Services	716,406	865,565	972,346	1,054,775	47.2%
Ambulatory Procedures	37,977	49,001	56,284	62,933	65.7%
Mental Health Stops	74,711	98,699	88,666	72,631	-2.8%
Mental Health Services	164,433	201,364	227,580	265,269	61.3%

*Data reflects workload for the VISN 5, Baltimore market, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule*

Award Lease	24 months after authorization
Complete Construction	32 months after lease award
Activation/Occupancy	4 months after construction

*For leases with an annual unserviced rent exceeding the GSA prospectus threshold (currently $3.095M), the schedule above is dependent on passage of a Transportation and Infrastructure committee resolution.

X. Project Cost Summary of the Chosen Option

Estimated Annual Rent	$6,858,000
Estimated Rental Rate[1]	$60.89/NUSF
Proposed Lease Authority	Up to 20 years
Net Usable Square Feet	112,624
Parking Spaces	800
Scoring[2]	Operating Lease
Medical and Other Related Alterations (Lump Sum Payment)[3]	$19,147,000

[1]This estimate may be escalated by 2.0 percent annually to the effective date of the lease to account for inflation. The proposed rental rate is unserviced (taxes, insurance, management, and maintenance and repair reserves included); however, the lease contract may include operating expenses paid by the lessor. VA will conduct a competitive procurement and negotiate with offerors to ensure that lease award is made in the best interest of the Government.
[2]Scoring detail provided in supplemental materials.
[3]Represents an estimated lump sum payment to the lessor for the purchase and installation of build-out requirements not included in the annual rent. Actual lump sum amount may vary based on offers received.

XI. Additional GSA Information

Lease Type:	Replacement
Current NUSF:	68,121
Proposed NUSF[1]:	112,624 (Approx. 135,149 ABOA SF)
Expansion/Reduction NUSF:	44,503
Current NUSF/Person:	Not applicable, clinical space
Proposed NUSF/Person:	Not applicable, clinical space
Proposed Maximum Lease Term:	20 Years
Expiration Dates of Current Leases[2]:	68,121 NUSF – 6/8/2021

Delineated Area:

- North: Intersection Interstate 695 & Route 40, Route 40, Hilton Pkwy, Bypass 40, Belair Rd
- East: Bypass 40, Interstate 895
- South: Interstate 95
- West: Interstate 695

Number of Official Parking Spaces[3]:	800
Scoring:	87.58%
Proposed Rental Rate:	$60.89
Proposed Total Annual Cost:	$6,858,000
Current Total Annual Cost:	$1,802,189

[1]As VA continues the modernization of its leasing program, the intent is for all acquisitions utilizing the Request for Lease Proposals (RLP) method to use a square footage metric better aligned with industry standards. The ABOA SF estimate will be finalized during pre-design.
[2]VA will coordinate with GSA to execute such interim leasing actions as are necessary to ensure continued housing of VA services prior to the effective date of the new lease.
[3]VA may pursue structured parking, instead of surface parking, during lease execution depending on land parcel availability.

VA routinely evaluates and revises its leasing process to ensure it is grounded in private-sector real estate best practices for healthcare delivery, responsive to the emerging demands of the Veteran population, and fully aligned with federal budget processes. VA also works closely with the General Services Administration to ensure it has the latest government- wide guidance, tools, and procedures in place.

Additionally, VA may change the delineated area for this project, keeping in mind speed to market, project costs and potential existing inventory as well as Veteran demographics and maintaining sufficient competition.

Outpatient Clinic Lease
in Support of the Southeast Louisiana Veterans Health Care System

This proposal provides for a replacement Outpatient Clinic lease in the vicinity of Baton Rouge, LA, to consolidate and expand services currently offered at existing Community Based Outpatient Clinics (CBOCs) in support of the Southeast Louisiana Veterans Health Care System in New Orleans, LA.

I. Budget Authority

Lease Authorization	2021 Request	2021 Authorization Request	Unserviced Annual Rent
Up to 20 years	$18,923,000	$18,923,000	$3,983,000

II. Priority Score: FY 2019 – 0.3499

III. Description of Project:
This project proposes to lease an approximately 87,878 net usable square foot (NUSF) replacement Outpatient Clinic in the vicinity of Baton Rouge, LA, including 600 parking spaces. The new facility would consolidate and expand on care currently provided at the existing Baton Rouge North CBOC and Baton Rouge South CBOC. The lease would allow VA to enhance outpatient services by closing space and utilization gaps identified in the Strategic Capital Investment Planning (SCIP) process. The new lease would expand current Primary Care space, allowing for the full implementation of the Patient-Aligned Care Team (PACT) model of care delivery at a single point of care, improving operational efficiencies and the Veteran experience. The new lease would also improve Veterans' access to VA care and services in the greater Baton Rouge area by expanding the delivery of Primary Care, Mental Health, Specialty Care, and Ancillary services in a right-sized, state-of-the- art, energy efficient health care facility.

IV. Alternatives to Lease Considered:
Status Quo
The Status Quo would continue to provide Primary Care, Mental Health, and certain Specialty Care services to Veterans at the existing Baton Rouge North CBOC and Baton Rouge South CBOC. The existing facilities do not have an adequate amount of available, suitable space to properly implement the PACT model, hindering the optimized delivery of modern healthcare at those facilities. In addition, providing VA care and services at two locations would not improve operational efficiencies. The Status Quo alternative also does not close the space and utilization gaps identified in the SCIP process. For these reasons, the status quo alternative is not preferred.

Alternative 1 - New Lease (Preferred Alternative)
This alternative proposes to lease an approximately 87,878 NUSF replacement Outpatient Clinic in the vicinity of Baton Rouge, LA, including 600 parking spaces. The lease would replace the Baton Rouge North CBOC and Baton Rouge South CBOC leases to accommodate increasing workload. Fully implementing the PACT model would allow optimized care delivery, improved Veteran experience, increased team coordination,

improved workflows, and better recruitment and retention for VA staff. The new lease would provide care in a modern, efficient facility, with increased operational efficiencies and sufficient space for outpatient services to address the current and projected space and utilization gaps identified in the SCIP process. In addition, the lease would provide VA with flexibility should Veterans' demand for outpatient services or Veteran demographics shift in the future. For these reasons, this is the preferred alternative.

Alternative 2 - New Construction

This alternative proposes for VA to acquire land and construct a new, approximately 118,636 gross square foot (GSF) (equivalent to approximately 87,878 NUSF) Outpatient Clinic in the vicinity of Baton Rouge, LA, including 600 parking spaces. The New Construction alternative would address space and utilization gaps in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran demographics. In addition, new construction would require a longer implementation timeline for this project. Therefore, this is not the preferred alternative.

Alternative 3 - Renovation

This alternative proposes to renovate a vacant or underutilized VA-owned facility for use as an outpatient clinic. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed lease with a floor plan able to accommodate the requirements proposed in this project. In addition, as part of the 2021 SCIP process, VA identified a space gap (deficit) in this market area that would not be resolved through renovating space. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 4 - Contract Out

This alternative assumes that all Primary Care, Mental Health and certain Specialty Care services proposed in this project would be contracted out to fee-basis providers in the Baton Rouge area. There may not be sufficient, qualified private health care providers in the Baton Rouge area to absorb the current and projected Veteran workload. In addition, this alternative may be more costly and could result in a loss of quality and control over Veteran health care. Therefore, this alternative is not optimal and is the least preferred.

Alternative 5 - Acquisition of an Existing Facility through Purchase

This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and able to accommodate all project requirements in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran demographics. High-level market research and interviews with local VA planners have indicated that a suitable facility for purchase and subsequent renovation does not exist in the delineated market area of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6 - Collaboration with DoD for a Joint Lease Project

This alternative proposes to lease a new shared facility, with the Department of Defense (DoD) as a sub-lessee. This alternative would address all project requirements in the same manner as the lease alternative. However, according to local VA planners and VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no facility-sharing opportunities near the proposed project. In addition, the nearest DoD clinical location, Naval Branch Health Clinic in Belle Chase, LA, is approximately 82 miles away. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquistion[1]	Ancillary Services[2]	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE	Net Present Value
Status Quo	$0	$2,951,815	$0	$2,951,815	202	N/A	N/A
Lease	$28,487	$2,972,168	$26,931	$3,027,585	478	276	$(75,770)
New Construction	$132,393	$2,912,808	$26,931	$3,072,133	478	276	$(77,071)
Renovation	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Contract Out	$39,628	$3,676,399	$0	$3,716,027	20	(182)	$(764,212)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

[1]This is the total estimated cost for construction/renovation projects or medical and other related alterations (lump sum payment) for leases, in discounted dollars.

[2]This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template).

VI. Analysis of Benefits

The preferred alternative, New Lease, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section, the Status Quo does not address any of the existing gaps; New Construction would result in a longer timeline to meet the demands within this lease; Contract Out could result in a loss of quality and control over Veterans health care; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. The New Lease alternative, with total life cycle costs of approximately $3 billion and a net present value of approximately -$75.8 million, offers the most flexible alternative that can support VA's strategic goals and objectives, improve access, and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable, accessible care to Veterans.

The proposed lease would allow the Department to open a new facility in a timely and efficient manner and provide Veterans in the Baton Rouge area better access to high- quality, reliable health care. A new lease would also provide the Department future flexibility. Based on changes in Veteran demographics, workload patterns, and emergent health care delivery practices, a flexible lease alternative would allow the Department to re-size, replace, or exit the proposed clinic. With the enrollee base in the Southern market of VISN 16 projected to increase 6% over the next twenty years, a flexible lease alternative would allow VA to scale real property assets to adapt to changes without committing the Department to long-term obligations.

The current Mental Health, Primary Care, and Specialty Care spaces at the Baton Rouge North lease are undersized for the current and projected Veteran workload demand for services. Further, inadequacy of the current space does not allow for the full implementation of the PACT model. This new lease addresses space and utilization gaps and would enhance Veteran health care services in the Baton Rouge market. As workload for Ambulatory and Procedures and Services and Mental Health Procedures is projected to increase over the next 20 years, this new lease is essential to ensure that Veterans are able to access these services in a timely manner. Being housed in a right-sized, PACT-designed and more accessible single location of care would allow better optimized VA care delivery, increased team coordination, improved workflows, and improved recruitment and retention for both Veterans and VA staff.

The proposed lease aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
   - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner
2. Excellent Customer Service and Highly Reliable and Integrated Care
   - VA has collaborative, high-performing and integrated delivery networks that enhance Veteran well-being and independence
3. Transform Business Operations
   - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change 2017-2037
Veteran Population	444,304	421,757	399,099	356,974	-19.7%
Enrollees	203,508	216,659	222,601	218,316	7.3%

*Data reflects the VISN 16, Southern market.

VIII. Workload*

	2017	2022	2027	2037	Change 2017-2037
Ambulatory Services	2,101,899	2,657,873	3,073,525	3,605,436	71.5%
Ambulatory Procedures	96,871	122,253	139,973	160,410	65.6%
Mental Health Stops	96,215	99,652	92,013	77,974	-19.0%
Mental Health Services	386,842	497,802	595,702	757,812	95.9%

*Data reflects workload for the VISN 16, Southern market, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule*

Award Lease	24 months after authorization
Complete Construction	26 months after lease award
Activation/Occupancy	4 months after construction

*For leases with an annual unserviced rent exceeding the GSA prospectus threshold (currently $3.095M), the schedule above is dependent on passage of a Transportation and Infrastructure committee resolution.

X. Project Cost Summary of the Chosen Option

Estimated Annual Rent	$3,983,000
Estimated Rental Rate[1]	$45.32/NUSF
Proposed Lease Authority	Up to 20 years
Net Usable Square Feet	87,878
Parking Spaces	600
Scoring[2]	Operating Lease
Medical and Other Related Alterations (Lump Sum Payment)[3]	$14,940,000

[1]This estimate may be escalated by 2.0 percent annually to the effective date of the lease to account for inflation. The proposed rental rate is unserviced (taxes, insurance, management, and maintenance and repair reserves included); however, the lease contract may include operating expenses paid by the lessor. VA will conduct a competitive procurement and negotiate with offerors to ensure that lease award is made in the best interest of the Government.

[2]Scoring detail provided in supplemental materials.

[3]Represents an estimated lump sum payment to the lessor for the purchase and installation of build-out requirements not included in the annual rent. Actual lump sum amount may vary based on offers received.

XI. Additional GSA Information

Lease Type:	Replacement
Current NUSF:	58,295
Proposed NUSF[1]:	87,878 (Approx. 105,454 ABOA SF)
Expansion/Reduction NUSF:	29,583
Current NUSF/Person:	Not applicable, clinical space
Proposed NUSF/Person:	Not applicable, clinical space
Proposed Maximum Lease Term:	20 Years
Expiration Dates of Current Leases[2]:	29,995 NUSF – 6/3/2024 28,300 NUSF – 6/30/2021

Delineated Area:

- North: Route 190 at I-110 to Route 190 at Plank Road to Plank Road at Hooper Road to Hooper Road at Lovett Road to Lovett Road at Joor Road to Joor Road at Greenwell Springs Road to Greenwell Springs Road at Frenchtown Road to Frenchtown Road at Central Throughway
- East: Burbank Drive at East Highway 30 to Burbank Drive at Highland Road to Highland Road at Route 61
- South: Central Throughway at Frenchtown Road to Central Throughway at Florida Boulevard to O'Neal Lane at Florida Boulevard to O'Neal Lane at South Harrells Ferry Road to South Harrells Ferry Road at Jones Creek Road to Jones Creek Road at Coursey Boulevard to Coursey Boulevard at Stumberg Lane to Stumberg Lane at Route 61 to Route 61 at Highland Road
- West: I-110 at Route 190 to I-110 at I-10 to I-10 at East Highway 30 to East Highway 30 at Burbank Drive

Number of Official Parking Spaces[3]:	600
Scoring:	78.43%
Proposed Rental Rate:	$45.32
Proposed Total Annual Cost:	$3,983,000
Current Total Annual Cost:	$1,722,586

[1]As VA continues the modernization of its leasing program, the intent is for all acquisitions utilizing the Request for Lease Proposals (RLP) method to use a square footage metric better aligned with industry standards. The ABOA SF estimate will be finalized during pre-design.
[2]VA will coordinate with GSA to execute such interim leasing actions as are necessary to ensure continued housing of VA services prior to the effective date of the new lease.
[3]VA may pursue structured parking, instead of surface parking, during lease execution depending on land parcel availability.

VA routinely evaluates and revises its leasing process to ensure it is grounded in private-sector real estate best practices for healthcare delivery, responsive to the emerging demands of the Veteran population, and fully aligned with federal budget processes. VA also works closely with the General Services Administration to ensure it has the latest government- wide guidance, tools, and procedures in place.

Additionally, VA may change the delineated area for this project, keeping in mind speed to market, project costs and potential existing inventory as well as Veteran demographics and maintaining sufficient competition.

Outpatient Clinic Lease
in Support of the Ralph H. Johnson Veterans Affairs Medical Center

This proposal provides for a replacement Outpatient Clinic lease in the vicinity of Beaufort, SC, to expand services currently offered at the existing Beaufort Primary Care Clinic, in support of the Ralph H. Johnson Veterans Affairs Medical Center (VAMC) in Charleston, SC.

I. Budget Authority

Lease Authorization	2021 Request	2021 Authorization Request	Unserviced Annual Rent
Up to 20 years	$12,667,000	$12,667,000	$2,362,000

II. Priority Score: FY 2021 – 0.3678

III. Description of Project:
This project proposes to lease an approximately 60,615 net usable square foot (NUSF) replacement Outpatient Clinic in the vicinity of Beaufort, SC, including 450 parking spaces. The new facility would expand on care currently provided at the existing Beaufort Primary Care Clinic. The new lease would allow VA to enhance outpatient services by closing space and utilization gaps identified in the Strategic Capital Investment Planning (SCIP) process. The new lease would expand the current Primary Care space, allowing for the full implementation of the Patient Aligned Care Team (PACT) model of care delivery, improving operational efficiencies and the Veteran experience. The newly leased right-sized, state-of-the-art, energy-efficient health care facility would provide Primary Care, Mental Health, Specialty Care, and Ancillary services to Veterans in the Beaufort area.

IV. Alternatives to Lease Considered:
Status Quo
The Status Quo would continue to provide Primary Care, Mental Health, certain Specialty Care, and Ancillary services to Veterans at the existing Beaufort Primary Care Clinic housed inside of the Department of Defense's (DoD) Beaufort Naval Hospital. The existing facility does not have an adequate amount of available, suitable space to properly implement the PACT model, hindering the optimized delivery of modern healthcare at the facility. Continuing to provide healthcare services in a non-PACT setting would not improve operational efficiencies. In addition, DoD is in the final stages of planning for a replacement location for the Beaufort Naval Hospital. Continued VA/DoD collaboration at the proposed replacement facility is not feasible as the relocation is about 30 minutes of drive-time from the current location and would reduce access to services for Veterans in the Beaufort area. The Status Quo alternative also does not close the space and utilization gaps identified in the SCIP process. For these reasons, the status quo alternative is not preferred.

Alternative 1 - New Lease (Preferred Alternative)
This alternative proposes to lease an approximately 60,615 NUSF replacement Outpatient Clinic in the vicinity of Beaufort, SC, including 450 parking spaces. The lease would replace the Beaufort Primary Care Clinic lease to accommodate increasing workload. Fully

implementing the PACT model would allow optimized care delivery, improved Veteran experience, increased team coordination, improved workflows, and better recruitment and retention for VA staff. The new lease would provide care in a modern, efficient facility, with increased operational efficiencies and sufficient space for outpatient services to address the current and projected space and utilization gaps identified in the SCIP process. In addition, the lease would provide VA with flexibility should Veterans' demand for outpatient services or Veteran demographics shift in the future. For these reasons, this is the preferred alternative.

Alternative 2 - New Construction

This alternative proposes for VA to acquire land and construct a new, approximately 81,830 gross square foot (GSF) (equivalent to approximately 60,615 NUSF) Outpatient Clinic in the vicinity of Beaufort, SC, including 450 parking spaces. The New Construction alternative would address space and utilization gaps in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran demographics. In addition, new construction would require a longer implementation timeline for this project. Therefore, this is not the preferred alternative.

Alternative 3 - Renovation

This alternative proposes to renovate a vacant or underutilized VA-owned facility for use as an outpatient clinic. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed lease with a floor plan able to accommodate the requirements proposed in this project. In addition, as part of the SCIP process, VA identified an overall space gap (deficit) for this market area that would not be resolved through renovating space. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 4 - Contract Out

This alternative assumes that all Primary Care, Mental Health, Specialty Care, and Ancillary services proposed in this project would be contracted out to fee-basis providers in the Beaufort area. There may not be sufficient, qualified private health care providers in the Beaufort area to absorb the current and projected Veteran workload. In addition, this alternative may be more costly and could result in a loss of quality and control over Veteran health care. Therefore, this alternative is not optimal and is the least preferred.

Alternative 5 - Acquisition of an Existing Facility through Purchase

This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and able to accommodate all project requirements in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran demographics. High-level market research and interviews with local VA planners have indicated that a suitable facility for purchase and subsequent renovation does not exist in the delineated market area of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6 - Collaboration with DoD for a Joint Lease Project

This alternative proposes to lease a new shared facility with the Department of Defense (DoD) as a sub-lessee. This alternative would address all project requirement in the same manner as the lease alternative. However, according to VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no facility sharing opportunities in the local community. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquistion[1]	Ancillary Services[2]	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE	Net Present Value
Status Quo	$0	$684,308	$0	$684,308	54	N/A	N/A
Lease	$19,649	$697,764	$15,918	$733,331	154	100	$(49,023)
New Construction	$80,694	$660,087	$15,918	$756,699	154	100	$(46,870)
Renovation	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Contract Out	$8,980	$821,902	$0	$830,882	10	(44)	$(146,574)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

[1]This is the total estimated cost for construction/renovation projects or medical and other related alterations (lump sum payment) for leases, in discounted dollars.

[2]This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template).

VI. Analysis of Benefits

The preferred alternative, New Lease, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo does not address any of the existing gaps and is not feasible with the relocation of the current VA/DoD shared facility; New Construction would result in a longer timeline to meet the demand within this lease; Contract Out could result in a loss of quality and control over Veteran health care; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. The New Lease alternative, with total life cycle costs of approximately $733.3 million and a net present value of approximately -$49 million, offers the most flexible alternative that can support VA's strategic goals and objectives and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable, accessible care to Veterans.

The proposed lease would allow the Department to open a new facility in a timely and efficient manner and provide Veterans in the Beaufort area better access to high-quality, reliable health care. A new lease would also provide the Department future flexibility. Based on changes in Veteran demographics, workload patterns, and emergent health care delivery practices, a flexible lease alternative would allow the Department to re-size, replace, or exit the proposed clinic. With the enrollee base projected to increase by approximately 10.6% over the next 20 years, a flexible lease alternative would allow VA to scale real property assets to adapt to changes without committing the Department to long-term obligations.

The current spaces at the Beaufort Primary Care Clinic lease are inadequate and undersized for the current and projected Veteran workload demand for services. Further, inadequacy of the current space does not allow for the full implementation of the PACT model. This project

addresses space and utilization gaps and would enhance Veteran health care services in the Beaufort market. As workload for Ambulatory Services and Procedures and Mental Health Services is projected to increase over the next 20 years, this project is essential to ensure that Veterans are able to access these services in a timely manner. Being housed in a right-sized, PACT-designed, and more accessible location of care would allow better optimized VA care delivery, increased team coordination, improved workflows, and improved recruitment and retention for both Veterans and VA staff.

The proposed lease aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - Veterans are satisfied with the available choices for care, benefits, and services.
   - Eligible Veterans choose VA as their provider of choice for their care.
2. Excellent Customer Service and Highly Reliable and Integrated Care
   - Veterans are satisfied with the results of the Veteran benefits, care, and services they received.
   - VA's organizational performance matches or exceeds industry standards for excellence in all its lines of business.
3. Transform Business Operations
   - VA has aligned its strategic footprint and services to ensure it can quickly adapt to changing Veteran needs.

VII. Demographic Data*

	2017	2022	2027	2037	Change 2017-2037
Veteran Population	420,516	414,010	404,065	379,319	-9.8%
Enrollees	200,552	221,277	234,515	240,042	19.7%

*Data reflects the VISN 7, South Carolina market.

VIII. Workload*

	2017	2022	2027	2037	Change 2017-2037
Ambulatory Services	2,243,449	2,919,598	3,478,323	4,242,883	89.1%
Ambulatory Procedures	110,555	136,824	158,039	185,977	68.2%
Mental Health Stops	83,834	91,705	87,878	79,047	-5.7%
Mental Health Services	364,704	485,657	612,214	835,773	129.2%

*Data reflects workload for the VISN 7, South Carolina market, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule*

Award Lease	24 months after authorization
Complete Construction	26 months after lease award
Activation/Occupancy	4 months after construction

* For leases with an annual unserviced rent exceeding the GSA prospectus threshold (currently $3.095M), the schedule above is dependent on passage of a Transportation and Infrastructure committee resolution.

X. Project Cost Summary of the Chosen Option

Estimated Annual Rent	$2,362,000
Estimated Rental Rate[1]	$38.96/NUSF
Proposed Lease Authority	Up to 20 years
Net Usable Square Feet	60,615
Parking Spaces	450
Scoring[2]	Operating Lease
Medical and Other Related Alterations (Lump Sum Payment)[3]	$10,305,000

[1]This estimate may be escalated by 2.0 percent annually to the effective date of the lease to account for inflation. The proposed rental rate is unserviced (taxes, insurance, management, and maintenance and repair reserves included); however, the lease contract may include operating expenses paid by the lessor. VA will conduct a competitive procurement and negotiate with offerors to ensure that lease award is made in the best interest of the Government.
[2]Scoring detail provided in supplemental materials.
[3]Represents an estimated lump sum payment to the lessor for the purchase and installation of build-out requirements not included in the annual rent. Actual lump sum amount may vary based on offers received.

XI. Additional GSA Information

Lease Type:	Replacement
Current NUSF:	8,453
Proposed NUSF[1]:	60,615 (Approx. 72,738 ABOA SF)
Expansion/Reduction NUSF:	52,162
Current NUSF/Person:	Not applicable, clinical space
Proposed NUSF/Person:	Not applicable, clinical space
Proposed Maximum Lease Term:	20 Years
Expiration Dates of Current Leases[2]:	8,453 NUSF – 9/15/2021

Delineated Area:

- North: Intersection of Hwy 21/Broad River Rd
- East: Hwy 21 intersection of Hwy 280/Ribault Rd
- South: Ribaut Rd/Parris Island Gateway to intersection of Hwy 128/Hwy 170
- West: Broad River Rd to intersection of Hwy 170

Number of Official Parking Spaces[3]:	450
Scoring:	83.30%
Proposed Rental Rate:	$38.96
Proposed Total Annual Cost:	$2,362,000
Current Total Annual Cost:	$323,804

[1]As VA continues the modernization of its leasing program, the intent is for all acquisitions utilizing the Request for Lease Proposals (RLP) method to use a square footage metric better aligned with industry standards. The ABOA SF estimate will be finalized during pre-design.
[2]VA will coordinate with GSA to execute such interim leasing actions as are necessary to ensure continued housing of VA services prior to the effective date of the new lease.
[3]VA may pursue structured parking, instead of surface parking, during lease execution depending on land parcel availability.

VA routinely evaluates and revises its leasing process to ensure it is grounded in private-sector real estate best practices for healthcare delivery, responsive to the emerging demands of the Veteran population, and fully aligned with federal budget processes. VA also works closely with the General Services Administration to ensure it has the latest government- wide guidance, tools, and procedures in place.

Additionally, VA may change the delineated area for this project, keeping in mind speed to market, project costs and potential existing inventory as well as Veteran demographics and maintaining sufficient competition.

Outpatient Clinic Lease
in Support of the Michael E. DeBakey VA Medical Center

This proposal provides for a replacement Outpatient Clinic lease in the vicinity of Beaumont, TX, to expand services currently offered at the existing Beaumont Satellite Outpatient Clinic in support of the Michael E. DeBakey VA Medical Center in Houston, TX.

I. Budget Authority

Lease Authorization	2021 Request	2021 Authorization Request	Unserviced Annual Rent
Up to 20 years	$9,851,000	$9,851,000	$1,738,000

II. Priority Score: FY 2018 – 0.0595

III. Description of Project:
This project proposes to lease an approximately 47,720 net usable square foot (NUSF) replacement Outpatient Clinic in the vicinity of Beaumont, TX, including 350 parking spaces. The new facility would expand care currently provided at the existing Beaumont Satellite Outpatient Clinic. The lease would allow VA to enhance outpatient services by closing space and utilization gaps identified in the Strategic Capital Investment Planning (SCIP) process. This new space would allow VA to provide needed care and improve Veterans' access to VA care and services in the Beaumont area. The newly leased right-sized, state-of-the-art, energy efficient health care facility would provide Primary Care, Mental Health, Specialty Care, and Ancillary services to Veterans in the Beaumont area.

IV. Alternatives to Lease Considered:
Status Quo
The Status Quo would continue to provide Primary Care and certain Specialty Care services to Veterans in Beaumont area at the existing Beaumont Satellite Outpatient Clinic. The existing facility does not have an adequate amount of available, suitable space to properly implement the Patient Aligned Care Team (PACT) model, hindering the optimized delivery of modern healthcare at the facility. The Status Quo alternative also does not close the space and utilization gaps identified in the SCIP process. For these reasons, the status quo alternative is not preferred.

Alternative 1 - New Lease (Preferred Alternative)
This alternative proposes to lease an approximately 47,720 NUSF replacement Outpatient Clinic in the vicinity of Beaumont, TX, including 350 parking spaces. The lease would replace the expiring Beaumont Satellite Outpatient Clinic lease to accommodate increasing demand. The lease would close space and utilization gaps identified in the SCIP process. With this new space, VA would be able to provide needed care and improve Veterans' access to VA care and services in the Beaumont area. The leased space would also be designed with the latest PACT model standards, ensuring optimized care delivery, increased team coordination, and improved workflows for both Veterans and VA staff. In addition, the lease would provide VA with flexibility should Veterans' demand for outpatient services or Veteran demographics shift in the future. For these reasons, this is the preferred alternative.

Alternative 2 - New Construction
This alternative proposes for VA to acquire land and construct a new, approximately 64,422 gross square feet (GSF) (equivalent to approximately 47,720 NUSF) Outpatient Clinic in the vicinity of Beaumont, TX, including 350 parking spaces. The New Construction alternative would address space and utilization gaps in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran demographics. In addition, new construction would require a longer implementation timeline for this project. Therefore, this is not the preferred alternative.

Alternative 3 - Renovation
This alternative proposes to renovate a vacant or underutilized VA-owned facility for use as an outpatient clinic. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed lease with a floor plan able to accommodate the requirements proposed in this project. In addition, as part of the SCIP process, the Michael E. DeBakey VAMC would continue to have a significant space gap (deficit) for this catchment area, which would not be resolved with this renovation option. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 4 - Contract Out
This alternative assumes that all Primary Care, Mental Health and Specialty Care services proposed in this project would be contracted out to fee-basis providers in the Beaumont area. There may not be sufficient, qualified private health care providers in the Beaumont area to absorb the current and projected Veteran workload. Therefore, this alternative is not optimal and is the least preferred.

Alternative 5 - Acquisition of an Existing Facility through Purchase
This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and able to accommodate all project requirements in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran demographics. High-level market research and interviews with local VA planners have indicated that a suitable facility for purchase and subsequent renovation does not exist in the delineated market area of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6 - Collaboration with DoD for a Joint Lease Project
This alternative proposes to lease a new shared facility, with the Department of Defense (DoD) as a sub-lessee. This alternative would address all project requirements in the same manner as the lease alternative. However, according to local VA planners and VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no facility-sharing opportunities near the proposed project. In addition, the nearest DoD clinical location, Bay Jones Army Community Hospital in Fort Polk, LA, is approximately 86 miles away. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquistion[1]	Ancillary Services[2]	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE	Net Present Value
Status Quo	$0	$1,112,329	$0	$1,112,329	70	N/A	N/A
Lease	$15,469	$1,086,470	$9,896	$1,111,835	80	10	$494
New Construction	$53,712	$1,065,380	$9,896	$1,128,988	80	10	$1,281
Renovation	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Contract Out	$15,113	$1,554,213	$0	$1,569,326	12	(58)	$(456,997)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

[1]This is the total estimated cost for construction/renovation projects or medical and other related alterations (lump sum payment) for leases, in discounted dollars.
[2]This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template).

VI. Analysis of Benefits

The preferred alternative, New Lease, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo does not address any of the existing gaps; New Construction would result in a longer timeline to meet the needs of this lease; Contract Out may result in a lack of qualified private healthcare providers; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. The New Lease alternative, with total life cycle costs of approximately $1.11 billion and a net present value of approximately $494 thousand, would offer the most flexible alternative, and would fully support VA's strategic goals and objectives and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable, accessible care to Veterans.

The proposed lease would allow the Department to open a new facility in a timely and efficient manner and provide Veterans in the Beaumont area better access to high-quality, reliable health care. A new lease would also provide the Department future flexibility. Based on changes in Veteran demographics, workload patterns, and emergent health care delivery practices, a flexible lease alternative would allow VA to scale real property assets to adapt to changes without committing the Department to long-term obligations.

The outpatient spaces at the existing Beaumont Satellite Outpatient Clinic are inadequate and undersized for the current and projected Veteran workload demand for services. Further, undersized spaces at the current lease do not allow for the full implementation of the PACT model. This project addresses space and utilization gaps and would enhance Veteran health care services in the Beaumont market. Being housed in a right-sized, PACT-designed, and more accessible primary care location would ensure better optimized VA care delivery, increased team coordination, and improved workflows for both Veterans and VA staff. With the enrollee base in the East Texas market of VISN 16 projected to increase 4.4% over the next twenty years, this new lease, with the expansion of services, will allow for a greater ability to meet Veterans' needs in the Beaumont area.

The proposed lease aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
   - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner
2. Excellent Customer Service and Highly Reliable and Integrated Care
   - VA has collaborative, high-performing and integrated delivery networks that enhance Veteran well-being and independence
   - VA ensures at-risk and underserved Veterans receive what they need to eliminate Veteran suicide, homelessness, and poverty
3. Transform Business Operations
   - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change 2017-2037
Veteran Population	343,021	316,783	291,646	249,939	-27.1%
Enrollees	149,919	161,364	164,269	159,221	6.2%

*Data reflects the VISN 16, East Texas market.

VIII. Workload*

	2017	2022	2027	2037	Change 2017-2037
Ambulatory Services	1,947,364	2,501,372	2,893,891	3,354,903	72.3%
Ambulatory Procedures	65,274	84,300	96,432	112,845	72.9%
Mental Health Stops	77,886	74,525	67,741	55,829	-28.3%
Mental Health Services	338,330	435,734	518,384	641,110	89.5%

*Data reflects workload for the VISN 16, East Texas market, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule

Award Lease	24 months after authorization
Complete Construction	26 months after lease award
Activation/Occupancy	4 months after construction

X. Project Cost Summary of the Chosen Option

Estimated Annual Rent	$1,738,000
Estimated Rental Rate[1]	$36.40/NUSF
Proposed Lease Authority	Up to 20 years
Net Usable Square Feet	47,720
Parking Spaces	350
Scoring[2]	Operating Lease
Medical and Other Related Alterations (Lump Sum Payment)[3]	$8,113,000

[1]This estimate may be escalated by 2.0 percent annually to the effective date of the lease to account for inflation. The proposed rental rate is unserviced (taxes, insurance, management, and maintenance and repair reserves included); however, the lease contract may include operating expenses paid by the lessor. VA will conduct a competitive procurement and negotiate with offerors to ensure that lease award is made in the best interest of the Government.

[2]Scoring detail provided in supplemental materials.

[3]Represents an estimated lump sum payment to the lessor for the purchase and installation of build-out requirements not included in the annual rent. Actual lump sum amount may vary based on offers received.

XI. Additional GSA Information

Lease Type:	Replacement
Current NUSF:	28,180
Proposed NUSF[1]:	47,720 (Approx. 57,264 ABOA SF)
Expansion/Reduction NUSF:	19,540
Current NUSF/Person:	Not applicable, clinical space
Proposed NUSF/Person:	Not applicable, clinical space
Proposed Maximum Lease Term:	20 Years
Expiration Dates of Current Leases[2]:	28,180 NUSF – 7/22/2021

Delineated Area:

- North: Route 105 at Old Dowlen Road to Concord Road at Route 69 to Concord Road at East Lucas Drive to East Lucas Drive at Magnolia Street
- East: Magnolia Street at East Lucas Drive to Magnolia Street at I-10 to I-10 at Pine Street to Pine Street at Elizabeth Street to Elizabeth Street at Main Street to Main Street at Pennsylvania Avenue to Pennsylvania Avenue at South Martin Luther King Junior Parkway to Martin Luther King Junior Parkway at Route 96
- South: Route 96 at Martin Luther King Junior Parkway to Route 96 at I-10
- West: I-10 at Route 96 to I-10 at Route 90 to Route 90 at Lindbergh Drive to East Caldwood Drive to East Caldwood Drive at Phelan Boulevard to Phelan Boulevard at West Lucas Drive to West Lucas Drive at Delaware Street to Delaware Street at Dowlen Road to Dowlen Road at Old Dowlen Road to Old Dowlen Road at Route 105

Number of Official Parking Spaces[3]:	350
Scoring:	78.70%
Proposed Rental Rate:	$36.40
Proposed Total Annual Cost:	$1,738,000
Current Total Annual Cost:	$485,644

[1]As VA continues the modernization of its leasing program, the intent is for all acquisitions utilizing the Request for Lease Proposals (RLP) method to use a square footage metric better aligned with industry standards. The ABOA SF estimate will be finalized during pre-design.
[2]VA will coordinate with GSA to execute such interim leasing actions as are necessary to ensure continued housing of VA services prior to the effective date of the new lease.
[3]VA may pursue structured parking, instead of surface parking, during lease execution depending on land parcel availability.

VA routinely evaluates and revises its leasing process to ensure it is grounded in private-sector real estate best practices for healthcare delivery, responsive to the emerging demands of the Veteran population, and fully aligned with federal budget processes. VA also works closely with the General Services Administration to ensure it has the latest government- wide guidance, tools, and procedures in place.

Additionally, VA may change the delineated area for this project, keeping in mind speed to market, project costs and potential existing inventory as well as Veteran demographics and maintaining sufficient competition.

Research Lease
in Support of the Harry S. Truman Memorial Veterans' Hospital

This proposal provides for a new lease in the vicinity of Columbia, MO, to provide translational precision medicine research, in support of the Harry S. Truman Memorial Veterans' Hospital.

I. Budget Authority

Lease Authorization	2021 Request	2021 Authorization Request	Unserviced Annual Rent
Up to 20 years	$14,889,000	$14,889,000	$2,596,000

II. Priority Score: FY 2020 – 0.1735

III. Description of Project:
This project would establish a new lease of approximately 58,538 net usable square feet (NUSF) for research lab space, including 250 parking spaces, at a new Translational Precision Medicine Research Complex. The new lease would allow the Harry S. Truman Memorial Veterans' Hospital to continue to operate its Research and Development Service, which is focused on Veterans' health issues. Research at this leased location will focus on five areas that will have a broad impact on Veteran's healthcare: Vascular, Neurology, Cancer, Ophthalmology, and Diabetes. The opportunity for partnership with the University of Missouri System and the expansion of the existing partnership with the Veterans Medical Research Foundation (VMRF) would advance research to the benefit of Veteran healthcare.

IV. Alternatives to Lease Considered:
Status Quo
The Status Quo alternative assumes that the Veterans Affairs Medical Center (VAMC) would not establish a new lease for Research and Development programs and would not further its partnership with the University of Missouri System. This would be a great disservice to Veterans nationwide, because progress and improvement in the treatment of the five focus areas (listed above) would be delayed. Therefore, this alternative is not preferred.

Alternative 1 - New Lease (Preferred Alternative)
This alternative provides a new lease of 58,538 NUSF in the vicinity of Columbia, MO, including 250 parking spaces. The facility would include all the core imaging and vivarium facilities needed for translational precision medicine research and allow the Harry S. Truman Memorial Veterans' Hospital to share equipment required for this research. The research program is integral to the collaborative relationship between the VAMC and its affiliates, the University of Missouri System, and the VMRF. The opportunity for collaboration with the University of Missouri System in highly integrated research programs would help maintain the position of the VAMC research program at the cutting-edge of innovation and provide a dynamic environment in which to further develop the research program. For these reasons, this option is the preferred alternative.

Alternative 2 - New Construction
This alternative proposes for VA to acquire land and construct a new, approximately 79,026 gross square foot (GSF) (equivalent to approximately 58,538 NUSF) research facility in the vicinity of Columbia, MO, including 250 parking spaces. The new facility would provide the same features as those included in the lease alternative. However, new construction would require a longer implementation timeline for this project; therefore, this is not the preferred alternative.

Alternative 3 - Renovation
This alternative proposes to renovate a vacant or underutilized VA-owned facility for use as research space. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed lease with a floor plan able to accommodate the requirements proposed in this project. Local VA planners have confirmed that there are no existing VA-owned facilities available that are suitable for renovation and fit the project requirements. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 4 - Contract Out
This alternative would seek to contract out research programs to the private sector in the Columbia, MO area. VA is committed to becoming an industry leader in the advancement of clinical medical knowledge, particularly as it applies to the unique health care needs of Veterans. Contracting out research programs to the private sector is not compatible with VHA Office of Research and Development mission goals to, "discover knowledge, develop VA research and health care leaders, and create innovations that advance health care for our Veterans and the Nation." This option would not support this mission statement; therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 5 - Acquisition of an Existing Facility through Purchase
This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and able to accommodate all project requirements in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future. High-level market research and interviews with local VA planners have indicated that a suitable facility for purchase and subsequent renovation does not exist in the delineated market area of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6 - Collaboration with DoD for a Joint Lease Project
This alternative proposes to lease a new shared facility with the Department of Defense (DoD) as a sub-lessee. This alternative would address all project requirements in the same manner as the lease alternative. However, according to VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no DoD research facility sharing opportunities at this location. For this reason, this alternative is not viable and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquistion[1]	Ancillary Services[2]	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE	Net Present Value
Status Quo	$0	$79,714	$0	$79,714	44	N/A	N/A
Lease	$23,441	$216,117	$23,107	$262,665	88	44	$(182,951)
New Construction	$85,701	$196,316	$23,107	$305,124	88	44	$(197,153)
Renovation	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Contract Out	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

[1]This is the total estimated cost for construction/renovation projects or medical and other related alterations (lump sum payment) for leases, in discounted dollars.
[2]This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template).

VI. Analysis of Benefits

The preferred alternative, New Lease, would deliver the best benefit to VA compared to all the other alternatives. As discussed in the previous section: Status Quo does not further VA's research priorities and grow the partnership with the University of Missouri System; New Construction would result in a longer timeline to meet the demands within this lease; and the Contract Out, Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. The New Lease alternative, with total life cycle costs of approximately $262.7 million and a net present value of approximately -$183.0 million, would offer the most cost-effective and flexible alternative that can support VA's research goals to advance health care for Veterans.

The proposed new lease would provide the capacity and infrastructure needed to support the hospital's innovative translational precision medicine research programs in a timely and efficient manner. A new lease would also provide the Department future flexibility. Based on changes in departmental priorities, affiliate relations, or areas of study, a lease would allow the Department to re-size, replace, or exit the proposed research lease. A flexible lease alternative would allow VA to better scale real property assets to adapt to changes without committing the Department to long-term obligations.

The new leased facility would operate effectively with fully furnished wet labs, the latest research grade ventilation, temperature controls, secure storage, physical security, modern information technology and sustainability features. Some research already undertaken by the partnership with University of Missouri System, a premier biomedical research institute, represents some of the most critical research in areas for the five prevalent issues affecting Veterans: Vascular Care, Neurology, Cancer, Ophthalmology, and Diabetes. The research program has benefited tremendously from its partnership with the VMRF, which administers additional funds for the research conducted at the Harry S. Truman Memorial Veterans' Hospital. Research affiliate collaboration efforts extend to staffing as well, as 73 of the 94 unique staff associated with the programs are paid for through non-VA funding, including funding from VMRF and University of Missouri. Therefore, this collaborative environment has provided invaluable resources with which to attract the world's most prominent clinician investigators and has enabled VA to conduct the most cutting-edge research to the benefit of

Veteran healthcare. Through this new leased facility, the hospital aims to continue growing this affiliate relationship to help expand and improve its clinical research operations.

This new lease would enhance Veteran's health care services across the VA system by housing key research programs and providing sufficient space to accommodate the necessary research capacity.

The proposed lease aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
2. Excellent Customer Service and Highly Reliable and Integrated Care
   - VA has collaborative, high-performing and integrated delivery networks that enhance Veteran well-being and independence
3. Transform Business Operations
   - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change 2017-2037
Veteran Population	N/A	N/A	N/A	N/A	N/A
Enrollees	N/A	N/A	N/A	N/A	N/A

*Data not applicable to research leases.

VIII. Workload*

	2014	2015	2016	2017	2018	Change 2014-2018
VA Funding	$2.8M	$2.2M	$2.5M	$3.1M	$3.1M	-10.7%
Non-VA Funding	$2.0M	$3.1M	$2.6M	$1.7M	$1.2M	-40%

*Research funding for the Harry S. Truman Memorial VA Medical Center as provided by the VHA Office of Research and Development.

IX. Schedule

Award Lease	24 months after authorization
Complete Construction	26 months after lease award
Activation/Occupancy	4 months after construction

X. Project Cost Summary of the Chosen Option

Estimated Annual Rent	$2,596,000
Estimated Rental Rate[1]	$44.34/NUSF
Proposed Lease Authority	Up to 20 years
Net Usable Square Feet	58,538
Parking Spaces	250
Scoring[2]	Operating Lease
Medical and Other Related Alterations (Lump Sum Payment)[3]	$12,293,000

[1]This estimate may be escalated by 2.0 percent annually to the effective date of the lease to account for inflation. The proposed rental rate is unserviced (taxes, insurance, management, and maintenance and repair reserves included); however, the lease contract may include operating expenses paid by the lessor. VA will conduct a competitive procurement and negotiate with offerors to ensure that lease award is made in the best interest of the Government.
[2]Scoring detail provided in supplemental materials.
[3]Represents an estimated lump sum payment to the lessor for the purchase and installation of build-out requirements not included in the annual rent. Actual lump sum amount may vary based on offers received.

XI. Additional GSA Information

Lease Type:	New
Current NUSF:	N/A
Proposed NUSF[1]:	58,538 (Approx. 70,246 ABOA SF)
Expansion/Reduction NUSF:	58,538
Current NUSF/Person:	Not applicable, clinical space
Proposed NUSF/Person:	Not applicable, clinical space
Proposed Maximum Lease Term:	20 Years
Expiration Dates of Current Leases[2]:	N/A

Delineated Area:

- North: Intersection W Driskel Rd & N Stadium Blvd, N Stadium Blvd, Business Loop 70 W, N Creasy Springs Rd, W Brown School Rd, US Hwy 63, Mexico Gravel Rd
- East: N Lake of the Woods Rd, Straight line south to E New Haven Rd
- South: E New Haven Rd, Grindstone Pkwy, Nifong Blvd, W Vawter School Rd
- West: Scott Blvd, Straight line north to intersection W Driskel Rd & N Stadium Blvd

Number of Official Parking Spaces[3]:	250
Scoring:	82.58%
Proposed Rental Rate:	$44.34
Proposed Total Annual Cost:	$2,596,000
Current Total Annual Cost:	N/A

[1]As VA continues the modernization of its leasing program, the intent is for all acquisitions utilizing the Request for Lease Proposals (RLP) method to use a square footage metric better aligned with industry standards. The ABOA SF estimate will be finalized during pre-design.
[2]VA will coordinate with GSA to execute such interim leasing actions as are necessary to ensure continued housing of VA services prior to the effective date of the new lease.
[3]VA may pursue structured parking, instead of surface parking, during lease execution depending on land parcel availability.

VA routinely evaluates and revises its leasing process to ensure it is grounded in private-sector real estate best practices for healthcare delivery, responsive to the emerging demands of the Veteran population, and fully aligned with federal budget processes. VA also works closely with the General Services Administration to ensure it has the latest government- wide guidance, tools, and procedures in place.

Additionally, VA may change the delineated area for this project, keeping in mind speed to market, project costs and potential existing inventory as well as Veteran demographics and maintaining sufficient competition.

Outpatient Clinic Lease
in Support of the Hampton Veterans Affairs Medical Center

This proposal provides for a new Outpatient Clinic lease in the vicinity of the southside of Hampton Roads, VA, to expand services currently offered at the Veterans Affairs Medical Center (VAMC) in Hampton, VA.

I. Budget Authority

Lease Authorization	2021 Request	2021 Authorization Request	Unserviced Annual Rent
Up to 20 years	$45,958,000	$45,958,000	$7,689,000

II. Priority Score: FY 2021 – 0.5269

III. Description of Project:
This project proposes to lease an approximately 182,230 net usable square foot (NUSF) new Outpatient Clinic in the vicinity of the southside of Hampton Roads, VA, including 1,250 parking spaces. The new facility would broaden access to Veterans in the southside area of Hampton Roads, where the majority of Veterans in the Hampton Roads area live, and expand upon care currently provided at the nearby, at-capacity community-based outpatient clinics (CBOCs). The new lease would allow some decompression at the Hampton VAMC and allow VA to enhance outpatient services by closing space and utilization gaps identified in the Strategic Capital Investment Planning (SCIP) process. The new facility would enhance Primary Care capabilities in the region by allowing for the full implementation of the Patient Aligned Care Team (PACT) model of care delivery, improving operational efficiencies and the overall Veteran experience. The newly leased right-sized, state-of-the-art, energy-efficient health care facility would provide Primary Care, Mental Health, certain Specialty Care, and Ancillary services to Veterans in the southside area of Hampton Roads.

IV. Alternatives to Lease Considered:
Status Quo
The Status Quo would continue to provide Primary Care, Mental Health, certain Specialty Care, and Ancillary services to Veterans at the existing CBOCs in the southside area of Hampton Roads and at the Hampton VAMC. The existing CBOCs are undersized due to the rapid growth in workload in the area. In addition, Veterans travelling to the VAMC for certain Specialty Care and Ancillary services would continue to encounter access issues due to substantial traffic on the Hampton Roads Bridge-Tunnel (HRBT), which connects the city of Hampton, where the VAMC is located, with the southside area of Hampton Roads, where the majority of Veterans reside. The Status Quo alternative also does not close the space and utilization gaps identified in the SCIP process. For these reasons, the status quo alternative is not preferred.

Alternative 1 - New Lease (Preferred Alternative)
This alternative proposes to lease an approximately 182,230 NUSF new Outpatient Clinic in the vicinity of the southside of Hampton Roads, VA, including 1,250 parking spaces. The lease would expand Primary Care, Mental Health, certain Specialty Care, and Ancillary

services in the southside area to accommodate increasing workload and improve Veteran's access to services. Fully implementing the PACT model in the new leased facility would allow optimized care delivery, improved Veteran's experience, increased team coordination, improved workflows, and better recruitment and retention for VA staff. The new lease would provide care in a modern, efficient facility, with increased operational efficiencies and sufficient space for outpatient services to address the current and projected space and utilization gaps identified in the SCIP process. In addition, the lease would provide VA with flexibility should Veterans' demand for outpatient services or Veteran demographics shift in the future. For these reasons, this is the preferred alternative.

Alternative 2 - New Construction

This alternative proposes for VA to acquire land and construct a new, approximately 246,011 gross square foot (GSF) (equivalent to approximately 182,230 NUSF) Outpatient Clinic in the vicinity of the southside of Hampton Roads, VA, including 1,250 parking spaces. The New Construction alternative would address space and utilization gaps in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran demographics. In addition, new construction would require a longer implementation timeline for this project. Therefore, this is not the preferred alternative.

Alternative 3 - Renovation

This alternative proposes to renovate a vacant or underutilized VA-owned facility for use as an outpatient clinic. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed lease with a floor plan able to accommodate the requirements proposed in this project. In addition, as part of the SCIP process, VA identified an overall space gap (deficit) for this market area that would not be resolved through renovating space. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 4 - Contract Out

This alternative assumes that all Primary Care, Mental Health, certain Specialty Care, and Ancillary services proposed in this project would be contracted out to fee-basis providers in the Hampton area. There may not be sufficient, qualified private health care providers in the Hampton area to absorb the current and projected Veteran workload. In addition, this alternative may be more costly and could result in a loss of quality and control over Veteran health care. Therefore, this alternative is not optimal and is the least preferred.

Alternative 5 - Acquisition of an Existing Facility through Purchase

This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and able to accommodate all project requirements in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran demographics. High-level market research and interviews with local VA planners have indicated that a suitable facility for purchase and subsequent renovation does not exist in the delineated market area of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6 - Collaboration with DoD for a Joint Lease Project

This alternative proposes to lease a new shared facility with the Department of Defense (DoD) as a sub-lessee. This alternative would address all project requirement in the same manner as the lease alternative. According to VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no solidified facility sharing opportunities in the local community. However, there may be a potential future opportunity to partner with DoD as VA could benefit from future service line synergies with the DoD's Naval Medical Center Portsmouth, which is less than 10 miles away in Portsmouth, VA. As there is not a solidified facility sharing opportunity at this time, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquistion[1]	Ancillary Services[2]	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE	Net Present Value
Status Quo	$0	$2,312,545	$0	$2,312,545	450	N/A	N/A
Lease	$72,971	$2,328,485	$50,866	$2,452,322	450	0	$(139,777)
New Construction	$308,242	$2,218,940	$50,866	$2,578,048	450	0	$(166,922)
Renovation	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Contract Out	$55,587	$2,807,607	$0	$2,863,195	25	(425)	$(550,649)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

[1]This is the total estimated cost for construction/renovation projects or medical and other related alterations (lump sum payment) for leases, in discounted dollars.

[2]This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template).

VI. Analysis of Benefits

The preferred alternative, New Lease, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo does not address any of the existing gaps; New Construction would result in a longer timeline to meet the demand within this lease; Contract Out could result in a loss of quality and control over Veteran health care; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. The New Lease alternative, with total life cycle costs of approximately $2.45 billion and a net present value of approximately -$139.8 million, offers the most flexible alternative that can support VA's strategic goals and objectives, improve access, and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable, accessible care to Veterans.

The proposed lease would allow the Department to open a new facility in a timely and efficient manner and provide Veterans in the southside area of Hampton Roads better access to high-quality, reliable health care. A new lease would also provide the Department future flexibility. Based on changes in Veteran demographics, workload patterns, and emergent health care delivery practices, a flexible lease alternative would allow the Department to re-size, replace, or exit the proposed clinic. With the enrollee base projected to increase by approximately 23.1% over the next 20 years, a flexible lease alternative would allow VA to scale real property assets to adapt to changes without committing the Department to long-term obligations.

The current Primary Care, Mental Health, Specialty Care, and Ancillary spaces in the southside area of the Hampton Roads, VA are undersized for the current and projected Veteran workload demand for services. This new lease addresses space and utilization gaps and would enhance Veteran health care services in the Hampton market. As workload for Ambulatory Procedures, Ambulatory Services, Mental Health Stops, and Mental Health Services is projected to dramatically increase over the next 20 years, this new lease is essential to ensure that Veterans are able to access these services in a timely manner. In addition, by locating this new lease in the southside area of Hampton Roads, access to VA services will increase as a majority of Hampton Roads Veterans live south of the HRBT. Being housed in a right-sized, PACT- designed, and more accessible location of care would allow better optimized VA care delivery, increased team coordination, improved workflows, and improved recruitment and retention for both Veterans and VA staff.

The proposed lease aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - Eligible Veterans choose VA as their provider of choice for their care.
   - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner
2. Customer Service and Highly Reliable and Integrated Care
   - Veterans are satisfied with the results of the Veteran benefits, care, and services they received
3. Transform Business Operations
   - VA has aligned its strategic footprint and services to ensure it can quickly adapt to changing Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change 2017-2037
Veteran Population	418,989	414,007	405,200	384,625	-8.2%
Enrollees	160,277	177,038	189,261	197,960	23.5%

*Data reflects the VISN 6, Northeast market.

VIII. Workload*

	2017	2022	2027	2037	Change 2017-2037
Ambulatory Services	1,476,087	1,959,584	2,382,846	3,018,561	104.5%
Ambulatory Procedures	73,753	97,482	117,627	143,664	94.8%
Mental Health Stops	79,058	92,033	88,903	81,059	2.5%
Mental Health Services	246,078	323,949	402,990	545,182	121.5%

*Data reflects workload for the VISN 6, Northeast market, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule*

Award Lease	24 months after authorization
Complete Construction	32 months after lease award
Activation/Occupancy	4 months after construction

*For leases with an annual unserviced rent exceeding the GSA prospectus threshold (currently $3.095M), the schedule above is dependent on passage of a Transportation and Infrastructure committee resolution.

X. Project Cost Summary of the Chosen Option

Estimated Annual Rent	$7,689,000
Estimated Rental Rate[1]	$42.19/NUSF
Proposed Lease Authority	Up to 20 years
Net Usable Square Feet	182,230
Parking Spaces	1,250
Scoring[2]	Operating Lease
Medical and Other Related Alterations (Lump Sum Payment)[3]	$38,269,000

[1]This estimate may be escalated by 2.0 percent annually to the effective date of the lease to account for inflation. The proposed rental rate is unserviced (taxes, insurance, management, and maintenance and repair reserves included); however, the lease contract may include operating expenses paid by the lessor. VA will conduct a competitive procurement and negotiate with offerors to ensure that lease award is made in the best interest of the Government.

[2]Scoring detail provided in supplemental materials.

[3]Represents an estimated lump sum payment to the lessor for the purchase and installation of build-out requirements not included in the annual rent. Actual lump sum amount may vary based on offers received.

XI. Additional GSA Information

Lease Type:	New
Current NUSF:	N/A
Proposed NUSF[1]:	182,230 (Approx. 218,676 ABOA SF)
Expansion/Reduction NUSF:	182,230
Current NUSF/Person:	Not applicable, clinical space
Proposed NUSF/Person:	Not applicable, clinical space
Proposed Maximum Lease Term:	20 Years
Expiration Dates of Current Leases[2]:	N/A

Delineated Area:

- North: Norview Ave, I-64, Northampton Blvd (SR 13), Independence Blvd
- East: Independence Blvd to Holland Rd at Dam Neck Rd
- South: Kempsville Rd (SR 190), Butts Station Rd, Elbow Rd, Dam Neck Rd, Holland Rd
- West: Tidewater Dr (SR 168), Campostella Rd, N Battlefield Blvd (SR 168) at Kempsville Rd (SR 190)

Number of Official Parking Spaces[3]:	1,250
Scoring:	87.22%
Proposed Rental Rate:	$42.19
Proposed Total Annual Cost:	$7,689,000
Current Total Annual Cost:	N/A

[1]As VA continues the modernization of its leasing program, the intent is for all acquisitions utilizing the Request for Lease Proposals (RLP) method to use a square footage metric better aligned with industry standards. The ABOA SF estimate will be finalized during pre-design.
[2]VA will coordinate with GSA to execute such interim leasing actions as are necessary to ensure continued housing of VA services prior to the effective date of the new lease.
[3]VA may pursue structured parking, instead of surface parking, during lease execution depending on land parcel availability.

VA routinely evaluates and revises its leasing process to ensure it is grounded in private-sector real estate best practices for healthcare delivery, responsive to the emerging demands of the Veteran population, and fully aligned with federal budget processes. VA also works closely with the General Services Administration to ensure it has the latest government- wide guidance, tools, and procedures in place.

Additionally, VA may change the delineated area for this project, keeping in mind speed to market, project costs and potential existing inventory as well as Veteran demographics and maintaining sufficient competition.

Outpatient Clinic Lease
in Support of the Fayetteville Veterans Affairs Medical Center

This proposal provides for a replacement Outpatient Clinic lease in the vicinity of Jacksonville, NC, to expand services currently offered at the existing Jacksonville Community Based Outpatient Clinic (CBOC), in support of the Veterans Affairs Medical Center (VAMC) in Fayetteville, NC.

I. Budget Authority

Lease Authorization	2021 Request	2021 Authorization Request	Unserviced Annual Rent
Up to 20 years	$31,334,000	$31,334,000	$4,708,000

II. Priority Score: FY 2020 – 0.3538

III. Description of Project:
This project proposes to lease an approximately 126,789 net usable square foot (NUSF) replacement Outpatient Clinic in the vicinity of Jacksonville, NC, including 900 parking spaces. The new facility would expand on care currently provided at the existing Jacksonville CBOC. The new lease would allow VA to enhance outpatient services by closing space and utilization gaps identified in the Strategic Capital Investment Planning (SCIP) process. The new lease would expand the current Primary Care space, allowing for the full implementation of the Patient Aligned Care Team (PACT) model of care delivery, improving operational efficiencies and the Veteran experience. The newly leased right-sized, state-of-the-art, energy-efficient health care facility would provide Primary Care, Mental Health, Specialty Care, and Ancillary services to Veterans in the Jacksonville area.

IV. Alternatives to Lease Considered:
Status Quo
The Status Quo would continue to provide Primary Care, Mental Health, certain Specialty Care, and Ancillary services to Veterans at the existing Jacksonville Outpatient Clinic. The existing facility does not have an adequate amount of available, suitable space to properly implement the PACT model, hindering the optimized delivery of modern healthcare at the facility. Continuing to provide healthcare services in a non-PACT setting would not improve operational efficiencies. The Status Quo alternative also does not close the space and utilization gaps identified in the SCIP process. For these reasons, the status quo alternative is not preferred.

Alternative 1 - New Lease (Preferred Alternative)
This alternative proposes to lease an approximately 126,789 NUSF replacement Outpatient Clinic in the vicinity of Jacksonville, NC, including 900 parking spaces. The lease would replace the Jacksonville CBOC lease to accommodate increasing workload. Fully implementing the PACT model would allow optimized care delivery, improved Veteran's experience, increased team coordination, improved workflows, and better recruitment and retention for VA staff. The new lease would provide care in a modern, efficient facility, with increased operational efficiencies and sufficient space for outpatient services to address the

current and projected space and utilization gaps identified in the SCIP process. In addition, the lease would provide VA with flexibility should Veteran's demand for outpatient services or Veteran's demographics shift in the future. For these reasons, this option is the preferred alternative.

Alternative 2 - New Construction
This alternative proposes for VA to acquire land and construct a new, approximately 171,165 gross square foot (GSF) (equivalent to approximately 126,789 NUSF) Outpatient Clinic in the vicinity of Jacksonville, NC, including 900 parking spaces. The New Construction alternative would address space and utilization gaps in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran demographics. In addition, new construction would require a longer implementation timeline for this project. Therefore, this is not the preferred alternative.

Alternative 3 - Renovation
This alternative proposes to renovate a vacant or underutilized VA-owned facility for use as an outpatient clinic. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed lease with a floor plan able to accommodate the requirements proposed in this project. In addition, as part of the SCIP process, VA identified an overall space gap (deficit) for this market area that would not be resolved through renovating space. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 4 - Contract Out
This alternative assumes that all Primary Care, Mental Health, Specialty Care, and Ancillary services proposed in this project would be contracted out to fee-basis providers in the Jacksonville area. There may not be sufficient, qualified private health care providers in the Jacksonville area to absorb the current and projected Veteran workload. In addition, this alternative may be more costly and could result in a loss of quality and control over Veteran health care. Therefore, this alternative is not optimal and is the least preferred.

Alternative 5 - Acquisition of an Existing Facility through Purchase
This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and able to accommodate all project requirements in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran demographics. High-level market research and interviews with local VA planners have indicated that a suitable facility for purchase and subsequent renovation does not exist in the delineated market area of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6 - Collaboration with DoD for a Joint Lease Project
This alternative proposes to lease a new shared facility with the Department of Defense (DoD) as a sub-lessee. This alternative would address all project requirement in the same manner as the lease alternative. While the Fayetteville VAMC has had PACT teams

operating at the nearby DoD clinical location at Camp Lejeune in Jacksonville, NC in the recent past, Camp Lejeune sustained extensive damage from Hurricanes Florence and Michael and VA was required to vacate the spaces on base. However, according to local VA planners and VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no DoD facility sharing opportunities in the local community for the proposed project requirement. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquistion[1]	Ancillary Services[2]	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE	Net Present Value
Status Quo	$0	$2,892,772	$0	$2,892,772	61	N/A	N/A
Lease	$50,771	$2,984,708	$48,896	$3,084,374	240	179	$(191,602)
New Construction	$183,289	$2,948,571	$48,896	$3,180,756	252	191	$(228,923)
Renovation	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Contract Out	$30,711	$3,904,613	$0	$3,935,324	0	(61)	$(1,042,552)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

[1]This is the total estimated cost for construction/renovation projects or medical and other related alterations (lump sum payment) for leases, in discounted dollars.
[2]This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template).

VI. Analysis of Benefits

The preferred alternative, New Lease, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo does not address any of the existing gaps; New Construction would result in a longer timeline to meet the demand within this lease; Contract Out could result in a loss of quality and control over Veteran health care; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. The New Lease alternative, with total life cycle costs of approximately $3.08 billion and a net present value of approximately -$191.6 million, offers the most cost-effective and flexible alternative that can support VA's strategic goals and objectives and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable, accessible care to Veterans.

The proposed lease would allow the Department to open a new facility in a timely and efficient manner and provide Veterans in the Jacksonville area better access to high-quality, reliable health care. A new lease would also provide the Department future flexibility. Based on changes in Veteran's demographics, workload patterns, and emergent health care delivery practices, a flexible lease alternative would allow the Department to re-size, replace, or exit the proposed clinic. With the enrollee base projected to increase by approximately 17.9% over the next 20 years, a flexible lease alternative would allow VA to scale real property assets to adapt to changes without committing the Department to long-term obligations.

The current Primary Care, Mental Health, Specialty Care, and Ancillary spaces at the Jacksonville CBOC lease are inadequate and undersized for the current and projected

Veteran's workload demand for services. Further, inadequacy of the current space does not allow for the full implementation of the PACT model. This project addresses space and utilization gaps and would enhance Veteran health care services in the Jacksonville market. As workload for Ambulatory Services, Ambulatory Procedures, and Mental Health Services is projected to increase over the next 20 years, this project is essential to ensure that Veterans are able to access these services in a timely manner. Being housed in a right-sized, PACT-designed, and more accessible location of care would allow better optimized VA care delivery, increased team coordination, improved workflows, and improved recruitment and retention for both Veterans and VA staff.

The proposed lease aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
2. Excellent Customer Service and Highly Reliable and Integrated Care
   - VA has collaborative, high-performing and integrated delivery networks that enhance Veteran well-being and independence
3. Transform Business Operations
   - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change 2017-2037
Veteran Population	382,094	389,187	391,470	389,953	2.1%
Enrollees	178,475	202,926	222,542	240,988	35.0%

*Data reflects the VISN 6, Southeast market.

VIII. Workload*

	2017	2022	2027	2037	Change 2017-2037
Ambulatory Services	1,883,404	2,503,831	3,085,125	4,038,022	114.4%
Ambulatory Procedures	120,252	150,355	178,884	220,410	83.3%
Mental Health Stops	51,750	56,685	58,074	54,987	6.3%
Mental Health Services	275,000	370,769	481,402	688,030	150.2%

*Data reflects workload for the VISN 6, Southeast market, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule*

Award Lease	24 months after authorization
Complete Construction	32 months after lease award
Activation/Occupancy	4 months after construction

*For leases with an annual unserviced rent exceeding the GSA prospectus threshold (currently $3.095M), the schedule above is dependent on passage of a Transportation and Infrastructure committee resolution.

X. Project Cost Summary of the Chosen Option

Estimated Annual Rent	$4,708,000
Estimated Rental Rate[1]	$37.13/NUSF
Proposed Lease Authority	Up to 20 years
Net Usable Square Feet	126,789
Parking Spaces	900
Scoring[2]	Operating Lease
Medical and Other Related Alterations (Lump Sum Payment)[3]	$26,626,000

[1]This estimate may be escalated by 2.0 percent annually to the effective date of the lease to account for inflation. The proposed rental rate is unserviced (taxes, insurance, management, and maintenance and repair reserves included); however, the lease contract may include operating expenses paid by the lessor. VA will conduct a competitive procurement and negotiate with offerors to ensure that lease award is made in the best interest of the Government.

[2]Scoring detail provided in supplemental materials.

[3]Represents an estimated lump sum payment to the lessor for the purchase and installation of build-out requirements not included in the annual rent. Actual lump sum amount may vary based on offers received.

XI. Additional GSA Information

Lease Type:	Replacement
Current NUSF:	15,000
Proposed NUSF[1]:	126,789 (Approx. 152,147 ABOA SF)
Expansion/Reduction NUSF:	111,789
Current NUSF/Person:	Not applicable, clinical space
Proposed NUSF/Person:	Not applicable, clinical space
Proposed Maximum Lease Term:	20 Years
Expiration Dates of Current Leases[2]:	15,000 NUSF – 12/15/2025

Delineated Area:

- North: Ramsey Rd, Kellum Loop Rd, Hwy 17
- East: Halltown Rd, Waters Rd, Old 30 Rd, Piney Green Rd
- South: Route 24, Hwy 17
- West: Old Maplehurst Rd, Burgaw Hwy, Richlands Hwy to intersection with Pony Farm Rd, straight line to intersection of Gum Branch Rd & Ramsey Rd

Number of Official Parking Spaces[3]:	900
Scoring:	86.44%
Proposed Rental Rate:	$37.13
Proposed Total Annual Cost:	$4,708,000
Current Total Annual Cost:	$406,190

[1]As VA continues the modernization of its leasing program, the intent is for all acquisitions utilizing the Request for Lease Proposals (RLP) method to use a square footage metric better aligned with industry standards. The ABOA SF estimate will be finalized during pre-design.
[2]VA will coordinate with GSA to execute such interim leasing actions as are necessary to ensure continued housing of VA services prior to the effective date of the new lease.
[3]VA may pursue structured parking, instead of surface parking, during lease execution depending on land parcel availability.

VA routinely evaluates and revises its leasing process to ensure it is grounded in private-sector real estate best practices for healthcare delivery, responsive to the emerging demands of the Veteran population, and fully aligned with federal budget processes. VA also works closely with the General Services Administration to ensure it has the latest government- wide guidance, tools, and procedures in place.

Additionally, VA may change the delineated area for this project, keeping in mind speed to market, project costs and potential existing inventory as well as Veteran demographics and maintaining sufficient competition.

Outpatient Clinic Lease
in Support of the Richard L. Roudebush VA Medical Center

This proposal provides for a new Outpatient Clinic lease in the vicinity of Lawrence, IN, to allow for space and workload decompression at the Richard L. Roudebush VA Medical Center (VAMC) in Indianapolis, IN.

I. Budget Authority

Lease Authorization	2021 Request	2021 Authorization Request	Unserviced Annual Rent
Up to 20 years	$9,126,000	$9,126,000	$1,435,000

II. Priority Score: FY 2019 – 0.3001

III. Description of Project:
This project proposes to lease a new, approximately 45,237 net usable square foot (NUSF) Outpatient Clinic in the vicinity of Lawrence, IN, including 350 parking spaces. The new facility would alleviate space and utilization gaps at the Richard L. Roudebush VA Medical Center (VAMC) as identified by the Strategic Capital Investment Planning (SCIP) process. The new lease would also improve Veteran's access to VA care and services in the Lawrence and greater Indianapolis areas. This project would include Primary Care, Mental Health, Specialty Care, Imaging, and Pharmacy services to provide a robust suite of services at the new Lawrence Outpatient Clinic. The new right-sized, state-of-the-art, energy efficient health care facility in this portion of the VISN 10 Indiana market would result in the decompression of the Richard L. Roudebush VAMC.

IV. Alternatives to Lease Considered:
Status Quo
The status quo would continue to provide health care services to the Lawrence Veteran community at the existing Richard L. Roudebush VAMC. However, the Status Quo alternative does not address the growth of Veteran enrollees and workload demand in the Indiana market and would not close the space and utilization gaps identified in the SCIP process. For these reasons, the status quo alternative is not preferred.

Alternative 1 - New Lease (Preferred Alternative)
This alternative proposes to lease a new, approximately 45,237 NUSF Outpatient Clinic in the vicinity of Lawrence, IN, including 350 parking spaces. The lease would provide modern, efficient space to serve the Lawrence area and alleviate the space and utilization gaps identified in the SCIP process. The leased space would also be designed with the latest Patient Aligned Care Team (PACT) model of care delivery standards, ensuring optimized care delivery, increased team coordination, and improved workflows for both Veterans and VA staff. In addition, the lease would provide VA with flexibility should Veterans' demand for outpatient services or Veteran demographics shift in the future. For these reasons, this option is the preferred alternative.

Alternative 2 - New Construction
This alternative proposes for VA to acquire land and construct a new, approximately 61,070 gross square foot (GSF) (equivalent to approximately 45,237 NUSF) Outpatient Clinic in the vicinity of Lawrence, IN, including 350 parking spaces. The new construction alternative would address space and utilization gaps in the same manner as the lease alternative. However, a permanent VA-owned facility limits the ability to relocate services in the future based on changes in Veteran's demographics. In addition, new construction would require a longer implementation timeline for this project. Therefore, this is not the preferred alternative.

Alternative 3 - Renovation
This alternative proposes to renovate a vacant or underutilized VA-owned facility for use as an Outpatient Clinic. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed lease with a floor plan able to accommodate the requirements proposed in this project. As part of the SCIP process, the Richard L. Roudebush VAMC continued to show a significant space gap (deficit) for this catchment area, which would not be resolved with this renovation option. In addition, local VHA planners have confirmed that there are no existing facilities that are suitable for renovation that fit the project requirements. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 4 - Contract Out
This alternative assumes that all Primary Care, Mental Health and Specialty Care services proposed in this project would be contracted out to fee-basis providers in the Lawrence community. There may not be sufficient, qualified private health care providers in the Lawrence area to absorb the current and projected Veteran workload. In addition, this alternative may be more costly and could result in a loss of quality and control over Veteran's health care. Therefore, this alternative is not optimal and is the least preferred.

Alternative 5 - Acquisition of an Existing Facility through Purchase
This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and able to accommodate all project requirements in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran's demographics. In addition, it would require a longer implementation timeline than the lease alternative. High- level market research and interviews with local VHA planners have indicated that a suitable facility for possible acquisition and subsequent renovation does not exist in the delineated market area of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6 - Collaboration with DoD for a Joint Lease Project
This alternative proposes to lease a new shared facility with the Department of Defense (DoD) as a sub-lessee. This alternative would address all project requirements in the same manner as the lease alternative. However, according to local VHA planners and VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no facility-sharing opportunities in the vicinity of the proposed project. In addition, the

nearest DoD clinical location, at Wright-Patterson Air Force Base in Ohio, is approximately 123 miles away. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquistion[1]	Ancillary Services[2]	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE	Net Present Value
Status Quo	$0	$891,976	$0	$891,976	90	N/A	N/A
Lease	$14,664	$898,720	$7,259	$920,643	109	19	$(28,667)
New Construction	$63,692	$891,726	$7,259	$962,677	109	19	$(50,138)
Renovation	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Contract Out	$13,439	$1,135,738	$0	$1,149,178	17	(73)	$(257,202)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

[1]This is the total estimated cost for construction/renovation projects or medical and other related alterations (lump sum payment) for leases, in discounted dollars.
[2]This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template).

VI. Analysis of Benefits

The preferred alternative, New Lease, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo does not address any of the existing gaps; New Construction would result in a longer timeline to meet the same demands within this lease; Contract Out may result in a lack of qualified private healthcare providers; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. The New Lease alternative, with total life cycle costs of approximately $920.6 million and a net present value of approximately -$28.7 million, would offer the most cost-effective and flexible alternative that can support VA's strategic goals and objectives and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable, accessible care to Veterans.

The proposed lease would allow the Department to open a new facility in a timely and efficient manner and provide Veterans in the Lawrence area better access to high-quality, reliable health care. A new lease would also provide the Department future flexibility. Based on changes in Veteran demographics, workload patterns, and emergent health care delivery practices, a flexible lease alternative would allow the Department to re-size, replace, or exit the proposed clinic. With the projected changes in the enrollee base, a flexible lease alternative would allow VA to scale real property assets to adapt to changes without committing the Department to long-term obligations.

The current Primary Care, Mental Health, Specialty Care, Imaging, and Pharmacy spaces at the Richard L. Roudebush VAMC are inadequate and undersized for the current and projected Veterans workload demand for services. Further, inadequacy of the current space does not allow for the full implementation of the PACT model. This project addresses space and utilization gaps and would enhance Veteran's health care services in the VISN 10 Indiana market. As workload for Ambulatory Procedures, Ambulatory Services, and Mental Health Services is projected to increase over the next 20 years, this project is essential to ensure that

Veterans are able to access these services in a timely manner. Being housed in a right-sized PACT-designed, location of care would allow better optimized VA care delivery, increased team coordination, improved workflows, and improved recruitment and retention for both Veterans and VA staff.

The proposed lease aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
   - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner
2. Excellent Customer Service and Highly Reliable and Integrated Care
   - VA has collaborative, high-performing and integrated delivery networks that enhance Veteran well-being and independence
   - VA ensures at-risk and underserved Veterans receive what they need to eliminate Veteran suicide, homelessness, and poverty
3. Improved Trust, Accountability, and Transparency
   - VA is always transparent to enhance Veterans' choices, to maintain trust, and to be openly accountable
4. Transform Business Operations
   - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change 2017-2037
Veteran Population	301,184	269,382	240,879	193,031	-35.9%
Enrollees	137,967	140,819	138,002	123,631	-10.4%

*Data reflects the VISN 10, Indiana market.

VIII. Workload*

	2017	2022	2027	2037	Change 2017-2037
Ambulatory Services	1,646,851	2,057,549	2,324,134	2,506,438	52.2%
Ambulatory Procedures	58,378	79,721	91,230	99,707	70.8%
Mental Health Stops	73,245	79,150	70,974	57,140	-22.0%
Mental Health Services	186,334	246,150	291,368	346,994	86.2%

*Data reflects workload for the VISN 10, Indiana market, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule

Award Lease	24 months after authorization
Complete Construction	26 months after lease award
Activation/Occupancy	4 months after construction

X. Project Cost Summary of the Chosen Option

Estimated Annual Rent	$1,435,000
Estimated Rental Rate[1]	$31.72/NUSF
Proposed Lease Authority	Up to 20 years
Net Usable Square Feet	45,237
Parking Spaces	350
Scoring[2]	Operating Lease
Medical and Other Related Alterations (Lump Sum Payment)[3]	$7,691,000

[1]This estimate may be escalated by 2.0 percent annually to the effective date of the lease to account for inflation. The proposed rental rate is unserviced (taxes, insurance, management, and maintenance and repair reserves included); however, the lease contract may include operating expenses paid by the lessor. VA will conduct a competitive procurement and negotiate with offerors to ensure that lease award is made in the best interest of the Government.
[2]Scoring detail provided in supplemental materials.
[3]Represents an estimated lump sum payment to the lessor for the purchase and installation of build-out requirements not included in the annual rent. Actual lump sum amount may vary based on offers received.

XI. Additional GSA Information

Lease Type:	New
Current NUSF:	N/A
Proposed NUSF[1]:	45,237 (Approx. 54,284 ABOA SF)
Expansion/Reduction NUSF:	45,237
Current NUSF/Person:	Not applicable, clinical space
Proposed NUSF/Person:	Not applicable, clinical space
Proposed Maximum Lease Term:	20 Years
Expiration Dates of Current Leases[2]:	N/A

Delineated Area:

- North: East 96th Street at Allisonville Road to East 96th Street at Fall Creek Road to Fall Creek Road at Carroll Road
- East: Carroll Road at Fall Creek Road to Carroll Road at Route 36 to Route 36 at East 56th Street
- South: East 56th Street at Allisonville Road to East 56th Street at Route 36
- West: Allisonville Road at East 96th Street to Allisonville Road at East 56th Street

Number of Official Parking Spaces[3]:	350
Scoring:	64.46%
Proposed Rental Rate:	$31.72
Proposed Total Annual Cost:	$1,435,000
Current Total Annual Cost:	N/A

[1]As VA continues the modernization of its leasing program, the intent is for all acquisitions utilizing the Request for Lease Proposals (RLP) method to use a square footage metric better aligned with industry standards. The ABOA SF estimate will be finalized during pre-design.
[2]VA will coordinate with GSA to execute such interim leasing actions as are necessary to ensure continued housing of VA services prior to the effective date of the new lease.
[3]VA may pursue structured parking, instead of surface parking, during lease execution depending on land parcel availability.

VA routinely evaluates and revises its leasing process to ensure it is grounded in private-sector real estate best practices for healthcare delivery, responsive to the emerging demands of the Veteran population, and fully aligned with federal budget processes. VA also works closely with the General Services Administration to ensure it has the latest government- wide guidance, tools, and procedures in place.

Additionally, VA may change the delineated area for this project, keeping in mind speed to market, project costs and potential existing inventory as well as Veteran demographics and maintaining sufficient competition.

Outpatient Clinic Lease
in Support of the Tennessee Valley Healthcare System

This proposal provides for a replacement Outpatient Clinic lease in the vicinity of Nashville, TN, to relocate and expand services currently offered at the existing Charlotte Avenue Outpatient Clinic and the Nashville Veterans Affairs Medical Center (VAMC) in support of the Tennessee Valley Healthcare System (HCS) in Nashville, TN.

I. Budget Authority

Lease Authorization	2021 Request	2021 Authorization Request	Unserviced Annual Rent
Up to 20 years	$34,205,000	$34,205,000	$7,470,000

II. Priority Score: FY 2021 – 0.4596

III. Description of Project:
This project proposes to lease an approximately 157,260 net usable square foot (NUSF) replacement Outpatient Clinic in the vicinity of Nashville, TN, including 1,100 parking spaces. The new facility would expand on care currently provided at the existing Charlotte Avenue Outpatient Clinic lease and allow for decompression at the Nashville VAMC by relocating certain services to the new lease. The new lease would allow VA to enhance outpatient services by closing space and utilization gaps identified in the Strategic Capital Investment Planning (SCIP) process. The new lease would also allow for the full implementation of the Patient Aligned Care Team (PACT) model of care delivery, improving operational efficiencies and the Veteran experience. The newly leased right-sized, state-of-the-art, energy-efficient health care facility would provide Primary Care, Mental Health, certain Specialty Care, and Ancillary services to Veterans in the Nashville area.

IV. Alternatives to Lease Considered:
Status Quo
The Status Quo would continue to provide Primary Care, Mental Health, certain Specialty Care, and Ancillary services to Veterans at the existing Charlotte Avenue Outpatient Clinic and the Nashville VAMC. The existing facilities do not have an adequate amount of available, suitable space to properly implement the PACT model, hindering the optimized delivery of modern healthcare at the facility. Continuing to provide healthcare services in these under-sized, non-PACT settings would not improve operational efficiencies. The Status Quo alternative also does not close the space and utilization gaps identified in the SCIP process. For these reasons, the status quo alternative is not preferred.

Alternative 1 - New Lease (Preferred Alternative)
This alternative proposes to lease an approximately 157,260 NUSF replacement Outpatient Clinic in the vicinity of Nashville, TN, including 1,100 parking spaces. The lease would replace the Charlotte Avenue Outpatient Clinic lease to accommodate increasing workload and decompress the under-sized outpatient clinic spaces at the Nashville VAMC. Fully implementing the PACT model at a single right-sized point of care would allow optimized care delivery, improved Veteran experience, increased team coordination, improved

workflows, and better recruitment and retention for VA staff. The new lease would provide care in a modern, efficient facility, with increased operational efficiencies and sufficient space for outpatient services to address the current and projected space and utilization gaps identified in the SCIP process. In addition, the lease would provide VA with flexibility should Veterans' demand for outpatient services or Veteran demographics shift in the future. For these reasons, this option is the preferred alternative.

Alternative 2 - New Construction
This alternative proposes for VA to acquire land and construct a new, approximately 212,301 gross square foot (GSF) (equivalent to approximately 157,260 NUSF) Outpatient Clinic in the vicinity of Nashville, TN, including 1,100 parking spaces. The New Construction alternative would address space and utilization gaps in the same manner as the lease alternative. However, new construction would require a longer implementation timeline for this project. Therefore, this is not the preferred alternative.

Alternative 3 - Renovation
This alternative proposes to renovate a vacant or underutilized VA-owned facility for use as an outpatient clinic. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed lease with a floor plan able to accommodate the requirements proposed in this project. In addition, as part of the SCIP process, VA identified an overall space gap (deficit) for this market area that would not be resolved through renovating space. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 4 - Contract Out
This alternative assumes that all Primary Care, Mental Health, certain Specialty Care, and Ancillary services proposed in this project would be contracted out to fee-basis providers in the Nashville area. There may not be sufficient, qualified private health care providers in the Nashville area to absorb the current and projected Veteran's workload. In addition, this alternative may be more costly and could result in a loss of quality and control over Veteran's health care. Therefore, this alternative is not optimal and is the least preferred.

Alternative 5 - Acquisition of an Existing Facility through Purchase
This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and able to accommodate all project requirements in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran's demographics. High-level market research and interviews with local VA planners have indicated that a suitable facility for purchase and subsequent renovation does not exist in the delineated market area of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6 - Collaboration with DoD for a Joint Lease Project
This alternative proposes to lease a new shared facility with the Department of Defense (DoD) as a sub-lessee. This alternative would address all project requirements in the same manner as the lease alternative. However, according to local VHA planners and VHA's

Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no facility sharing opportunities in the local community. In addition, the nearest DoD clinical location at Fort Campbell near Hopkinsville, KY and Clarksville, TN is approximately 49 miles away. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquistion[1]	Ancillary Services[2]	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE	Net Present Value
Status Quo	$7,279	$2,090,137	$0	$2,097,416	385	N/A	N/A
Lease	$50,978	$1,999,065	$33,722	$2,083,764	430	45	$13,652
New Construction	$262,223	$1,884,510	$33,722	$2,180,454	430	45	$(896)
Renovation	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Contract Out	$40,637	$2,605,468	$0	$2,646,105	100	(285)	$(548,690)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

[1]This is the total estimated cost for construction/renovation projects or medical and other related alterations (lump sum payment) for leases, in discounted dollars.
[2]This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template).

VI. Analysis of Benefits

The preferred alternative, New Lease, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo does not address any of the existing gaps; New Construction would result in a longer timeline to meet the demand within this lease; Contract Out could result in a loss of quality and control over Veteran health care; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. The New Lease alternative, with total life cycle costs of approximately $2.08 billion and a net present value of approximately $13.7 million, offers the most cost-effective and flexible alternative that can support VA's strategic goals and objectives and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable, accessible care to Veterans.

The proposed lease would allow the Department to open a new facility in a timely and efficient manner and provide Veterans in the Nashville area better access to high-quality, reliable health care. A new lease would also provide the Department future flexibility. Based on changes in Veteran's demographics, workload patterns, and emergent health care delivery practices, a flexible lease alternative would allow the Department to re-size, replace, or exit the proposed clinic. With the enrollee base projected to increase by approximately 8.2% over the next 20 years, a flexible lease alternative would allow VA to scale real property assets to adapt to changes without committing the Department to long-term obligations. The current Primary Care, Mental Health, Specialty Care, and Ancillary spaces at the Nashville CBOC lease are inadequate and undersized for the current and projected Veteran workload demand for services. Further, inadequacy of the current space does not allow for the full implementation of the PACT model. This project addresses space and utilization gaps and would enhance Veteran's health care services in the Nashville market. As workload for Ambulatory Services, Ambulatory Procedures, and Mental Health Services is projected to

increase over the next 20 years, this project is essential to ensure that Veterans are able to access these services in a timely manner. Being housed in a right-sized, PACT- designed, and more accessible location of care would allow better optimized VA care delivery, increased team coordination, improved workflows, and improved recruitment and retention for both Veterans and VA staff.

The proposed lease aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
   - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner
2. Excellent Customer Service and Highly Reliable and Integrated Care
   - VA has collaborative, high-performing and integrated delivery networks that enhance Veteran well-being and independence
3. Improved Trust, Accountability, and Transparency
   - VA is always transparent to enhance Veterans' choices, to maintain trust, and to be openly accountable for its actions
4. Transform Business Operations
   - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change 2017-2037
Veteran Population	293,045	283,196	270,558	242,840	-17.1%
Enrollees	131,345	145,006	152,120	151,702	15.5%

*Data reflects the VISN 9, Central market.

VIII. Workload*

	2017	2022	2027	2037	Change 2017-2037
Ambulatory Services	1,456,101	1,957,126	2,313,885	2,768,953	90.2%
Ambulatory Procedures	86,024	109,211	125,695	145,909	69.6%
Mental Health Stops	48,474	53,285	50,951	45,128	-6.9%
Mental Health Services	204,633	275,229	341,843	442,572	116.3%

*Data reflects workload for the VISN 9, Central market, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule*

Award Lease	24 months after authorization
Complete Construction	32 months after lease award
Activation/Occupancy	4 months after construction

*For leases with an annual unserviced rent exceeding the GSA prospectus threshold (currently $3.095M), the schedule above is dependent on passage of a Transportation and Infrastructure committee resolution.

X. Project Cost Summary of the Chosen Option

Estimated Annual Rent	$7,470,000
Estimated Rental Rate[1]	$47.50/NUSF
Proposed Lease Authority	Up to 20 years
Net Usable Square Feet	157,260
Parking Spaces	1,100
Scoring[2]	Operating Lease
Medical and Other Related Alterations (Lump Sum Payment)[3]	$26,735,000

[1]This estimate may be escalated by 2.0 percent annually to the effective date of the lease to account for inflation. The proposed rental rate is unserviced (taxes, insurance, management, and maintenance and repair reserves included); however, the lease contract may include operating expenses paid by the lessor. VA will conduct a competitive procurement and negotiate with offerors to ensure that lease award is made in the best interest of the Government.

[2]Scoring detail provided in supplemental materials.

[3]Represents an estimated lump sum payment to the lessor for the purchase and installation of build-out requirements not included in the annual rent. Actual lump sum amount may vary based on offers received.

XI. Additional GSA Information

Lease Type:	Replacement
Current NUSF:	17,857
Proposed NUSF[1]:	157,260 (Approx. 188,712 ABOA SF)
Expansion/Reduction NUSF:	139,403
Current NUSF/Person:	Not applicable, clinical space
Proposed NUSF/Person:	Not applicable, clinical space
Proposed Maximum Lease Term:	20 Years
Expiration Dates of Current Leases[2]:	7,990 NUSF – 3/31/2025 4,975 NUSF – 5/1/2027 4,892 NUSF – 9/30/2029
Delineated Area: • North: I-65 and the Cumberland River • East: I-24 and Highway 70 • South: I-440 and I-65 • West: I-440 and I-40	
Number of Official Parking Spaces[3]:	1,100
Scoring:	85.15%
Proposed Rental Rate:	$47.50
Proposed Total Annual Cost:	$7,470,000
Current Total Annual Cost:	$660,666

[1]As VA continues the modernization of its leasing program, the intent is for all acquisitions utilizing the Request for Lease Proposals (RLP) method to use a square footage metric better aligned with industry standards. The ABOA SF estimate will be finalized during pre-design.
[2]VA will coordinate with GSA to execute such interim leasing actions as are necessary to ensure continued housing of VA services prior to the effective date of the new lease.
[3]VA may pursue structured parking, instead of surface parking, during lease execution depending on land parcel availability.

VA routinely evaluates and revises its leasing process to ensure it is grounded in private-sector real estate best practices for healthcare delivery, responsive to the emerging demands of the Veteran population, and fully aligned with federal budget processes. VA also works closely with the General Services Administration to ensure it has the latest government- wide guidance, tools, and procedures in place.

Additionally, VA may change the delineated area for this project, keeping in mind speed to market, project costs and potential existing inventory as well as Veteran demographics and maintaining sufficient competition.

Outpatient Clinic Lease
in Support of the VA North Texas Health Care System

This proposal provides for a replacement Outpatient Clinic lease in the vicinity of Plano, TX, to expand services currently offered at the existing Plano Outpatient Clinic in support of the VA North Texas Health Care System in Dallas, TX.

I. Budget Authority

Lease Authorization	2021 Request	2021 Authorization Request	Unserviced Annual Rent
Up to 20 years	$21,172,000	$21,172,000	$5,061,000

II. Priority Score: FY 2019 – 0.2967

III. Description of Project:
This project proposes to lease an approximately 94,769 net usable square foot (NUSF) replacement Outpatient Clinic in the vicinity of Plano, TX, including 650 parking spaces. The new facility would expand on care currently provided at the existing Plano Outpatient Clinic and alleviate access issues for Veterans residing north of the Dallas and Plano areas who obtain services daily from the Outpatient Clinic or the Dallas Campus of the VA North Texas Health Care System, which are over 20 miles away. This new lease would allow VA to enhance outpatient services by closing space and utilization gaps identified in the Strategic Capital Investment Planning (SCIP) process. The new lease would include Primary Care, Mental Health, Specialty Care, and Ancillary services in a new right-sized, state-of-the-art, energy efficient health care facility in the Plano area.

IV. Alternatives to Lease Considered:
Status Quo
The Status Quo would continue to provide Primary Care and certain Specialty Care services to Veterans in the vicinity of the Plano area at the Dallas Campus of the VA North Texas Health Care System and the Plano Outpatient Clinic. The existing leased facility does not have an adequate amount of available, suitable space to properly implement the Patient Aligned Care Team (PACT) model, hindering the optimized delivery of modern healthcare at the facility. In addition, certain specialty services are only available at the parent facility in Dallas, requiring Veterans to travel over 25 miles away for necessary care. The Status Quo alternative also does not close the space and utilization gaps identified in the SCIP process. For these reasons, the status quo alternative is not preferred.

Alternative 1 - New Lease (Preferred Alternative)
This alternative proposes to lease an approximately 94,769 NUSF replacement Outpatient Clinic in the vicinity of Plano, TX, including 650 parking spaces. The lease would create new space to accommodate increasing demand in the Plano and greater North Dallas area. The lease would close space and utilization gaps identified in the SCIP process. With this new space, VA would be able to provide needed care and improve Veterans' access to VA care and services in this section of the VISN 17 North Texas market. The leased space would also be designed with the latest PACT model standards, ensuring optimized care delivery,

increased team coordination, and improved workflows for both Veterans and VA staff. In addition, the lease would provide VA with flexibility should Veterans' demand for outpatient services or Veteran demographics shift in the future. For these reasons, this is the preferred alternative.

Alternative 2 - New Construction
This alternative proposes for VA to acquire land and construct a new, approximately 127,938 gross square foot (GSF) (equivalent to approximately 94,769 NUSF) Outpatient Clinic in the vicinity of Plano, TX, including 650 parking spaces. The New Construction alternative would address space and utilization gaps in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran demographics. In addition, new construction would require a longer implementation timeline for this project. Therefore, this is not the preferred alternative.

Alternative 3 - Renovation
This alternative proposes to renovate a vacant or underutilized VA-owned facility for use as an outpatient clinic. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed lease with a floor plan able to accommodate the requirements proposed in this project. In addition, as part of the 2021 SCIP process, VA identified an overall space gap (deficit) for this market area that would not be resolved through renovating space. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 4 - Contract Out
This alternative assumes that all Primary Care and Specialty Care services proposed in this project would be contracted out to fee-basis providers in the Plano area. There may not be sufficient, qualified private health care providers in the Plano area to absorb the current and projected Veteran workload. In addition, this alternative may be costly and could result in a loss of quality and control over Veteran's health care. Therefore, this alternative is not optimal and is the least preferred.

Alternative 5 - Acquisition of an Existing Facility through Purchase
This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and able to accommodate all project requirements in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran demographics. High-level market research and interviews with local VA planners have indicated that a suitable facility for purchase and subsequent renovation does not exist in the delineated market area of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6 - Collaboration with DoD for a Joint Lease Project
This alternative proposes to lease a new shared facility with the Department of Defense (DoD) as a sub-lessee. This alternative would address all project requirements in the same manner as the lease alternative. However, according to local VA planners and VHA's Office

of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no facility-sharing opportunities in the local community. In addition, the nearest DoD clinical location, Naval Branch Health Clinic in Fort Worth, TX, is approximately 62 miles away. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquistion[1]	Ancillary Services[2]	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE	Net Present Value
Status Quo	$0	$2,085,160	$0	$2,085,160	45	N/A	N/A
Lease	$30,720	$2,141,828	$25,189	$2,197,737	150	105	$(112,577)
New Construction	$138,631	$2,058,803	$25,189	$2,222,622	150	105	$(90,831)
Renovation	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Contract Out	$19,811	$2,788,257	$0	$2,808,068	25	(20)	$(722,908)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

[1]This is the total estimated cost for construction/renovation projects or medical and other related alterations (lump sum payment) for leases, in discounted dollars.
[2]This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template).

VI. Analysis of Benefits

The preferred alternative, New Lease, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo does not address any of the existing gaps; New Construction would result in a longer timeline to meet the demands within this lease; Contract Out could result in a loss of quality control over Veteran's health care; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. The New Lease alternative, with total life cycle costs of approximately $2.20 billion and a net present value of approximately -$112.6 million, offers the most flexible alternative that can support VA's strategic goals and objectives and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable, accessible care to Veterans.

The proposed lease would allow the Department to open a new facility in a timely and efficient manner and provide Veterans in the Plano area better access to high-quality, reliable health care. A new lease would also provide the Department future flexibility. Based on changes in Veteran demographics, workload patterns, and emergent health care delivery practices, a flexible lease alternative would allow VA to re-size, replace, or exit the proposed clinic. With the enrollee base in the North Texas market of VISN 17 projected to increase by approximately 9% over the next 20 years, a flexible lease alternative would allow VA to scale real property assets to adapt to changes without committing the Department to long-term obligations.

The current Primary Care and Specialty Care spaces at the existing Plano Outpatient Clinic are inadequate and undersized for the current and projected Veteran workload demand for services. Further, inadequacy of the current space does not allow for the full implementation of PACT model. This project addresses space and utilization gaps and would enhance

Veteran health care services in the Plano area. As workload for Ambulatory Services, Ambulatory Procedures, and Mental Health Stops is projected to increase over the next 20 years, this project is essential to ensure that Veterans are able to access these services in a timely manner. Being housed in a right- sized, PACT-designed, and more accessible location would allow better optimized VA care delivery, increased team coordination, improved workflows, and improved recruitment and retention for both Veterans and VA staff.

The proposed lease aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
   - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner
2. Excellent Customer Service and Highly Reliable and Integrated Care
   - VA has collaborative, high-performing and integrated delivery networks that enhance Veteran well-being and independence
3. Transform Business Operations
   - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change 2017-2037
Veteran Population	422,701	401,926	379,969	338,722	-19.9%
Enrollees	184,147	199,180	205,110	203,871	10.7%

*Data reflects the VISN 17, North Texas market.

VIII. Workload*

	2017	2022	2027	2037	Change 2017-2037
Ambulatory Services	1,895,204	2,510,126	2,922,325	3,477,417	83.5%
Ambulatory Procedures	87,614	116,446	135,979	162,614	85.6%
Mental Health Stops	178,652	198,604	186,898	164,305	-8.0%
Mental Health Services	271,991	361,141	439,086	570,767	109.8%

*Data reflects workload for the VISN 17, North Texas market, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule*

Award Lease	24 months after authorization
Complete Construction	26 months after lease award
Activation/Occupancy	4 months after construction

*For leases with an annual unserviced rent exceeding the GSA prospectus threshold (currently $3.095M), the schedule above is dependent on passage of a Transportation and Infrastructure committee resolution.

X. Project Cost Summary of the Chosen Option

Estimated Annual Rent	$5,061,000
Estimated Rental Rate[1]	$53.40/NUSF
Proposed Lease Authority	Up to 20 years
Net Usable Square Feet	94,769
Parking Spaces	650
Scoring[2]	Operating Lease
Medical and Other Related Alterations (Lump Sum Payment)[3]	$16,111,000

[1]This estimate may be escalated by 2.0 percent annually to the effective date of the lease to account for inflation. The proposed rental rate is unserviced (taxes, insurance, management, and maintenance and repair reserves included); however, the lease contract may include operating expenses paid by the lessor. VA will conduct a competitive procurement and negotiate with offerors to ensure that lease award is made in the best interest of the Government.
[2]Scoring detail provided in supplemental materials.
[3]Represents an estimated lump sum payment to the lessor for the purchase and installation of build-out requirements not included in the annual rent. Actual lump sum amount may vary based on offers received.

XI. Additional GSA Information

Lease Type:	Replacement
Current NUSF:	9,542
Proposed NUSF[1]:	94,769 (Approx. 113,723 ABOA SF)
Expansion/Reduction NUSF:	85,227
Current NUSF/Person:	Not applicable, clinical space
Proposed NUSF/Person:	Not applicable, clinical space
Proposed Maximum Lease Term:	20 Years
Expiration Dates of Current Leases[2]:	9,542 NUSF – 7/14/2026
Delineated Area: • North: Prosper Trail • East: Dallas North Tollway • South: Rockhill Parkway • West: Highway 26	
Number of Official Parking Spaces[3]:	650
Scoring:	79.05%
Proposed Rental Rate:	$53.40
Proposed Total Annual Cost:	$5,061,000
Current Total Annual Cost:	$387,856

[1]As VA continues the modernization of its leasing program, the intent is for all acquisitions utilizing the Request for Lease Proposals (RLP) method to use a square footage metric better aligned with industry standards. The ABOA SF estimate will be finalized during pre-design.
[2]VA will coordinate with GSA to execute such interim leasing actions as are necessary to ensure continued housing of VA services prior to the effective date of the new lease.
[3]VA may pursue structured parking, instead of surface parking, during lease execution depending on land parcel availability.

VA routinely evaluates and revises its leasing process to ensure it is grounded in private-sector real estate best practices for healthcare delivery, responsive to the emerging demands of the Veteran population, and fully aligned with federal budget processes. VA also works closely with the General Services Administration to ensure it has the latest government- wide guidance, tools, and procedures in place.

Additionally, VA may change the delineated area for this project, keeping in mind speed to market, project costs and potential existing inventory as well as Veteran demographics and maintaining sufficient competition.

Outpatient Clinic Lease
in Support of the Washington, DC Veterans Affairs Medical Center

This proposal provides for a replacement Outpatient Clinic lease in the vicinity of Prince George's County, MD, to expand services currently offered at the existing Southern Prince George's County Community Based Outpatient Clinics (CBOC). This lease will also consolidate the services offered in the Southeast DC and the former Greenbelt CBOCs, in support of the Veterans Affairs Medical Center (VAMC) in Washington, DC.

I. Budget Authority

Lease Authorization	2021 Request	2021 Authorization Request	Unserviced Annual Rent
Up to 20 years	$18,159,000	$18,159,000	$3,689,000

II. Priority Score: FY 2020 – 0.3779

III. Description of Project:
This project proposes to lease an approximately 85,116 net usable square foot (NUSF) replacement Outpatient Clinic in the vicinity of Prince George's County, MD, including 600 parking spaces. The new facility would expand on care currently provided at the existing Southern Prince George's County CBOC, as well as accommodating increasing workload. This lease will also consolidate the services offered at the Southeast DC CBOC and the workload previously serviced at the former Greenbelt CBOC. The accommodation of the former Greenbelt CBOC workload at the VAMC has further constrained the medical center's capacity for services. This new lease will relieve strain at the VAMC and allow patients to receive care closer to home. The new lease would allow VA to enhance outpatient services by closing space and utilization gaps identified in the Strategic Capital Investment Planning (SCIP) process. The new lease would expand current Primary Care and would allow for the full implementation of the Patient-Aligned Care Team (PACT) model of care delivery at a single point of care, improving operational efficiencies and the Veteran experience. The new lease would also improve Veteran's accessibility to VA care and services in the greater Prince George's County area, increasing overall patient satisfaction. The newly leased right-sized, state-of-the-art, energy-efficient health care facility would provide Primary Care, Mental Health, certain Specialty Care, and Ancillary services to Veterans in the Prince George's County area.

IV. Alternatives to Lease Considered:
Status Quo
The Status Quo would continue to provide Primary Care, Mental Health, certain Specialty Care, and Ancillary services to Veterans at the existing Southern Prince George's County Outpatient Clinic. The existing facility does not have an adequate amount of available, suitable space to properly implement the PACT model, hindering the optimized delivery of modern healthcare at the facility. Continuing to provide healthcare services in a non-PACT setting would not improve operational efficiencies. The Status Quo alternative also does not close the space and utilization gaps identified in the SCIP process. For these reasons, the status quo alternative is not preferred.

Alternative 1 - New Lease (Preferred Alternative)
This alternative proposes to lease an approximately 85,116 NUSF replacement Outpatient Clinic in the vicinity of Prince George's County, MD, including 600 parking spaces. The lease would replace the existing Southern Prince George's County CBOC lease to accommodate increasing workload. This lease will also consolidate the services offered at the Southeast DC CBOC and the workload previously serviced at the former Greenbelt CBOC. The accommodation of the former Greenbelt CBOC workload at the VAMC has further constrained the medical center's capacity for services. This new lease will relieve strain at the VAMC and allow patients to receive care closer to home. Fully implementing the PACT model would allow optimized care delivery, improved Veteran's experience, increased team coordination, improved workflows, and better recruitment and retention for VA staff. This lease would provide care in a modern, efficient facility, with increased operational efficiencies and sufficient space for outpatient services to addresses the current and projected space and utilization gaps identified in the SCIP process. In addition, the lease would provide VA with flexibility should Veteran's demand for outpatient services or Veteran's demographics shift in the future. For these reasons, this is the preferred alternative.

Alternative 2 - New Construction
This alternative proposes for VA to acquire land and construct a new, approximately 114,907 gross square foot (GSF) (equivalent to approximately 85,116 NUSF) Outpatient Clinic in the vicinity of Prince George's County, MD, including 600 parking spaces. The New Construction alternative would address space and utilization gaps in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran's demographics. In addition, new construction would require a longer implementation timeline for this project. Therefore, this is not the preferred alternative.

Alternative 3 - Renovation
This alternative proposes to renovate a vacant or underutilized VA-owned facility for use as an outpatient clinic. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed lease with a floor plan able to accommodate the requirements proposed in this project. In addition, as part of the SCIP process, VA identified an overall space gap (deficit) for this market that would not be resolved through renovating space. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 4 - Contract Out
This alternative assumes that all Primary Care, Mental Health, certain Specialty Care, and Ancillary services proposed in this project would be contracted out to fee-basis providers in the Prince George's County area. There may not be sufficient, qualified private health care providers in the Prince George's County area to absorb the current and projected Veteran workload. In addition, this alternative may be more costly and could result in a loss of quality and control over Veteran's health care. Therefore, this alternative is not optimal and is the least preferred.

Alternative 5 - Acquisition of an Existing Facility through Purchase
This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and able to accommodate all project requirements in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran's demographics. High-level market research and interviews with local VHA planners have indicated that a suitable facility for purchase and subsequent renovation does not exist in the delineated market area of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6 - Collaboration with DoD for a Joint Lease Project
This alternative proposes to lease a new shared facility with the Department of Defense (DoD) as a sub-lessee. This alternative would address all project requirements in the same manner as the lease alternative. However, according to local VA planners and VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no facility sharing opportunities in the local community. In addition, the nearest DoD clinical location, Andrews Air Force Base in Prince George's County, MD, is not an optimal candidate for shared space due to heightened security on base. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquistion[1]	Ancillary Services[2]	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE	Net Present Value
Status Quo	$0	$1,693,587	$0	$1,693,587	31	N/A	N/A
Lease	$27,591	$1,777,835	$19,893	$1,825,319	80	49	$(131,732)
New Construction	$138,553	$1,755,430	$19,893	$1,913,876	90	59	$(174,828)
Renovation	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Contract Out	$16,257	$2,240,422	$0	$2,256,678	13	(18)	$(563,092)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

[1]This is the total estimated cost for construction/renovation projects or medical and other related alterations (lump sum payment) for leases, in discounted dollars.
[2]This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template).

VI. Analysis of Benefits
The preferred alternative, New Lease, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo does not address any of the existing gaps; New Construction would result in a longer timeline to meet the demand within this lease; Contract Out could result in a loss of quality and control over Veteran's health care; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. The New Lease alternative, with total life cycle costs of approximately $1.83 billion and a net present value of approximately $131.7 million, would offer the most cost-effective and flexible alternative, and would fully support VA's strategic goals and objectives and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable, accessible care to Veterans.

The proposed lease would allow the Department to open a new facility in a timely and efficient manner and provide Veterans in the Prince George's County area better access to high-quality, reliable health care. A new lease would also provide the Department future flexibility. Based on changes in Veteran's demographics, workload patterns, and emergent health care delivery practices, a flexible lease alternative would allow the Department to re-size, replace, or exit the proposed clinic. With the enrollee base projected to increase 9.87% over the next 20 years; a flexible lease alternative would allow VA to scale real property assets to adapt to changes without committing the Department to long-term obligations.

The current Primary Care, Mental Health, Specialty Care, and Ancillary spaces at the Southern Prince George's County CBOC lease are inadequate and undersized for the current and projected Veteran workload demand for services. Further, inadequacy of the current space does not allow for the full implementation of the PACT model. This project addresses space and utilization gaps and would enhance Veteran health care services in the Prince George's County market. As workload for Ambulatory Services and Procedures and Mental Health Services is projected to increase over the next 20 years, this project is essential to ensure that Veterans are able to access these services in a timely manner. Being housed in a right-sized, PACT-designed, and more accessible single location of care would allow better optimized VA care delivery, increased satisfaction for Veterans, increased team coordination, improved workflows, and improved recruitment and retention for VA staff.

The proposed lease aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
   - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner
2. Excellent Customer Service and Highly Reliable and Integrated Care
   - VA has collaborative, high-performing and integrated delivery networks that enhance Veteran well-being and independence
3. Improved Trust, Accountability, and Transparency
   - VA is always transparent to enhance Veterans' choices, to maintain trust, and to be openly accountable for its actions
4. Transform Business Operations
   - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change 2017-2037
Veteran Population	318,653	288,748	264,011	225,504	-29.2%
Enrollees	118,318	128,954	134,047	132,997	12.4%

*Data reflects the VISN 5, Washington DC market.

VIII. Workload*

	2017	2022	2027	2037	Change 2017-2037
Ambulatory Services	859,075	1,137,859	1,361,418	1,646,738	91.7%
Ambulatory Procedures	44,398	60,328	73,501	87,965	98.1%
Mental Health Stops	48,203	60,911	58,737	52,495	8.9%
Mental Health Services	188,928	245,778	288,838	356,912	88.9%

*Data reflects workload for the VISN 5, Washington DC market, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule*

Award Lease	24 months after authorization
Complete Construction	26 months after lease award
Activation/Occupancy	4 months after construction

*For leases with an annual unserviced rent exceeding the GSA prospectus threshold (currently $3.095M), the schedule above is dependent on passage of a Transportation and Infrastructure committee resolution.

X. Project Cost Summary of the Chosen Option

Estimated Annual Rent	$3,689,000
Estimated Rental Rate[1]	$43.33/NUSF
Proposed Lease Authority	Up to 20 years
Net Usable Square Feet	85,116
Parking Spaces	600
Scoring[2]	Operating Lease
Medical and Other Related Alterations (Lump Sum Payment)[3]	$14,470,000

[1]This estimate may be escalated by 2.0 percent annually to the effective date of the lease to account for inflation. The proposed rental rate is unserviced (taxes, insurance, management, and maintenance and repair reserves included); however, the lease contract may include operating expenses paid by the lessor. VA will conduct a competitive procurement and negotiate with offerors to ensure that lease award is made in the best interest of the Government.

[2]Scoring detail provided in supplemental materials.

[3]Represents an estimated lump sum payment to the lessor for the purchase and installation of build-out requirements not included in the annual rent. Actual lump sum amount may vary based on offers received.

XI. Additional GSA Information

Lease Type:	Replacement
Current NUSF:	9,780
Proposed NUSF[1]:	85,116 (Approx. 102,139 ABOA SF)
Expansion/Reduction NUSF:	75,336
Current NUSF/Person:	Not applicable, clinical space
Proposed NUSF/Person:	Not applicable, clinical space
Proposed Maximum Lease Term:	20 Years
Expiration Dates of Current Leases[2]:	8,500 NUSF – 5/31/2020 1,280 NUSF – 9/30/2020
Delineated Area: • North: Route 214 • East: Route 301 • South: Route 373 • West: Route 210 and Maryland/Washington DC Line	
Number of Official Parking Spaces[3]:	600
Scoring:	85.34%
Proposed Rental Rate:	$43.33
Proposed Total Annual Cost:	$3,689,000
Current Total Annual Cost:	$352,246

[1]As VA continues the modernization of its leasing program, the intent is for all acquisitions utilizing the Request for Lease Proposals (RLP) method to use a square footage metric better aligned with industry standards. The ABOA SF estimate will be finalized during pre-design.
[2]VA will coordinate with GSA to execute such interim leasing actions as are necessary to ensure continued housing of VA services prior to the effective date of the new lease.
[3]VA may pursue structured parking, instead of surface parking, during lease execution depending on land parcel availability.

VA routinely evaluates and revises its leasing process to ensure it is grounded in private-sector real estate best practices for healthcare delivery, responsive to the emerging demands of the Veteran population, and fully aligned with federal budget processes. VA also works closely with the General Services Administration to ensure it has the latest government- wide guidance, tools, and procedures in place.

Additionally, VA may change the delineated area for this project, keeping in mind speed to market, project costs and potential existing inventory as well as Veteran demographics and maintaining sufficient competition.

Outpatient Clinic Lease
in Support of the Salt Lake City Veterans Health Care System

This proposal provides for a new Outpatient Clinic lease in the vicinity of Salt Lake City, UT, to relocate and expand services currently offered at the George E. Wahlen VA Medical Center (VAMC) in support of the Veterans Health Care System in Salt Lake City, UT.

I. Budget Authority

Lease Authorization	2021 Request	2021 Authorization Request	Unserviced Annual Rent
Up to 20 years	$18,485,000	$18,485,000	$4,027,000

II. Priority Score: FY 2020 – 0.3796

III. Description of Project:
This project proposes to lease a new, approximately 85,046 net usable square foot (NUSF) Outpatient Clinic in the vicinity of Salt Lake City, UT, including 600 parking spaces. The new facility would decompress the George E. Wahlen/Salt Lake City VAMC by moving Primary Care and Compensation and Pension services off campus. The lease would allow VA to enhance outpatient services by closing space gaps identified in the Strategic Capital Investment Planning (SCIP) process. The new lease would expand the current Primary Care and would allow for the full implementation of the Patient-Aligned Care Team (PACT) model of care delivery, improving operational efficiencies and the Veteran experience. The new lease would also improve Veteran's accessibility to VA care and services in the greater Salt Lake City area, increasing overall patient satisfaction. The newly leased right-sized, state-of-the-art, energy-efficient health care facility would provide Primary Care services and Compensation and Pension examinations to Veterans in the Salt Lake City area.

IV. Alternatives to Lease Considered:
Status Quo
The Status Quo would continue to provide Primary Care services and Compensation & Pension examinations to Veterans at the Salt Lake City VAMC. The existing facility does not have adequate space available to properly implement the PACT model, hindering the optimized delivery of modern healthcare at the facility. Continuing to provide health care services in a space-constrained setting would not improve operational efficiencies. The Status Quo alternative also does not close the space gaps identified in the SCIP process. For these reasons, the status quo alternative is not preferred.

Alternative 1 - New Lease (Preferred Alternative)
This alternative proposes to lease a new, approximately 85,046 NUSF Outpatient Clinic in the vicinity of Salt Lake City, UT, including 600 parking spaces. The lease would relocate Primary Care services from the Salt Lake City VAMC to accommodate increasing workload and to allow for decompression at the medical center. Fully implementing the PACT model would allow optimized care delivery, improved Veteran experience, increased team coordination, improved workflows, and better recruitment and retention for VA staff. The new lease would provide care in a modern, efficient facility, with increased operational

efficiencies and sufficient space for outpatient services to addresses the current and projected space gaps identified in the SCIP process. In addition, the lease would provide VA with flexibility should Veterans' demand for outpatient services or Veteran demographics shift in the future. For these reasons, this is the preferred alternative.

Alternative 2 - New Construction
This alternative proposes for VA to acquire land and construct a new, approximately 114,812 gross square foot (GSF) (equivalent to approximately 85,046 NUSF) Outpatient Clinic in the vicinity of Salt Lake City, UT, including 600 parking spaces. The New Construction alternative would address space gaps in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran's demographics. In addition, new construction would require a longer implementation timeline for this project. Therefore, this is not the preferred alternative.

Alternative 3 - Renovation
This alternative proposes to renovate a vacant or underutilized VA-owned facility for use as an outpatient clinic. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed lease with a floor plan able to accommodate the requirements proposed in this project. In addition, as part of the SCIP process, VA identified a space gap (deficit) for this market that would not be resolved through renovating space. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 4 - Contract Out
This alternative assumes that all Primary Care and Compensation and Pension services proposed in this project would be contracted out to fee-basis providers in the Salt Lake City area. There may not be sufficient, qualified private health care providers in the Salt Lake City area to absorb the current and projected Veteran's workload. In addition, this alternative may be more costly and could result in a loss of quality and control over Veteran's health care. Therefore, this alternative is not optimal and is the least preferred.

Alternative 5 - Acquisition of an Existing Facility through Purchase
This alternative proposes to purchase an existing facility in the local community that is suitable for renovation and able to accommodate all project requirements in the same manner as the lease alternative. However, a permanent VA-owned facility would limit flexibility to relocate services in the future based on changes in Veteran's demographics. High-level market research and interviews with local VHA planners have indicated that a suitable facility for purchase and subsequent renovation does not exist in the delineated market area of the proposed project. Therefore, this is not a viable option and has been excluded from the quantitative analysis below.

Alternative 6 - Collaboration with DoD for a Joint Lease Project
This alternative proposes to lease a new shared facility, with the Department of Defense (DoD) as a sub-lessee. This alternative would address all project requirements in the same manner as the lease alternative. However, according to VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no primary care facility sharing

opportunities in the local community. For this reason, this alternative is not viable and has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquistion[1]	Ancillary Services[2]	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE	Net Present Value
Status Quo	$2,275	$1,433,512	$0	$1,435,787	88	N/A	N/A
Lease	$27,569	$1,522,795	$15,164	$1,565,528	128	40	$(129,741)
New Construction	$128,205	$1,490,058	$15,164	$1,633,427	138	50	$(154,620)
Renovation	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Contract Out	$20,464	$2,168,971	$0	$2,189,435	15	(73)	$(753,648)
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

[1]This is the total estimated cost for construction/renovation projects or medical and other related alterations (lump sum payment) for leases, in discounted dollars.
[2]This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template).

VI. Analysis of Benefits

The preferred alternative, New Lease, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section: Status Quo does not address any of the existing gaps; New Construction would result in a longer timeline to meet the demand within this lease; Contract Out could result in a loss of quality and control over Veteran's health care; and the Renovation, Acquire an Existing Facility, and VA/DoD Collaboration alternatives are not viable. The New Lease alternative, with total life cycle costs of approximately $1.57 billion and a net present value of approximately -$129.7 million, would offer the most cost-effective and flexible alternative, and would fully support VA's strategic goals and objectives and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable, accessible care to Veterans.

The proposed lease would allow the Department to open a new facility in a timely and efficient manner and provide Veterans in the Salt Lake City area better access to high-quality, reliable health care. A new lease would also provide the Department future flexibility. Based on changes in Veteran's demographics, workload patterns, and emergent health care delivery practices, a flexible lease alternative would allow the Department to re-size, replace, or exit the proposed clinic. With the enrollee base in the Salt Lake City market of VISN 19 projected to increase by approximately 3% over the next 20 years, a flexible lease alternative would allow VA to scale real property assets to adapt to changes without committing the Department to long-term obligations.

The current Primary Care and Compensation and Pension spaces at the Salt Lake City VA Medical Center are inadequate and undersized for the current and projected Veteran workload demand for services. Further, inadequacy of the current space does not allow for the full implementation of the PACT model. This project addresses space gaps and would enhance Veteran's health care services in the Salt Lake City market. As workload for Ambulatory Services and Procedures and Mental Health Services is projected to increase over the next 20 years, this project is essential to ensure that Veterans are able to access these

services in a timely manner. Being housed in a right-sized, PACT-designed, and more accessible facility would allow for better optimized VA care delivery, increased satisfaction for Veterans, increased team coordination, improved workflows, and improved recruitment and retention for VA staff.

The proposed lease aligns with the following VA Departmental Strategic Goals:

1. Easy Access and Greater Choice
   - VA understands Veterans' needs throughout their lives to enhance their choices and to improve customer experience
   - VA ensures Veterans are informed of, understand, and can get the benefits, care, and services they earned, in a timely manner
2. Excellent Customer Service and Highly Reliable and Integrated Care
   - VA has collaborative, high-performing and integrated delivery networks that enhance Veteran well-being and independence
3. Improved Trust, Accountability, and Transparency
   - VA is always transparent to enhance Veterans' choices, to maintain trust, and to be openly accountable for its actions
4. Transform Business Operations
   - VA's infrastructure improvements, improved decision-making protocols, and streamlined services enable VA to adapt to changing business environments and Veteran needs

VII. Demographic Data*

	2017	2022	2027	2037	Change 2017-2037
Veteran Population	151,190	141,076	132,106	118,707	-21.5%
Enrollees	67,400	70,241	70,532	68,241	1.2%

*Data reflects the VISN 19, Salt Lake City market.

VIII. Workload*

	2017	2022	2027	2037	Change 2017-2037
Ambulatory Services	762,683	998,586	1,143,450	1,333,894	74.9%
Ambulatory Procedures	44,301	60,173	69,614	83,061	87.5%
Mental Health Stops	34,034	34,957	32,719	29,075	-14.6%
Mental Health Services	108,790	148,154	181,591	238,285	119.0%

*Data reflects workload for the VISN 19, Salt Lake City market, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule*

Award Lease	24 months after authorization
Complete Construction	26 months after lease award
Activation/Occupancy	4 months after construction

*For leases with an annual unserviced rent exceeding the GSA prospectus threshold (currently $3.095M), the schedule above is dependent on passage of a Transportation and Infrastructure committee resolution.

X. Project Cost Summary of the Chosen Option

Estimated Annual Rent	$4,027,000
Estimated Rental Rate[1]	$47.34/NUSF
Proposed Lease Authority	Up to 20 years
Net Usable Square Feet	85,046
Parking Spaces	600
Scoring[2]	Operating Lease
Medical and Other Related Alterations (Lump Sum Payment)[3]	$14,458,000

[1]This estimate may be escalated by 2.0 percent annually to the effective date of the lease to account for inflation. The proposed rental rate is unserviced (taxes, insurance, management, and maintenance and repair reserves included); however, the lease contract may include operating expenses paid by the lessor. VA will conduct a competitive procurement and negotiate with offerors to ensure that lease award is made in the best interest of the Government.
[2]Scoring detail provided in supplemental materials.
[3]Represents an estimated lump sum payment to the lessor for the purchase and installation of build-out requirements not included in the annual rent. Actual lump sum amount may vary based on offers received.

XI. Additional GSA Information

Lease Type:	New
Current NUSF:	N/A
Proposed NUSF[1]:	85,046 (Approx. 102,055 ABOA SF)
Expansion/Reduction NUSF:	85,046
Current NUSF/Person:	Not applicable, clinical space
Proposed NUSF/Person:	Not applicable, clinical space
Proposed Maximum Lease Term:	20 Years
Expiration Dates of Current Leases[2]:	N/A

Delineated Area:

- North: Intersection of Interstate 15 & 600 N St, straight line East to 11th Ave, 11th Ave to intersection with N Virginia St, straight line southeast to Mario Capecchi Dr
- East: Mario Capecchi Dr, Foothill Dr, Interstate 80, Interstate 215
- South: Interstate 215
- West: Interstate 15

Number of Official Parking Spaces[3]:	600
Scoring:	87.72%
Proposed Rental Rate:	$47.34
Proposed Total Annual Cost:	$4,027,000
Current Total Annual Cost:	N/A

[1]As VA continues the modernization of its leasing program, the intent is for all acquisitions utilizing the Request for Lease Proposals (RLP) method to use a square footage metric better aligned with industry standards. The ABOA SF estimate will be finalized during pre-design.
[2]VA will coordinate with GSA to execute such interim leasing actions as are necessary to ensure continued housing of VA services prior to the effective date of the new lease.
[3]VA may pursue structured parking, instead of surface parking, during lease execution depending on land parcel availability.

VA routinely evaluates and revises its leasing process to ensure it is grounded in private-sector real estate best practices for healthcare delivery, responsive to the emerging demands of the Veteran population, and fully aligned with federal budget processes. VA also works closely with the General Services Administration to ensure it has the latest government- wide guidance, tools, and procedures in place.

Additionally, VA may change the delineated area for this project, keeping in mind speed to market, project costs and potential existing inventory as well as Veteran demographics and maintaining sufficient competition.

Status Report for Authorized Major Medical Facility Projects
(Dollars in thousands)

Status Codes:
AP-P – Active Phase Planning
AP-CD – Active Phase Construction Documents
CD – Construction Documents
CO – Construction
DD –Design Development
NFYDP – Not In Five Year Development Plan
P - Planning
PC – Physically Complete
RQ - Requirements

Location	Project Name/ Short Description	Total Est. Cost ($000)	Authori-zation ($000)	Approp. Available Through 2020 Request ($000)	FY(s) Authorized	Status
Alameda, CA	Community Based Outpatient Clinic & National Cemetery	$310,500	$87,332	$113,332	2016/In 2020 Request/In 2021 Request for $310,500	CD
American Lake, WA[1]	Construction of New Specialty Care Building 201	$110,600	$16,260	$16,260	2016/In 2021 Request for $110,600	CO
Bay Pines, FL	Inpatient/Outpatient Improvements	$188,200	$194,400	$188,200	2010	AP-CD
Biloxi, MS	Restoration of Hospital/ Consolidation of Gulfport	$319,000	$310,000	$319,000	2006	CO
Canandaigua, NY	Construction and Renovation	$443,900	$351,980	$353,741	2015/2019/In 2021 Request for $443,900	CO
Dallas, TX	Clinical Expansion for Mental Health	$156,400	$15,640	$15,640	2010	DD
Dallas, TX	Spinal Cord Injury	$265,600	$155,200	$170,500	2013/In 2021 Request for $265,600	AP-CD
Denver, CO	New Medical Center Facility	$1,675,000	$1,675,000	$1,675,000	2004/2006 /2009/2010 /2015	PC
Livermore, CA	Realignment and Closure of the Livermore Campus	$505,000	$311,730	$311,730	2010/2016/ 2018/In 2020 Request/In 2021 Request for $505,000	CD
Long Beach, CA	Seismic Corrections-Bldgs 7 and 126	$129,545	$117,845	$129,545	2004/2006/ 2011	CO

Location	Project Name/ Short Description	Total Est. Cost ($000)	Authori-zation ($000)	Approp. Available Through 2020 Request ($000)	FY(s) Authorized	Status
Long Beach, CA	Mental Health and Community Living Center	$367,300	$317,300	$317,300	2015/2016/ 2017/In 2021 Request for $367,300	CO
Louisville, KY	New Medical Facility	$860,000	$450,000	$860,000	2010/2016/ 2019/In 2020 Request for $860,000	CD
Manhattan, NY	Medical Center - Flood Recovery	$372,600	$207,000	$372,600	2013/In 2020 Request for $372,600	CO
North Chicago, IL[2]	Renovate Building 4	$15,980	$15,980	$15,980	2019	CD
Oklahoma City, OK[2]	Relocation of Surgical Intensive Care Unit with Step-Down Addition/ Expanding Operating Room	$29,461	$29,461	$29,461	2019	CD
Omaha, NE	Ambulatory Care (CHIP-IN Act)	$86,000	$56,000	$56,000	2017	CO
Palo Alto, CA	Centers for Polytrauma/Blind Rehabilitation, Ambulatory Care & Research	$716,600	$716,600	$472,600	2008/2012	CO
Perry Point, MD	Replacement Community Living Center	$92,700	$92,700	$92,700	2016	P
Pittsburgh, PA	Consolidation of Campuses	$269,969	$295,600	$269,969	2004/2007/ 2009	CO
Reno, NV	Correct Seismic Deficiencies and Expand Clinical Services Building	$241,800	$213,800	$223,800	2017	CD
San Diego, CA	SCI and Seismic Building 11	$311,700	$205,840	$230,840	2015/2016/In 2020 Request/In 2021 Request for $311,700	AA
San Francisco, CA[3]	Seismic Retrofit/Replace Buildings 1, 6, 8, and 12	$346,700	$180,480	$180,480	2016	AA
San Juan, PR	Seismic Corrections-Bldg. 1	$307,000	$277,000	$307,000	2009/2012/In 2020 Request for $307,000	CO

Location	Project Name/ Short Description	Total Est. Cost ($000)	Authori-zation ($000)	Approp. Available Through 2020 Request ($000)	FY(s) Authorized	Status
St. Louis (JB), MO	Medical Facility Improvements & Cemetery Expansion	$366,500	$346,300	$366,500	2007/2012	CO
St. Louis (JC), MO	Replace Bed Tower, Clinical Bldg Expansion & Parking Garage	$433,400	$43,340	$43,340	2010	RQ
Tampa, FL	Polytrauma and New Bed Tower	$236,500	$231,500	$236,500	2008/2015	CO
Walla Walla, WA	Multi-Specialty Care	$71,400	$71,400	$71,400	2010	CO
West Los Angeles, CA	Seismic Correction of 12 Buildings	$105,500	$105,500	$105,500	2012/2015/ 2016/2017	CO
West Los Angeles, CA	Build New Critical Care Center	TBD	$0	$75,790	In 2020 Request $75,790	P
	Total		**$7,091,188**	**$7,620,708**		

[1]Part of this project is funded with the Seismic Line item - Building 81 Seismic Corrections, Renovation of Bldg 81AC and 18

[2]North Chicago, IL and Oklahoma City, OK were originally minor construction and/or non-recurring maintenance projects that exceeded the $10M threshold and had minor appropriations of $9.98M and $18.661M, respectively.

[3]Part of this project is funded with the Seismic Line item - Seismic Retrofit/Replace Buildings 1, 6, and 8 will be funded with the Seismic Line Item. Revised Scope and TEC will be published in a future submission.

2004 and 2005 projects were authorized under P.L. 108-170, which expired September 30, 2006. Projects authorized in P.L. 108-170 that did not have construction awards prior to the expiration date required reauthorization. 2004 and 2005 projects with expired authorization were reauthorized in P.L. 109-461, which also authorized the 2006 and 2007 projects. The 2008 projects were authorized in P.L. 110-252. The 2009 projects were authorized in P.L. 110-387. Walla Walla, WA, was authorized by P.L. 111-98 in 2010. All other 2010 projects were authorized in P.L. 111-163. 2011 projects were authorized in P.L. 111-275. 2012 projects were authorized in P.L. 112-37. 2013 projects were authorized in P.L. 112-191 and P.L. 113-2 (Manhattan, NY). 2015 projects were authorized in P.L. 114-58. 2016 projects were authorized in P.L. 114-223. 2017 projects were authorized in P.L. 114-294 and 114-315. 2018 projects were authorized in P.L. 115-182. 2019 projects were authorized in P.L.115-407.

Page Intentionally Left Blank.

Status Report for Authorized Major Medical Leases FY 2005 – FY 2019 Not Yet Completed

Status Codes:
AC - Alternatives to leased space being considered
AP - Acquisition Process Initiated
C - Complete
CA - Canceled
LAP - Lease Award Pending
LA - Lease Awarded
NS - Not Started
OH - On Hold

Location	Description	Authori-zation ($000)	NUSF Space	FY(s) Authorized	Status
Ann Arbor, MI	Outpatient Clinic	4,247	36,453	2017	LA
Albuquerque, NM	Research & Development	9,560	80,000	2014	AP
Bakersfield, CA	Outpatient Clinic	3,464	30,100	2010	AP
Birmingham, AL	Outpatient Mental Health Clinic	6,649	59,744	2017	LA
Boston, MA	Outpatient Clinic	3,316	28,700	2011	CA
Boston, MA	Research	6,224	40,604	2017	LA
Brick, NJ	Community Based Outpatient Clinic	7,280	60,000	2014	AP
Cape Girardeau, MO	Community Based Outpatient Clinic	4,232	43,000	2014	LA
Charleston, SC	Primary Care and Dental Clinic Annex	7,071	75,000	2014	LA
Charleston, SC	Research	7,274	48,000	2017	AP
Chattanooga, TN	Community Based Outpatient Clinic	7,069	75,000	2014	LA
Chico, CA	Community Based Outpatient Clinic	4,534	42,000	2014	C
Chula Vista, CA	Community Based Outpatient Clinic	3,714	31,000	2014	LA
Cobb County, GA	Community Based Outpatient Clinic	6,409	64,000	2014	LAP
Columbus, GA	Outpatient Clinic	5,335	55,000	2012	LAP
Corpus Christi, TX	Outpatient Clinic	6,556	58,254	2017	AP
Daytona Beach, FL	Outpatient Clinic	12,198	106,826	2017	AP
Denver, CO	Chief Business Office/Purchased Care	14,784	184,718	2017	AP
Fredericksburg, VA	Outpatient Clinic	45,015	378,461	2017	AP
Gainesville, FL	Outpatient Clinic	7,891	70,849	2017	LA
Gainesville, FL	Outpatient Mental Health Clinic	4,320	39,932	2017	LA
Hampton Roads, VA	Outpatient Clinic	18,141	155,169	2017	AP
Hines, IL	Research & Development	22,032	164,000	2014	CA
Honolulu, HI	Outpatient Clinic	15,887	66,000	2014	AP
Houston, TX	Research & Development	6,142	48,000	2014	LA

Location	Description	Authori-zation ($000)	NUSF Space	FY(s) Authorized	Status
Indianapolis, IN	Outpatient Clinic	7,876	67,721	2017	LA
Jacksonville, FL	Outpatient Clinic	18,623	164,054	2017	AP
Johnson County, KS	Community Based Outpatient Clinic	2,263	22,910	2014	LA
Lincoln, NE	Community Based Outpatient Clinic	7,178	72,000	2014	LA
Lubbock, TX	Community Based Outpatient Clinic	8,554	94,000	2014	LA
Missoula, MT	Outpatient Clinic	6,942	59,990	2017	LA
Mobile, AL	Outpatient Clinic	6,565	65,125	2012	C
Myrtle Beach, SC	Community Based Outpatient Clinic	8,022	84,000	2014	LA
New Port Richey, FL	Outpatient Clinic	11,927	114,000	2014	LA
Northern Colorado, CO	Outpatient Mental Health Clinic	8,904	75,645	2017	LA
Ocala, FL	Outpatient Clinic	5,026	45,499	2017	LA
Oxnard, CA	Outpatient Clinic	5,274	41,027	2017	LA
Phoenix, AZ	Outpatient Clinic	20,757	203,000	2014	LA
Pike County, GA	Outpatient Clinic	5,565	49,175	2017	LA
Pittsburgh, PA	Outpatient Clinic	6,247	53,466	2017	AP
Ponce, PR	Outpatient Clinic	11,535	114,300	2014	LA
Portland, ME	Outpatient Clinic	6,808	56,637	2017	LA
Raleigh, NC	Outpatient Clinic	21,870	185,271	2017	AP
Rapid City, SD	Outpatient Clinic	4,532	40,003	2017	AP
Redding, CA	Community Based Outpatient Clinic	8,154	77,000	2014	LA
Rochester, NY	Outpatient Clinic	9,232	84,000	2012	C
Rochester, NY	Outpatient Clinic II	3,645	31,064	2017	CA
San Antonio, TX	Community Based Outpatient Clinic (South Co.)	19,426	190,800	2014	LA
San Diego, CA	Community Based Outpatient Clinic	11,946	99,986	2014	LA
San Diego, CA	Research	4,852	27,923	2017	AP
San Juan, PR	Mental Health Clinic	5,323	52,000	2011	LA
Santa Rosa, CA	Outpatient Clinic	6,922	53,870	2017	LA
Tampa, FL	Outpatient Mental Health Clinic	13,387	114,098	2017	AP
Tampa, FL	Outpatient Clinic (Lakeland)	10,760	92,681	2017	AP
Terre Haute, IN	Outpatient Clinic	4,102	36,827	2017	LA
Tulsa, OK	Community Based Outpatient Clinic	13,269	140,000	2014	LA
Tyler, TX	Outpatient Clinic	4,327	48,425	2014	LA
West Haven, CT	Community Care Center	4,883	45,000	2014	C
Worcester, MA	Community Based Outpatient Clinic	4,855	40,000	2014	LA

Enhanced-Use Leases

Since its inception, the Enhanced-Use Leasing (EUL) program has been and continues to be an important component of the VA's overall asset management program. The program was unique among Federal agencies and considered an innovative method of acquiring needed facilities, goods, and services to assist the Department in achieving its asset goals and objectives. The EUL program is managed by the Office of Asset Enterprise Management in the Office of the Assistant Secretary of Management.

The EUL program was authorized by law in 1991, and codified in 38 U.S.C. § 8161-8169, allowing VA to outlease real property to non-Federal public entities and private parties for terms of up to 75 years. In return for allowing underutilized VA property to be used for non-VA uses (which were required to be compatible with or benefit the Department's mission) on Department-controlled land, VA could require rent in the form of monetary payments or other "in-kind" consideration, which in the opinion of the Secretary enhanced a particular VA activity's mission.

After expiration of VA's EUL authority in December 2011, it was reinstated in August 2012 in modified form, by Public Law (P.L.) 112-154, Section 211, and extended through December 31, 2023. The modified authority allows VA to receive monetary consideration only and stipulates that VA may enter into EULs only for the purpose of creating supportive housing. As before, VA may lease land and/or buildings to the public or private sector for up to 75 years.

The West Los Angeles Leasing Act of 2016, P.L. 114-244, was signed into law on September 29, 2016 and modified the EUL authority to allow VA to enter into an EUL of up to 75 years at the West Los Angeles Campus. Annually, VA has to report on EULs to Congressional Veterans' Affairs committees, the Committees on Appropriations, and the Committees on the Budget of the House of Representatives and the Senate.

From 1991 to September 30, 2019, VA awarded 101 leases to develop a combination of housing (permanent supportive housing, transitional supportive housing, assisted living, senior housing and hospice) and non-housing (credit union, mental health facility, parking, energy plants, hotel, medical school, office and child-care) projects. See Appendix D for a summary of these leases. The 101 awarded leases are comprised of:

- 52 Housing EULs: 48 of these projects – containing 3,135 housing units – were in operation at the end of FY 2019
- 29 Non-Housing EULs
- 15 Terminated EULs
- 5 Transferred/Expired EULs

Under the current EUL authority, in continuing the effort to support the Department's initiative to eliminate Veteran homelessness, VA has identified and is pursuing additional sites nationwide with high potential for repurposing as supportive housing for Veterans and their families who are homeless or at risk of homelessness. VA is proposing amendments to expand the scope of the EUL authority (codified at 38 U.S.C. § 8161-8169) to include projects that are supportive housing and projects that provide services and/or mixed uses, which incorporate other important benefits to Veterans.

Page Intentionally Left Blank.

Chapter 7
Strategic Capital Investment Planning Process Project Lists

Background

VA prioritizes capital projects using the Strategic Capital Investment Planning (SCIP) process, which began in 2010 and was first used in the 2012 budget cycle. SCIP is an innovative Department-wide planning process used to inform the current and future year's budget request by facilitating the review and prioritization of projects from the following capital investment accounts: major construction; minor construction; lease and VHA Non-recurring Maintenance (NRM) projects. VA's 2021 capital request addresses the Department's highest capital priorities. SCIP is designed to improve the delivery of services and benefits to Veterans, their families, and survivors by addressing VA's most critical needs or performance gaps first, investing wisely in VA's future, and significantly improving the efficiency of VA's far-reaching and wide range of activities.

This year changes were made to the process to reduce administrative burden and to improve the quality of outcomes. These changes resulted in fewer projects requiring full business case submissions to be scored, which is reflected in shorter prioritized construction and lease project lists. Also, the decision criteria used to prioritize construction and lease projects were updated to align more closely with program requirements, resulting in separate Department-wide decision models for those project types.

The SCIP process was modified in 2019 to provide VISN Directors maximum input into the prioritization of VHA NRM projects. NRM projects are now prioritized using their own SCIP model, which places an emphasis on the VISN priority of the projects. The VHA Nationwide Prioritized NRM SCIP List is found in Chapter 8.2, table 2-4.

The decision criteria definitions for construction, lease, and NRM projects can be found in Appendices A, B and C, respectively. Diagrams of the decision criteria models can be found in Chapter 8.2 in Figures 2-3, 2-4, and 2-5.

Integrated Department-wide Priority Lists for 2021

2021 Construction SCIP List

The Construction SCIP List (Table 7-1) includes all new unfunded major and minor construction projects reviewed for 2021 that meet established cost thresholds, in priority order. The Construction SCIP List is used to inform the development of the VA construction programs budget request. Projects with costs listed in the FY21 Request column are included in this year's construction programs budget request.

The SCIP List does not include approximately $696.9 million requested in 2021 for major construction line items and below threshold minor construction projects, as well as approximately $767.7 million requested in 2021 that will fund the continuation or completion of projects initiated and or reviewed by SCIP in a prior fiscal year. Major construction projects on which VA has begun active planning and could require additional funding in the next five budget years are listed on the Five-Year Development Plan (FYDP). Each year, newly scored major projects are chosen from the Construction SCIP List to be added to the FYDP. Projects marked with footnote number 1, in the Construction SCIP List below, are new additions to the annual FYDP. See Capital Plan Chapter 8.2, VA Strategic Capital Investment Planning Process Overview, pages 8.2-12 through 8.2-15, for more details on the FYDP and pages 8.2-16 – 8.2-17, in the section titled Applying the SCIP Process to the Construction Programs Budget Request, for details on how these pieces come together to develop the construction programs budget request.

In accordance with VA's 2019 budget request, Congress approved a new Major Construction line item account called Seismic Corrections. This account provides funding to correct critical seismic issues across VA facilities. The Seismic Corrections program request is comprised of newly identified unfunded projects (from the Construction SCIP List) and existing partially funded major construction, minor construction, and NRM projects that meet certain criteria. A more detailed description of the Seismic Corrections program, including project eligibility requirements, can be found in Chapter 2. New unfunded projects to be considered this year for funding by the Seismic Corrections line item are marked with footnote number 2 in the Construction SCIP List below.

In 2016, Congress passed the Communities Helping Invest through Properties and Improvements Needed (CHIP-IN) for Veterans Act of 2016, which authorizes the Department to carry out a pilot program under which it may accept up to five donations from specified non-federal entities to provide new facilities for the Department. This year, $120,000,000 is being requested as the VA's contribution towards the Tulsa, OK major construction project, Construct Inpatient Facility, which has been designated as eligible for this pilot program. See Capital Plan Chapter 9.2 – Communities Helping Invest through Properties and Improvements Needed (CHIP-IN) for Veterans Act of 2016 for more details about the CHIP IN Act pilot program and the Tulsa, OK project, which is marked with footnote number 3 in the Construction SCIP List below.

Table 7-1: Integrated Department-wide Priority List for 2021 Construction Projects (2021 Construction SCIP List)

Capital Program Key:

Major – Major Construction

Minor – Minor Construction

[1]This project has been added to the FY 2021 Five-Year Development Plan.

[2]This project may be eligible to be funded by the Major Construction Seismic Corrections program.

[3]This project is eligible for the CHIP IN Pilot program.

Priority #	VISN/ Admin	City/Cemetery	ST	2021 Construction SCIP List Project Name - Short Description	Total Score	Cons. Prog.	Total Est. Project Cost ($000)	FY 21 Request ($000)
1	NCA	San Antonio[1]	TX	Gravesite Expansion and Cemetery Improvements	0.5484	Major	$56,000	$56,000
2	5	Perry Point[2]	MD	Construct Replacement Dietetics Building to Correct FCA, Seismic and Structural Deficiencies	0.4837	Major	$26,878	$0
3	20	White City[2]	OR	Replace Seismically Deficient Clinical and Support Buildings with New Building, Bldg 301	0.4744	Major	$98,800	$0
4	8	Gainesville[1]	FL	Correct Non-Compliant Surgical, Emergency, Pharmacy, and Sterile Process	0.4682	Major	$91,484	$0
5	22	Albuquerque	NM	Expand Spinal Cord Injury	0.4491	Minor	$13,750	$1,375
6	17	Houston	TX	Replace Building 121	0.4485	Minor	$18,481	$1,848
7	19	Oklahoma City	OK	Replace Friendship House	0.4456	Minor	$8,369	$837
8	15	Wichita	KS	Construct Addition and Renovate Bldg 3 for Pharmacy and Associated ADA Parking	0.4439	Minor	$14,950	$1,495
9	7	Charleston[2]	SC	Correct Seismic Deficiencies by Expanding OR's for Hybrid Capabilities	0.4276	Minor	$14,544	$1,454
10	NCA	San Diego[1]	CA	Miramar Gravesite Expansion and Cemetery Improvements	0.4261	Major	$31,000	$31,000
11	20	White City[2]	OR	Replace Seismically Deficient Clinical Support Buildings with New Building, Bldg 300	0.4228	Major	$75,240	$0
12	12	Chicago	IL	Add 2nd Floor to Womens Outpatient Specialty Clinic, Building 30	0.4171	Minor	$15,200	$1,520
13	22	Tucson	AZ	Construct New Prosthetics and Rehab Building	0.4126	Minor	$17,614	$1,761
14	9	Murfreesboro	TN	Construct Integrated Health Center	0.3998	Minor	$17,389	$1,739
15	16	Jackson	MS	Outpatient Services Center	0.3996	Minor	$15,000	$1,500
16	NCA	Canton	GA	Gravesite Expansion and Site Improvements (PPC, IGC, Columbaria)	0.3983	Minor	$13,210	$1,321
17	2	Bronx	NY	Construct New Therapeutic Pool Bldg	0.3882	Minor	$8,950	$895
18	15	Topeka	KS	Construct Outpatient Mental Health Addition	0.3854	Minor	$9,362	$936
19	23	Fargo	ND	Construct Parking Ramp	0.3752	Minor	$15,943	$1,594
20	21	Reno[2]	NV	Building 10 Seismic Mitigation	0.3695	Major	$77,000	$0
21	4	Lebanon	PA	Construct New Entry, Building 17	0.3585	Minor	$6,225	$623

Priority #	VISN/ Admin	City/Cemetery	ST	2021 Construction SCIP List Project Name - Short Description	Total Score	Cons. Prog.	Total Est. Project Cost ($000)	FY 21 Request ($000)
22	NCA	Ft. McPherson	NE	Gravesite Exp. (IGC, Memorial Wall)	0.3521	Minor	$2,030	$2,030
23	10	Ann Arbor	MI	Expand Inpatient Mental Health (Privacy, Infection Control, ADA Deficiencies)	0.3479	Minor	$15,790	$1,579
24	1	Bedford	MA	Construct New Research Phase 1, Demo Bldg 17	0.3460	Minor	$17,532	$1,753
25	5	Baltimore	MD	Construct Building to Expand Behavioral Health, Condense Prosthetics and Relocate Home Based Primary Care	0.3452	Minor	$15,980	$1,598
26	8	San Juan[2]	PR	Correct Seismic Deficiencies, Bldg 19	0.3443	Major	$36,059	$0
27	20	White City[2]	OR	Replace Seismically Deficient Clinical and Support Buildings with New Building 302	0.3416	Major	$42,000	$0
28	6	Fayetteville	NC	Construct Maintenance Shops	0.3292	Minor	$14,918	$1,492
29	21	Palo Alto[2]	CA	Replace Spinal Cord Injury Center Seismic Mitigation	0.3289	Major	$198,348	$0
30	10	Fort Wayne	IN	Build Specialty Care Building	0.3178	Minor	$15,579	$1,558
31	NCA	Los Angeles	CA	Gravesite Expansion (Columbarium)	0.3059	Minor	$18,970	$1,897
32	19	Salt Lake City	UT	Consolidate Research	0.3051	Minor	$14,022	$1,402
33	NCA	Omaha	NE	Gravesite Expansion (PPC, PPUC, Columbaria)	0.3009	Minor	$9,920	$992
34	7	Charleston[1]	SC	Replace Charleston Bed Tower	0.3005	Major	$335,882	$0
35	22	San Diego	CA	Expand Inpatient Psychiatry, B01, 2SE - Phase 2	0.2991	Minor	$7,612	$761
36	15	Poplar Bluff[2]	MO	Construct New Outpatient Mental Health, RRTP Facility for Whole Health Integration	0.2976	Minor	$16,000	$1,600
37	10	Marion	IN	Build Warehouse	0.2960	Minor	$14,331	$1,433
38	8	Tampa[1]	FL	Expand VAMC Primary Care	0.2949	Major	$66,846	$0
39	12	Danville	IL	Construct New CLC Homes 9 & 10	0.2932	Minor	$14,760	$1,476
40	6	Asheville	NC	Expand Building 62 for Geriatric-Psychiatric Beds	0.2847	Minor	$8,580	$858
41	10	Dayton	OH	Expand Emergency Department	0.2780	Minor	$14,874	$1,487
42	19	Salt Lake City	UT	Establish Welcome Center	0.2779	Minor	$14,100	$1,410
43	NCA	St Louis	MO	Renovate Chapel	0.2760	Minor	$1,180	$1,180
44	6	Richmond	VA	Improve Privacy of Spinal Cord Injury Patients	0.2744	Minor	$15,918	$1,592
45	19	Tulsa[3]	OK	Construct Inpatient Facility	0.2735	Major	$297,542	$120,000
46	6	Salisbury	NC	Expand Rehab and Whole Health Clinic, B 6	0.2703	Minor	$6,054	$0
47	23	Fargo	ND	Expand B 1 for Primary Care	0.2648	Minor	$11,806	$0
48	22	Prescott	AZ	Construct New Central Kitchen	0.2620	Minor	$8,570	$0
49	6	Richmond	VA	Increase Parking Access & Safety	0.2600	Minor	$15,986	$0
50	1	Bedford	MA	Replace Community Living Ctr, Ph 2	0.2592	Minor	$18,229	$0
51	19	Sheridan	WY	Expand/Renovate Community Living Center	0.2580	Minor	$14,975	$0
52	7	Augusta	GA	Construct Women's Health Clinic and Primary Care Building	0.2569	Minor	$16,113	$0

Priority #	VISN/ Admin	City/Cemetery	ST	2021 Construction SCIP List Project Name - Short Description	Total Score	Cons. Prog.	Total Est. Project Cost ($000)	FY 21 Request ($000)
53	NCA	Biloxi	MS	Gravesite Expansion (Columbaria)	0.2558	Minor	$2,380	$2,380
54	20	Walla Walla	WA	Construct Dedicated IT Building	0.2555	Minor	$5,220	$0
55	1	Boston	MA	Emergency Department/Lab Addition	0.2547	Minor	$8,000	$0
56	12	Tomah	WI	Expand Building 32 for Information Technology	0.2492	Minor	$6,649	$0
57	4	Wilmington	DE	Expand Community Living Center	0.2483	Minor	$16,199	$0
58	NCA	Winchester	VA	Renovate Historic Buildings and Correct Deficiencies	0.2472	Minor	$4,523	$0
59	1	Brockton	MA	Renovate Long Term Spinal Cord Injury, Building 8	0.2471	Minor	$14,300	$0
60	15	Wichita	KS	Construct Addition to Building 19 for Relocating Radiology and Co-locating with Nuclear Medicine	0.2468	Minor	$14,850	$0
61	10	Ann Arbor	MI	Expand West Parking Structure	0.2460	Minor	$13,916	$0
62	OIT	Martinsburg	WV	Lobby Remodel (CRRC)	0.2457	Minor	$550	$0
63	1	Brockton	MA	Expand Building 32 for Telehealth	0.2428	Minor	$9,350	$0
64	21	Fresno	CA	Expand/Renovate Laboratory, B 1, Flr 2	0.2424	Minor	$18,088	$0
65	6	Richmond	VA	Improve Surgical Patient Privacy	0.2411	Minor	$15,966	$0
66	9	Memphis	TN	Construct Parking Garage on East Lot	0.2399	Minor	$17,939	$0
67	12	Madison	WI	Relocate Inpatient Mental Health	0.2389	Minor	$16,000	$0
68	OIT	Austin	TX	Replace Wet Sprinkler System	0.2383	Minor	$1,500	$0
69	9	Murfreesboro	TN	Build Outpatient Mental Health Center	0.2368	Minor	$17,894	$0
70	15	Leavenworth	KS	Renovate Community Living Center, Building 122, Floor 1	0.2359	Minor	$17,109	$0
71	NCA	Fort Smith	AR	Repair/Replace Roads, Curbing, and Drainage	0.2349	Minor	$1,230	$0
72	15	Kansas City	MO	Construct Inpatient Medicine Bed Addition for Patient Privacy	0.2340	Minor	$14,080	$0
73	22	Tucson	AZ	Expand/Renovate Emergency Dept.	0.2339	Minor	$11,244	$0
74	OIT	Martinsburg	WV	Perimeter Vehicle Restraint System (CRRC)	0.2338	Minor	$850	$0
75	4	Lebanon	PA	Relocate Public Entry to Emergency Department	0.2335	Minor	$8,253	$0
76	21	Honolulu	HI	Expand/Renovate Center for Aging	0.2310	Minor	$18,920	$0
77	7	Columbia	SC	Construct Dental Building	0.2309	Minor	$16,099	$0
78	15	Marion	IL	Expand Building 42 to Provide Service Delivery and Logistics	0.2308	Minor	$15,675	$0
79	NCA	Minneapolis	MN	Expand Irrigation System to Entire Cemetery	0.2300	Minor	$5,190	$0
80	23	Fargo	ND	Expand Mental Health Outpatient and RRTP, Building 52	0.2296	Minor	$12,512	$0
81	20	Spokane[2]	WA	Expand/Renovate Community Living Center	0.2288	Minor	$17,000	$0
82	5	Martinsburg	WV	Construct New Eye Clinic	0.2274	Minor	$18,180	$0
83	7	Columbia	SC	Construct West Campus Parking Garage	0.2253	Minor	$16,201	$0
84	9	Memphis	TN	Expand Outpatient South, Spinal Cord Injury/Disease, Building 7	0.2234	Minor	$11,536	$0
85	17	Houston	TX	Vertical Expansion for Expansion of Private Patient Beds, Building 100	0.2225	Minor	$19,548	$0

Priority #	VISN/ Admin	City/Cemetery	ST	2021 Construction SCIP List Project Name - Short Description	Total Score	Cons. Prog.	Total Est. Project Cost ($000)	FY 21 Request ($000)
86	NCA	Sarasota	FL	Gravesite Expansion (PPC, Traditional Sites, Columbaria)	0.2224	Minor	$9,450	$945
87	5	Clarksburg	WV	Expand Primary Care for CT Scanner	0.2223	Minor	$5,225	$0
88	19	Cheyenne	WY	Construct Physical Therapy & Cardio/Pulmonary Addition	0.2215	Minor	$15,400	$0
89	4	Philadelphia	PA	Modify Front Entrance, Building 1	0.2211	Minor	$13,800	$0
90	1	Boston	MA	Expand Ambulatory Care Addition for Specialty Clinics	0.2210	Minor	$16,500	$0
91	6	Fayetteville	NC	Replace Building T40 with a Pre-engineered Building	0.2201	Minor	$1,837	$0
92	23	St Cloud	MN	Renovate for Residential Rehabilitation Therapy Program, Building2, Floor 1	0.2185	Minor	$15,137	$0
93	OIT	Austin	TX	Renew and Upgrade Data Center Mechanical Support Systems	0.2185	Minor	$7,000	$0
94	20	Spokane	WA	Renovate/Expand Urgent Care Clinic	0.2172	Minor	$14,600	$0
95	1	Brockton	MA	Expand Inpatient Pharmacy	0.2170	Minor	$11,000	$0
96	21	Sacramento	CA	Renovate for Patient Aligned Care Teams by Relocating Nuclear Medicine	0.2152	Minor	$18,112	$0
97	Staff	Washington	DC	Build Out for 1800 G. Street Replacement	0.2146	Minor	$19,500	$19,500
98	23	St Cloud	MN	Construct Community Living Center East Building	0.2141	Minor	$15,800	$0
99	23	St Cloud	MN	Construct Second Floor for Mental Health on Psych Building	0.2137	Minor	$12,409	$0
100	21	Reno	NV	Construct Inpatient Mental Health and Memory Care Facility	0.2133	Minor	$15,730	$0
101	4	Lebanon	PA	Expand Primary Care, Building 17	0.2133	Minor	$12,562	$0
102	5	Clarksburg	WV	Expand/Replace Behavioral Health, B 5	0.2122	Minor	$10,450	$0
103	6	Fayetteville	NC	Construct Parking Garage	0.2120	Minor	$14,336	$0
104	6	Asheville	NC	Construct Primary Care Clinic	0.2111	Minor	$15,785	$0
105	9	Nashville	TN	Renovate Specialty Clinics and Infusion Center	0.2107	Minor	$12,497	$0
106	2	Buffalo	NY	Expand Patient Parking Ramp	0.2105	Minor	$19,901	$0
107	10	Marion	IN	Expand Community Living Center	0.2102	Minor	$16,600	$0
108	6	Richmond	VA	Expand Cancer Center Access	0.2096	Minor	$15,947	$0
109	OIT	Austin	TX	Upgrade Data Center Electrical Service	0.2095	Minor	$9,614	$0
110	15	Marion	IL	Construct Primary Care and Women's Health Building	0.2074	Minor	$14,500	$0
111	5	Perry Point	MD	Replace B 3H for Mental Health	0.2072	Minor	$9,838	$0
112	1	West Haven	CT	Expand B 2 for Specialty Care	0.2067	Minor	$15,470	$0
113	1	West Haven	CT	Expand B 1, Floor 3 for Surgery	0.2066	Minor	$18,650	$0
114	16	New Orleans	LA	Expand Staff/Patient Parking Garages	0.2033	Minor	$18,127	$0
115	6	Richmond	VA	Improve Safety & Access Spinal Cord Injury Primary Care Center	0.2031	Minor	$15,858	$0
116	8	San Juan	PR	Expand/Renovate Emergency Department Ancillary Support Functions	0.2025	Minor	$6,493	$0
117	8	Orlando	FL	Replace Lake Baldwin Domiciliary	0.2014	Minor	$15,055	$0
118	4	Lebanon	PA	Construct Hospice Unit	0.2014	Minor	$15,537	$0

Priority #	VISN/ Admin	City/Cemetery	ST	2021 Construction SCIP List Project Name - Short Description	Total Score	Cons. Prog.	Total Est. Project Cost ($000)	FY 21 Request ($000)
119	7	Atlanta	GA	Address Fort McPherson VA Site Security and Safety Requirements with Police Building and Land Purchase	0.2013	Minor	$4,203	$0
120	NCA	Leavenworth	KS	Replace Maintenance Facility	0.2012	Minor	$4,490	$0
121	4	Wilmington	DE	Construct Addition for Pharmacy	0.2010	Minor	$14,117	$0
122	22	Tucson	AZ	Construct Replacement Bed Tower	0.2000	Major	$74,237	$0
123	17	Houston	TX	Expand Parking Garage A	0.1998	Minor	$18,881	$0
124	10	Columbus	OH	Construct Urgent Care Clinic and Clinic Space	0.1996	Minor	$16,000	$0
125	2	Montrose	NY	Construct Community Living Center	0.1992	Minor	$17,160	$0
126	7	Augusta	GA	Construct Outpatient Mental Health Building, Uptown Division	0.1991	Minor	$16,131	$0
127	21	Palo Alto	CA	Construct Dialysis and Physical Therapy, Menlo Park	0.1984	Minor	$8,910	$0
128	21	North Las Vegas	NV	Construct Physical Rehabilitation and Gym	0.1978	Minor	$15,400	$0
129	19	Oklahoma City	OK	Expand Ground Floor East for Clinics	0.1974	Minor	$8,810	$0
130	4	Erie	PA	Construct Community Living Ctr, Ph 2	0.1970	Minor	$16,000	$0
131	8	Miami	FL	Construct Surgical Intensive Care Unit	0.1959	Minor	$7,390	$0
132	NCA	Chattanooga	TN	Replace Roads & Storm Drainage	0.1958	Minor	$1,200	$0
133	22	San Diego	CA	Purchase Land & Renovate Patient/Visitor Surface Parking Lot	0.1949	Major	$93,972	$0
134	10	Cleveland	OH	Construct Health Care Center	0.1941	Major	$245,000	$0
135	17	Temple	TX	Relocate Lab, Building 163	0.1939	Minor	$6,658	$0
136	Staff	Washington	DC	Build Out for 425 I St. NW Replacement	0.1937	Minor	$14,000	$14,000
137	17	Temple	TX	Construct MRI Suite Addition	0.1936	Minor	$6,253	$0
138	21	Reno	NV	Build New Homeless Clinic	0.1922	Minor	$17,380	$0
139	21	Honolulu	HI	Construct Kona Replacement CBOC	0.1913	Minor	$16,500	$0
140	Staff	Little Rock	AR	Create Law Enforcement Training Center Classroom Space	0.1907	Minor	$10,797	$0
141	NCA	San Bruno	CA	Install Irrigation Mainline and Controller Upgrades	0.1906	Minor	$1,100	$0
142	NCA	Salisbury	NC	Construct Covered Storage and Materials Bins	0.1892	Minor	$1,530	$0
143	7	Dublin	GA	Construct Dental and Eye Clinic	0.1892	Minor	$16,083	$0
144	1	Boston	MA	Replace Substance Abuse RRTP, Building 4, JP	0.1876	Minor	$12,100	$0
145	5	Martinsburg	WV	Replace Baker House, Building 21	0.1875	Minor	$2,951	$0
146	NCA	Louisville	KY	Correct Condition Deficiencies	0.1847	Minor	$2,210	$0
147	8	West Palm Beach	FL	Expand Oncology Infusion Center	0.1842	Minor	$1,683	$0
148	20	Portland	OR	Construct Parking Garage, Vancouver	0.1834	Minor	$14,400	$0
149	15	Wichita	KS	Construct Combined Nutrition and Canteen Services	0.1832	Minor	$4,774	$0
150	20	Portland	OR	Expand Parking Structure, Building 108	0.1824	Minor	$8,600	$0
151	NCA	Houston	TX	Pond Dredging and Storm Drainage Maintenance	0.1816	Minor	$4,280	$0
152	6	Asheville	NC	Expand Community Living Center, B 62	0.1816	Minor	$11,430	$0

Priority #	VISN/ Admin	City/Cemetery	ST	2021 Construction SCIP List Project Name - Short Description	Total Score	Cons. Prog.	Total Est. Project Cost ($000)	FY 21 Request ($000)
153	21	Fresno	CA	Expand Community Living Center, Ph 2	0.1793	Minor	$18,851	$0
154	6	Richmond	VA	Expand Building 500 for Access to Primary Care and Mental Health Srvcs	0.1793	Minor	$15,995	$0
155	7	Dublin	GA	Construct Domiciliary for Patient Privacy, Suicide Prevention, and Enhanced Therapeutic Environment	0.1792	Minor	$15,990	$0
156	8	Bay Pines	FL	Expand Imaging - Lee County Healthcare Center	0.1773	Minor	$6,680	$0
157	6	Richmond	VA	Improve Access to Primary Care	0.1771	Minor	$15,846	$0
158	4	Lebanon	PA	Construct Community Living Center Step Down Unit	0.1759	Minor	$15,489	$0
159	NCA	Richmond	VA	Renovate/Repair Historic Site and Buildings	0.1749	Minor	$3,010	$0
160	NCA	Riverside	CA	Construct Honor Guard Building	0.1746	Minor	$1,330	$0
161	VBA	Decatur	GA	Renovate and Realign Atlanta RO, Fl 2	0.1731	Minor	$19,900	$19,900
162	VBA	San Diego	CA	Build Out Consolidated RO Lease	0.1731	Minor	$17,707	$0
163	4	Pittsburgh	PA	Construct Service Building Annex and Ambulance Ramp	0.1731	Minor	$15,900	$0
164	VBA	Buffalo	NY	Build Out RO Lease	0.1731	Minor	$9,903	$0
165	VBA	Salt Lake City	UT	Renovate and Realign RO	0.1731	Minor	$7,091	$0
166	VBA	Sioux Falls	SD	Renovate and Realign Sioux Falls RO	0.1731	Minor	$2,406	$0
167	OIT	Austin	TX	Expand and Renew Data Center Electrical Support Systems	0.1729	Minor	$9,600	$0
168	NCA	Beverly	NJ	Restore Iron Fences and Gates, Correct Condition Deficiencies	0.1726	Minor	$1,360	$0
169	NCA	Sandston	VA	Renovate Historic Buildings and Correct Condition Deficiencies	0.1720	Minor	$3,750	$0
170	OIT	Philadelphia	PA	Renew Mechanical Infrastructure Support Systems	0.1716	Minor	$1,600	$0
171	NCA	Battle Creek	MI	Expand Irrigation System to Entire Cemetery	0.1713	Minor	$3,580	$0
172	20	Walla Walla	WA	Construct Parking Garage	0.1686	Minor	$16,400	$0
173	NCA	Schuylerville	NY	Repave Roads and Various Site Improvements	0.1674	Minor	$1,280	$0
174	NCA	Madison	TN	Replace Roads/Curbs and Repair Storm Drainage	0.1666	Minor	$3,500	$0
175	OIT	Hines	IL	Upgrade Data Center HVAC and Water Condenser System	0.1665	Minor	$3,000	$0
176	6	Richmond	VA	Construct Community Outreach Center	0.1665	Minor	$15,966	$0
177	NCA	Pineville	LA	Renovate Maintenance Facility, Repair Roads/Storm Drainage	0.1650	Minor	$1,160	$0
178	4	Philadelphia	PA	Administrative Wing Addition	0.1641	Minor	$16,000	$0
179	10	Columbus	OH	Construct Second Parking Garage	0.1634	Minor	$16,007	$0
180	6	Hampton	VA	Improve Patient Arrival into VAMC	0.1634	Minor	$9,185	$0
181	OIT	Philadelphia	PA	Upgrade Data Center Monitoring System Connectivity	0.1627	Minor	$700	$0
182	7	Tuscaloosa	AL	Expand Building 38 for Pathology, Mental Health, and Specialty Care	0.1619	Minor	$16,089	$0

Priority #	VISN/ Admin	City/Cemetery	ST	2021 Construction SCIP List Project Name - Short Description	Total Score	Cons. Prog.	Total Est. Project Cost ($000)	FY 21 Request ($000)
183	21	Sacramento	CA	Construct Parking Structure in Support of VA/DoD Joint Venture	0.1618	Minor	$15,050	$0
184	NCA	Richmond	VA	Renovation of Site/Buildings	0.1603	Minor	$2,250	$0
185	10	Fort Wayne	IN	Build Loading Dock	0.1603	Minor	$2,805	$0
186	15	Kansas City	MO	Construct Cancer Center Addition	0.1597	Minor	$12,970	$0
187	21	Fresno	CA	Construct Parking Garage, Main Campus Lot B	0.1597	Minor	$19,055	$0
188	15	Leavenworth	KS	Expand Outpatient Mental Health, Building 160	0.1584	Minor	$14,725	$0
189	6	Richmond	VA	Construct Community Center for Research, Education and Innovation	0.1556	Minor	$15,940	$0
190	NCA	Lebanon	KY	Correct Condition Deficiencies	0.1542	Minor	$2,600	$0
191	8	Gainesville	FL	Expand Horizontal Parking Garage #3 (Liberty), Level 1-2	0.1535	Minor	$18,250	$0
192	NCA	Dayton	OH	Mill and Pave Roads	0.1528	Minor	$1,260	$0
193	OIT	Martinsburg	WV	Electrical Infrastructure gaps targeting TIER-3 (CRRC)	0.1521	Minor	$2,745	$0
194	21	Reno	NV	Procure Land for Campus and Parking Expansion to Increase Security Setbacks	0.1507	Minor	$11,300	$0
195	NCA	St Louis	MO	Expand Irrigation System to Entire Cemetery	0.1485	Minor	$9,020	$0
196	NCA	Madison	TN	Install Irrigation System	0.1484	Minor	$5,580	$0
197	21	Reno	NV	Renovate Vacated Space and Expand First Floor, Building 12	0.1456	Minor	$12,925	$0
198	NCA	Bay Pines	FL	Replace Irrigation System	0.1454	Minor	$2,417	$0
199	8	Gainesville	FL	Expand Vertical Parking Garage #2 (Independence)	0.1447	Minor	$10,780	$0
200	8	Miami	FL	Expand/Renovate Spinal Cord Injury Congregate Living Area for Privacy	0.1441	Minor	$17,946	$0
201	NCA	Baltimore	MD	Replace Fence and Improve Property Border, Condition Deficiencies	0.1439	Minor	$5,500	$0
202	21	Sacramento	CA	Construct Outpatient Mental Health for Addiction Recovery and Education Building	0.1416	Minor	$18,998	$0
203	1	Boston	MA	Expand Parking Garage, JP	0.1412	Minor	$11,000	$0
204	5	Washington	DC	Construct Second Floor Addition to Research Building 14	0.1412	Minor	$17,270	$0
205	NCA	Beaufort	SC	Replace Irrigation System	0.1409	Minor	$2,000	$0
206	NCA	Bay Pines	FL	Replace Roads and Add Storm Drainage	0.1399	Minor	$1,810	$0
207	21	Sacramento	CA	Construct Clinic Addition and Renovate for Primary Care and Ancillary Services	0.1382	Minor	$17,767	$0
208	7	Augusta	GA	Construct Domiciliary to Support Suicide Prevention, Address Privacy Issues, and Enhance Therapeutic Environment of Care	0.1380	Minor	$16,107	$0
209	4	Wilkes Barre	PA	Expand Community Living Center	0.1375	Minor	$16,000	$0
210	OIT	Philadelphia	PA	Relocate Main Utility Power Feed	0.1371	Minor	$7,000	$0
211	23	Omaha	NE	Construct Inpatient Surgical Suite	0.1371	Minor	$18,038	$0

Priority #	VISN/ Admin	City/Cemetery	ST	2021 Construction SCIP List Project Name - Short Description	Total Score	Cons. Prog.	Total Est. Project Cost ($000)	FY 21 Request ($000)
212	6	Richmond	VA	Increase Access to Physical Medicine and Rehabilitation Services	0.1369	Minor	$9,774	$0
213	NCA	Marietta	GA	Renovate Site/Buildings to Correct Condition Deficiencies	0.1362	Minor	$1,670	$0
214	15	Poplar Bluff	MO	Construct Laboratory Service Facility	0.1361	Minor	$11,050	$0
215	8	Gainesville	FL	Construct Consolidated Logistics Center	0.1356	Minor	$19,600	$0
216	NCA	Baltimore	MD	Renovate Historic Lodge and Site	0.1348	Minor	$4,850	$0
217	OIT	Austin	TX	Remodel Entire Building Office Space	0.1336	Minor	$8,000	$0
218	6	Asheville	NC	Construct Building for Specialty Clinic	0.1327	Minor	$10,945	$0
219	NCA	Los Angeles	CA	Correct Condition Deficiencies	0.1304	Minor	$3,920	$0
220	21	Sacramento	CA	Expand Community Living Center for Patient Privacy	0.1285	Minor	$15,173	$0
221	OIT	Austin	TX	Safety Infrastructure Gaps Targeting TIER-3	0.1276	Minor	$1,700	$0
222	6	Richmond	VA	Expand Women's Health/Primary Care Center	0.1261	Minor	$15,966	$0
223	NCA	Beaufort	SC	Renovate Lodge, Maintenance Building, and Restroom	0.1225	Minor	$3,840	$0
224	9	Memphis	TN	Expand and Renovate Engineering, B 10	0.1221	Minor	$4,000	$0
225	10	Ann Arbor	MI	Procure Existing Modular Building	0.1174	Minor	$251	$0
226	8	Gainesville	FL	Construct Parking Garage, Lake City	0.1168	Minor	$19,900	$0
227	8	Tampa	FL	Construct 1st Level Parking Garage	0.1164	Minor	$17,965	$0
228	OIT	Austin	TX	Electrical Infrastructure Gaps Targeting TIER-3	0.1150	Minor	$2,200	$0
229	OIT	Austin	TX	Replace Generator Switchgear for Power System A	0.1139	Minor	$1,000	$0
230	NCA	Dayton	OH	Expand Admin/Maintenance Building	0.1136	Minor	$2,670	$0
231	OIT	Austin	TX	Install Redundant AC Units in Telecom Rooms (12 Rooms)	0.1136	Minor	$1,000	$0
232	OIT	Austin	TX	Install Transfer Switches for Computer Room AC Units	0.1126	Minor	$625	$0
233	15	St Louis	MO	Storage Building, John Cochran Division	0.1126	Minor	$11,652	$0
234	OIT	Austin	TX	Install Roof Top Cooling System for Computer Room	0.1125	Minor	$2,300	$0
235	OIT	Austin	TX	Replace Circuit Breaker Panel, Room 160E	0.1122	Minor	$2,000	$0
236	NCA	Annapolis	MD	Historic Site Renovation	0.1111	Minor	$3,000	$0
237	NCA	Farmingdale	NY	Irrigation Project, Phase 1	0.1104	Minor	$2,630	$0
238	4	Erie	PA	Care in the Community and Consolidated Support Building	0.1100	Minor	$6,270	$0
239	OIT	Austin	TX	Mechanical Infrastructure Gaps Targeting TIER-3	0.1099	Minor	$1,900	$0
240	8	Bay Pines	FL	Construct Parking Garage #2	0.1095	Minor	$15,999	$0
241	NCA	Salem	NJ	Historic Wall Restoration	0.1087	Minor	$2,120	$0
242	OIT	Austin	TX	Hot/Cold Isle Containment in Computer Room	0.1086	Minor	$2,000	$0
243	8	Orlando	FL	Expand Building 13 at Lake Nona - 2B	0.1078	Minor	$18,938	$0

Priority #	VISN/ Admin	City/Cemetery	ST	2021 Construction SCIP List Project Name - Short Description	Total Score	Cons. Prog.	Total Est. Project Cost ($000)	FY 21 Request ($000)
244	7	Augusta	GA	Construct Care Coordination Addition and Health Care Navigation Center, Uptown Division	0.1039	Minor	$16,070	$0
245	NCA	New Albany	IN	Correct Condition Deficiencies	0.0859	Minor	$1,390	$0
246	NCA	Chattanooga	TN	Install Irrigation System	0.0834	Minor	$8,930	$0
247	NCA	Baltimore	MD	Repave Roads, Replace Curbs & Site Drainage	0.0819	Minor	$2,340	$0
248	NCA	Rock Island	IL	Expand Irrigation System to Entire Cemetery	0.0819	Minor	$2,730	$0
249	NCA	Sturgis	SD	Renovate/Repair Roadways	0.0818	Minor	$1,588	$0
250	NCA	Marietta	GA	Install Irrigation	0.0564	Minor	$1,670	$0
251	NCA	Keokuk	IA	Expand Irrigation System to Entire Cemetery	0.0559	Minor	$1,330	$0
252	NCA	Battle Creek	MI	Replace Equipment Storage Building	0.0554	Minor	$1,445	$0

2021 Lease SCIP List

The Lease SCIP List (Table 7-2) includes all unfunded major and minor lease projects reviewed for 2021 that meet established cost thresholds, in priority order. All major leases and new minor leases are required to submit a business case (BC) for scoring. However, this year's SCIP process changes resulted in only those minor lease replacement projects that increase in size over 10% or 2,500 net usable square feet being required to submit a full BC for scoring. These prioritized lease projects are approved to be awarded in 2021, contingent on contracting timelines and final funding allocations. Minor lease replacement projects that are not required to submit full BC for scoring are not prioritized, however they are approved through SCIP and the listing of those leases is included in Chapter 8.2, table 2-4. The amounts for each lease in the FY21 Request column represents a preliminary planning estimate of the first year's annual unserviced rent plus any build out and are considered to be the mean cost in a range of plus or minus 10 percent.

The three newly scored VHA major leases require Congressional authorization, because the first year's annual unserviced rent of each lease is estimated to be $1,000,000 or more. Those three leases are marked with footnote number 1 in the table below. See Chapter 6: VA Lease Notifications, Major Medical Facility and Lease Authorizations, for the required prospectus documents for each VHA major lease.

Table 7-2: Integrated Department-wide Priority List for 2021 Lease Projects (2021 Lease SCIP List)

Lease Program Key:

Major – Major Lease

Minor – Minor Lease

[1]This project requires Congressional authorization.

Priority #	VISN/Admin	City	ST	FY 2021 Lease SCIP List Project Name - Short Description	Total Score	Lease Prog.	FY 21 Request ($000)
1	6	Hampton[1]	VA	New Outpatient Clinic	0.5269	Major	$45,958
2	Staff	Indianapolis	IN	OGC-New Lease to Expand Indianapolis	0.4105	Minor	$183
3	9	Nashville[1]	TN	Replacement Outpatient Clinic	0.4596	Major	$34,205
4	6	Richmond	VA	Mechanicsville CBOC	0.4044	Minor	$3,823
5	6	Richmond	VA	Chesterfield County CBOC	0.3985	Minor	$3,823
6	10	Columbus	OH	Columbus Administrative Lease	0.3824	Minor	$4,600
7	23	Minneapolis	MN	Mankato Clinic	0.3784	Minor	$2,607
8	23	Minneapolis	MN	Rice Lake CBOC	0.3773	Minor	$3,742
9	15	Poplar Bluff	MO	Farmington CBOC	0.3747	Minor	$1,110
10	7	Charleston[1]	SC	Replacement Outpatient Clinic	0.3678	Major	$12,667
11	15	Poplar Bluff	MO	Sikeston CBOC	0.3644	Minor	$1,035
12	19	Fort Harrison	MT	Bozeman CBOC	0.3572	Minor	$2,736
13	23	Minneapolis	MN	Maplewood CBOC	0.3569	Minor	$5,663
14	15	Poplar Bluff	MO	Paragould CBOC	0.3506	Minor	$990
15	1	West Haven	CT	Administrative Office	0.3487	Minor	$2,550
16	15	Wichita	KS	Establish West Wichita CBOC	0.3469	Minor	$1,686
17	23	Iowa City	IA	Sterling CBOC	0.3460	Minor	$4,459
18	2	Bronx	NY	Queens CBOC	0.3386	Minor	$1,840
19	5	Clarksburg	WV	Expand Wood Co CBOC	0.3344	Minor	$1,317
20	15	Wichita	KS	Establish New Eldorado CBOC	0.3339	Minor	$201
21	23	Iowa City	IA	Waterloo CBOC	0.3309	Minor	$4,788
22	10	Saginaw	MI	Grayling CBOC	0.3265	Minor	$1,473
23	12	Chicago	IL	Remote Parking JB Main Campus	0.3229	Minor	$900
24	8	Bay Pines	FL	Port Charlotte CBOC	0.3169	Minor	$1,670
25	2	Bronx	NY	Yonkers CBOC	0.3158	Minor	$1,840
26	6	Fayetteville	NC	Establish New Clinic	0.3153	Minor	$1,542
27	VBA	New York	NY	Renew Regional Office	0.3118	Major	$5,703
28	21	Sacramento	CA	Behavioral Health and Other Administrative Space	0.3084	Minor	$2,012
29	8	Miami	FL	Key Largo CBOC	0.3076	Minor	$207
30	12	North Chicago	IL	Evanston CBOC	0.3045	Minor	$1,500

Priority #	VISN/Admin	City	ST	FY 2021 Lease SCIP List Project Name - Short Description	Total Score	Lease Prog.	FY 21 Request ($000)
31	Staff	Washington	DC	Replacement Lease - 90 K St. NE	0.3024	Minor	$996
32	Staff	Washington	DC	Renew Lease at 1717 H St NW	0.3024	Major	$2,055
33	Staff	Washington	DC	Renew Lease at 1575 I St. NW	0.3024	Major	$2,142
34	Staff	Washington	DC	Renew Lease at L'Enfant Plaza	0.3024	Minor	$736
35	VBA	Buffalo	NY	Renew Regional Office 1	0.3024	Major	$2,800
36	VBA	Philadelphia	PA	Renew Regional Office 1	0.3024	Major	$8,057
37	VBA	Portland	OR	Renew Regional Office	0.3024	Major	$3,360
38	VBA	Muskogee	OK	Renew Regional Office 1	0.3024	Major	$2,195
39	12	Hines	IL	VISN 12 Office Space	0.3024	Minor	$401
40	2	Buffalo	NY	VISN Administrative Space	0.3024	Minor	$480
41	4	Erie	PA	Ashtabula CBOC	0.3024	Minor	$1,960
42	5	Clarksburg	WV	Establish New Parking	0.3024	Minor	$100
43	15	St Louis	MO	Dermatology and Diabetes Center	0.2621	Minor	$1,419
44	15	Poplar Bluff	MO	Salem CBOC	0.2508	Minor	$340
45	15	Leavenworth	KS	Wyandotte CBOC	0.2498	Minor	$687
46	15	Wichita	KS	Establish PMRS and Prosthetics Clinic	0.2473	Minor	$2,455
47	23	Minneapolis	MN	Replace St. James Contract Clinic with a VA-Staffed CBOC	0.2294	Minor	$1,453
48	15	St Louis	MO	Manchester Avenue/Women's VA Clinic	0.2238	Minor	$3,367
49	23	Minneapolis	MN	Minneapolis Community Resource & Referral Center (CRRC)	0.1927	Minor	$1,923
50	VBA	Philadelphia	PA	Renew ITC	0.1815	Major	$1,911

Page Intentionally Left Blank.

U.S. Department of Veterans Affairs
Long Range Capital Plan

Table of Contents Page No.

Strategic Capital Investment Planning (SCIP) Process Report ……
Chapter 8.1: Executive Summary…….……..... 8.1 – 1
Chapter 8.2: VA Strategic Capital Investment Planning Process Overview …….……..... 8.2 – 1
Chapter 8.3: Veterans Health Administration……... 8.3 – 1
Chapter 8.4: National Cemetery Administration…….. 8.4 – 1
Chapter 8.5: Veterans Benefits Administration …… 8.5 – 1
Chapter 8.6: Staff Offices…….…… 8.6 – 1

Chapter 9.1: Enhanced Use Leasing with Annual Consideration Report …….. 9.1 – 1
Part I - Enhanced-Use Lease Program …… 9.1 – 1
Part II – Enhanced-Use Lease Consideration Report …….…… 9.1 – 5
Chapter 9.2: CHIP In for Veterans Act Program…….……..……... 9.2 – 1

Page Intentionally Left Blank.

Executive Summary

VA's Strategic Capital Investment Planning Process

The Strategic Capital Investment Planning (SCIP) process is an annual effort designed to capture the full extent of VA's capital needs and inform budget formulation. The SCIP process relies on gap analyses, based on a 10-year planning horizon, to identify critical performance gaps in safety, security, utilization, access, seismic safety, facility condition, space, parking, and energy. Identified gaps drive the creation of a system-wide capital needs assessment that drills down to specific regional-, network-, and facility-level capital projects and the associated resources to close critical gaps.

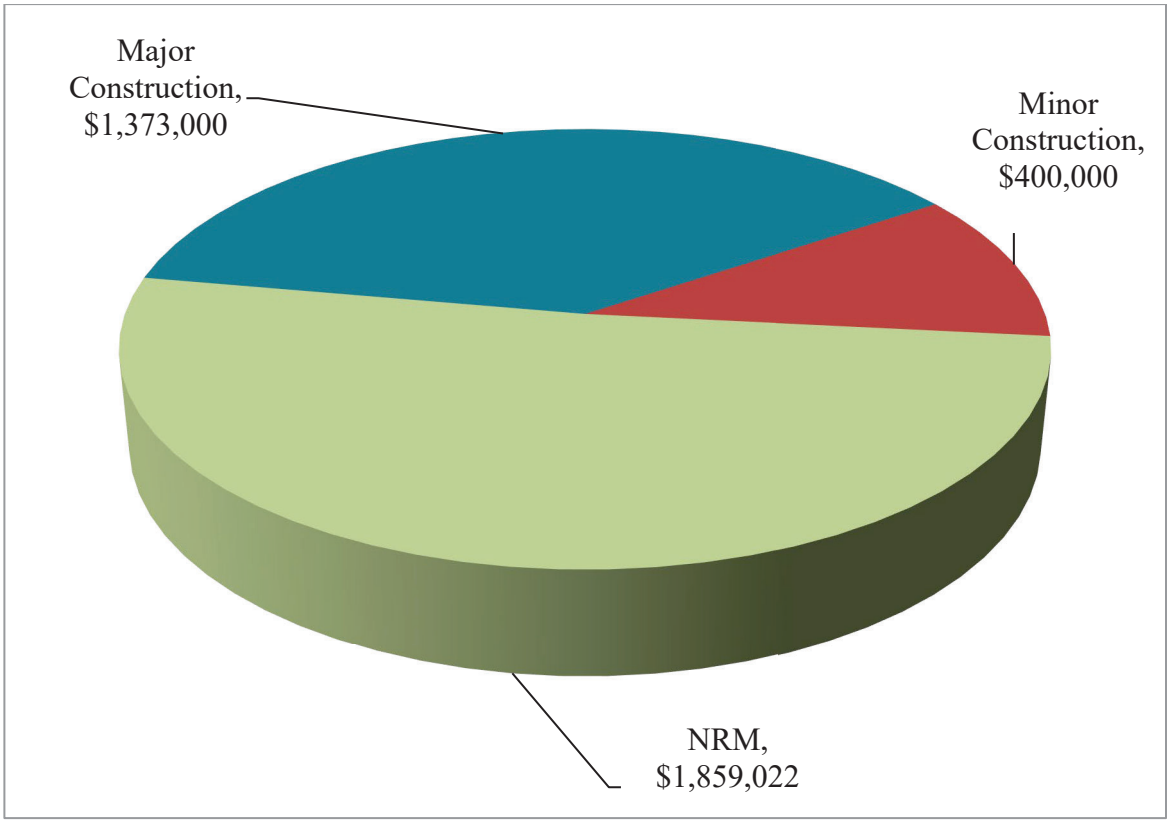
The 2021 SCIP process identified 3,595 capital projects to close critical gaps and meet targets across VA. Based on current estimates, completion of all capital projects identified in the SCIP plan requires estimated resources of between $63 and $76 billion, including activation costs. Without activation, SCIP project costs would be between $49 and $59 billion. These estimates are based on current market conditions and will be modified as projects move through the annual budget formulation process (from action plan to business case, etc). In a given fiscal year, the highest priority SCIP projects are submitted for funding consideration. These projects are prioritized based on their contribution to closing identified gaps and funded based on annual appropriation levels. The 2021 SCIP list funds the highest ranking SCIP projects that will address VA's modernization efforts by enhancing patient privacy, ensuring national cemeteries remain open, improving information technology infrastructure, and correcting critical facility condition deficiencies across the Department. These funds as well as available prior year funds will assist in ensuring Veterans are cared for in a safe environment.

The SCIP process is revisited each year to take into account changes in medical delivery, technology, Departmental and Congressional mandates, and local or regional projections. Because prioritization is an annual process, VA is unable to predict which specific projects will be requested for funding beyond 2021. There may be some locations and facilities undergoing study, including ongoing environmental studies, etc. Therefore, the potential future projects listed in the Long Range Capital Plan should not be construed as VA having made decisions to execute projects at these sites. The SCIP process and associated results have undergone a formal executive review process, developed by senior management, and have been approved by the Secretary — thus ensuring that the plan is closely aligned with the Department's strategic goals and mission. The SCIP Process and decision model was updated to better meet the Secretary's goal of VA modernization. The SCIP decision model and weights were updated to allow the priorities of local and Administration decision makers to have significantly more impact in the prioritization process and the ranking of projects. Additionally, VHA NRM projects have their own SCIP criteria and model which

places emphasis on providing additional weight to local priorities and VHA-specific planning priorities.

VA 2021 Major, Minor, and NRM Budget Request

Figure E-1: 2021 VA Major, Minor, and NRM Budget Request (Dollars in thousands)



Total Budget Request $3.6 billion

The 2021 VA capital budget request of $3.6 billion includes investments in a number of asset categories across several organizations and accounts. The table below provides a breakout of capital budget request by Administration and Staff Offices (SO).

Table E-1: FY 2021 VA Major, Minor, and NRM Request

($000)	VHA	NCA	VBA	SO	Total
NRM*	$1,859,022	$0	$0	$0	**$1,859,022**
Major Construction	$1,269,286	$94,000	$0	$9,714	**$1,373,000**
Minor Construction	$243,995	$86,030	$26,475	$43,500	**$400,000**
Totals by Admin	**$3,372,303**	**$180,030**	**$26,475**	**$53,214**	**$3,632,022**

*NRM amount planned FY 2021 obligations (including plus up funding received in 2018 and 2019)

This plan also includes appendices (See Appendix) containing detailed information referenced throughout the chapters.

In addition to capital projects, VHA employs other strategies to close identified gaps including: tele-medicine, extended hours for the provision of services on-site, and care in the community from private sources. Incorporating non-capital approaches can reduce the cost of capital solutions that are used to increase access, address growing workload, or add space. Tele-medicine utilizes technologies that allow patients to receive care, diagnostic services or monitoring at home or other convenient locations. Extended hours of service is utilized at outpatient care sites experiencing high utilization or where increased demand is projected. Care in the community can be used in lieu of facility construction, renovation/expansion, or leasing in certain circumstances to address access and space gaps, or to reduce the local footprint. This approach is useful where the volume for service is low. The above strategies are factored into the SCIP plan reducing the need for patient travel and the number of exam rooms, saving energy costs, and better utilizing providers remotely; however, VA may be able to realize additional efficiencies and explore increasing non-capital means as technology and service delivery evolve. VBA, NCA, and Staff Offices use telework agreements when appropriate to reduce the space needs. VBA is also reconfiguring offices (smaller cubicle sizes to fit more people into the same space) and is leveraging technology to reduce the space needed for paper file storage.

Link to Real Property Capital Planning

The SCIP process addresses the requirements set forth in OMB Memorandum M-20-03, Implementation of Agency-wide Real Propety Capital Planning. The memorandum intends to ensure there is a clear process followed by all agencies to prioritize its needs and integrated those needs into a cohesive plan that supports budget formulation. The SCIP process is built upon identifying mission requirements for real property needs (gaps), linkage to deparment strategic plan, and includes all lines of business (VHA, VBA, NCA, and Staff Offices). It also includes all capital and real property programs , major construction, minor construction, leasing, and NRM programs. As part of the SCIP process, all prioritized projects are required to complete an alternative analysis, where required by Title 38. For the Deparment of Veterans Affairs, the Assistant Secretary for Management, who serves as the Chief Financial Officer (CFO), provides strategic and operational leadership in budget, financial management, and asset management efforts for VA programs and operations. The Office of Asset Enterprise Management (OAEM), a component of the Office of Management, works collaboratively with all areas of the Deparment to ensure capital investments are based on sound business practices and principals and meet Veterans' health care, benefits and burial needs. The Executive Director of OAEM also serves as the Department's Senior Real Property Officer (SRPO) and manages real property prioritization and funding through the SCIP process. The SRPO serves as capital asset manager for the entire Department. The SRPO reports to Assistant Secretary for Management and the Chief Financial Officer, further building the link between real property planning and budget formulation.

SCIP — Legislative and Executive Requirements

The SCIP complies with the Office of Management and Budget's (OMB) *Capital Programming Guide*, and supports the annual budget request for capital investments. In addition, the plan meets the following Congressional and Executive requirements:

- Public Law 114-318, Federal Property Management Reform Act.
- Senate Report 111-226 requiring the Department to submit all findings associated the Strategic Capital Investment Planning Process.
- Public Law 110-140, The Energy Independence and Security Act of 2007, contains numerous requirements related to the reduction of energy and water consumption and the use of alternative fuels.
- Public Law 109-58, The Energy Policy Act of 2005, contains numerous energy and water requirements.
- Public Law 108-422 and accompanying report language instructed the Department to provide a long-term and short-term disposal plan to the Congress.
- Public Law 114-223, section 258 directs that VA budget justification documents include the funding requested for the budget year and the "4 fiscal years succeeding the budget year". This known as the Five Year Development Plan (FYDP).

Chapter 8.2
VA Strategic Capital Investment Planning Process Overview

Introduction

The Department of Veterans Affairs (VA) developed an integrated comprehensive planning process based on addressing defined gaps to prioritize capital projects needed across all Administrations for a 10-year time period. This process, called Strategic Capital Investment Planning (SCIP), is designed to focus all capital investments on addressing VA's most critical infrastructure needs and service gaps, based on clearly defined standards and ongoing assessments. The SCIP process also informs the annual budget formulation process for 2021 and future year VA funding requests. Specifically, SCIP provides:

- A future-oriented identification of capital needs within a long range planning horizon (10 years) focused on reducing gaps, increasing efficiencies, and providing better services to Veterans (long range action plan)
- Four lists of potential projects to fill service gaps for the budget year: Two Department-wide prioritized lists of construction and lease projects (budget year business cases); One prioritized list of VHA non-recurring maintenance (NRM) projects; and One Department-wide SCIP-approved list of minor lease renewal projects that are not required to be scored or prioritized
- A Department-wide list of potential future year-year projects to fill service gaps for the remaining 9 years of the long range action plan
- A data-driven, rational, and defensible method to support VA's annual capital budget request (project/business case prioritization)
- Increased involvement of stakeholders

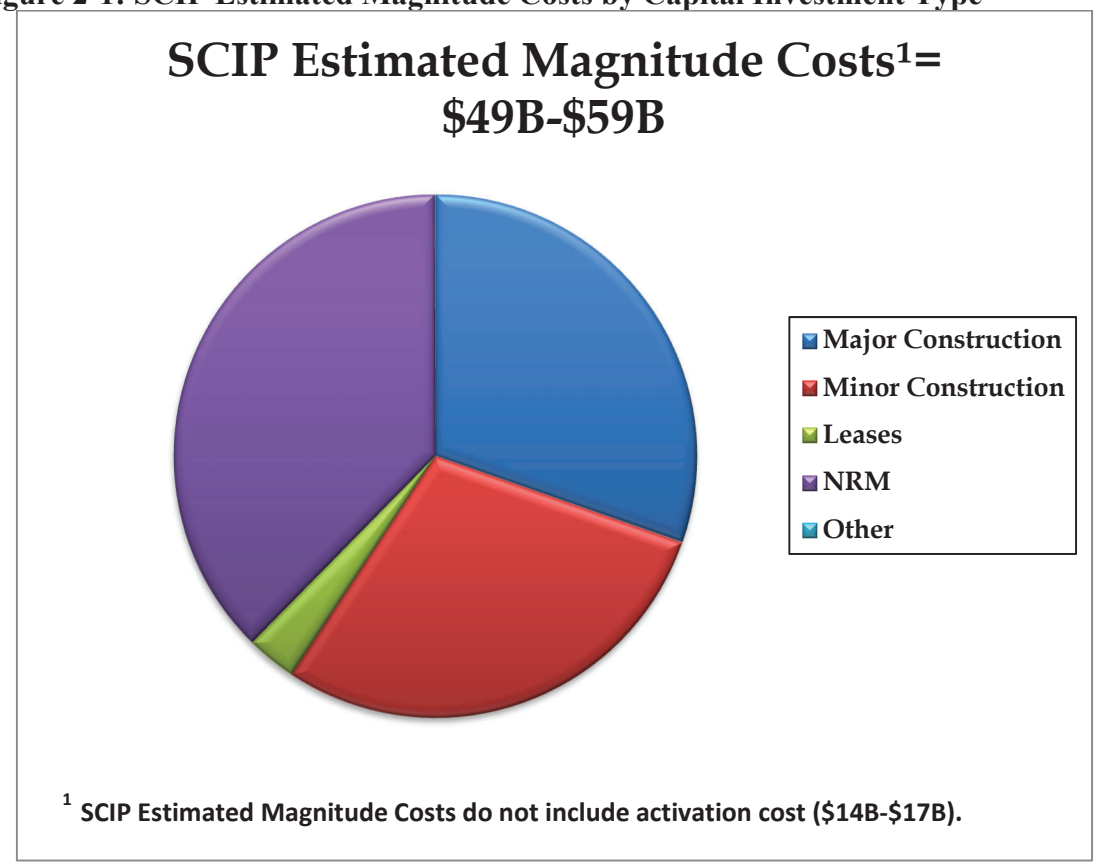
Through the SCIP process, the long range action plans submitted and developed by each VHA VISN, NCA, VBA, OIT, and the Staff Offices are consolidated into a Department-level assessment of needs to ensure the delivery of services in a Veteran-centric, forward-looking, and results-driven manner. SCIP requires that all capital investments in the action plans address the Department's following priorities:

- Customer Service: VA's prime directive and first priority. VA will be driven by customer feedback, unified Veteran data, and employees characterized by a customer-centric mindset to make accessing VA services seamless, effective, efficient and emotionally resonant for our Veterans.
- MISSION Act Implementation: VA is committed to ensuring Veterans have a wide variety of options for their health and well-being.
- Electronic Health Record: This new system will enable the seamless and secure transfer of Veterans' and Servicemembers' sensitive health information
- Business Systems Transformation: Modernized systems and technology enable employees to enhance the quality of the care and services Veterans deserve.

- Suicide Prevention: Suicide prevention is VA's top clinical priority; it is a National health crisis and requires all of Government, along with public-private partnerships to accomplish

The 2021 Long Range Action Plan consists of 3,595 projects, with a combined cost estimate between $49 billion and $59 billion (not including activation costs). The chart below provides a view of that magnitude cost range broken out by capital program.

Figure 2-1: SCIP Estimated Magnitude Costs by Capital Investment Type



SCIP Process

Several changes were made for the 2021 SCIP process to reduce administrative burden and to improve the quality of outcomes. For example, minor construction projects are not required to submit the cost-effectiveness analysis (CEA) template with the business case, but are required to submit the cost estimate sheet with the action plan. This allows for a review of cost estimates earlier in the process. Also, minor lease replacement projects that grow less than 10% or 2,500 NUSF from their current size are not required to submit a business case and only need to be reflected in action plans, with an accompanying cost estimate sheet. Another change is VHA NRM projects are now required to submit a cost estimate sheet with the action plan project. Also, the decision criteria were updated to align more closely with program requirements, resulting in separate Department-wide decision models for construction and lease projects.

The ultimate goal of the SCIP process is to identify necessary capital projects to close Departmental infrastructure needs and service gaps to support the delivery of benefits and services to Veterans. The main components of the SCIP process, which are described in more detail beginning on page 8.2-5, are:

1. **Gap Analysis:** An analysis is conducted for service gaps identified at the Department and facility levels. Gap data is reported in the action plan for each facility and rolled up to the appropriate Veterans Integrated Service Network (VISN), Memorial Service Network (MSN), region, or area level, where possible.
2. **Strategic Capital Assessment (SCA):** A narrative is developed at the VISN, MSN, region, and area levels to describe the strategic approach to closing gaps over the long range SCIP planning horizon and ensure all proposed capital investments are aligned with future Veteran needs.
3. **Long Range Action Plan (or Action Plan):** This detailed plan of specific new (not funded or partially funded) investments is developed by each facility and includes individual capital projects and lump sum resource requirements to reduce gaps over a 10-year planning horizon.
4. **Budget Formulation (includes Business Case prioritization):** The Department's annual President's Budget submission for capital projects is informed by the results of the current year's SCIP process and the requirements of on-going projects funded and approved in prior years.

Each Administration and VHA VISN was provided with corporate-level gap data, which is the basis on which they developed a SCA that outlines an Action Plan to correct identified gaps within a 10-year planning horizon. Action Plans contain project-specific capital investments required to correct identified gaps and meet established targets. The 2021 Action Plan contained 3,595 projects. All SCAs and Action Plans were reviewed and validated by the SCIP Board, which is comprised of high-ranking representatives from across VA Administrations and staff offices, as well as subject matter expert groups. Once Action Plans were validated through the VA governance process, 2021 business case (BC) applications were prepared for all Major Construction, Minor Construction, Major Lease, and select Minor Lease projects above established dollar and size thresholds. Approximately 302 BCs were reviewed and scored by the SCIP Panel, whose members support the SCIP Board. The outcomes of this year's scoring process are the two Department-wide prioritized lists:

- 2021 Construction SCIP List, consists of 252 scored projects
- 2021 Lease SCIP List, consists of 50 scored projects

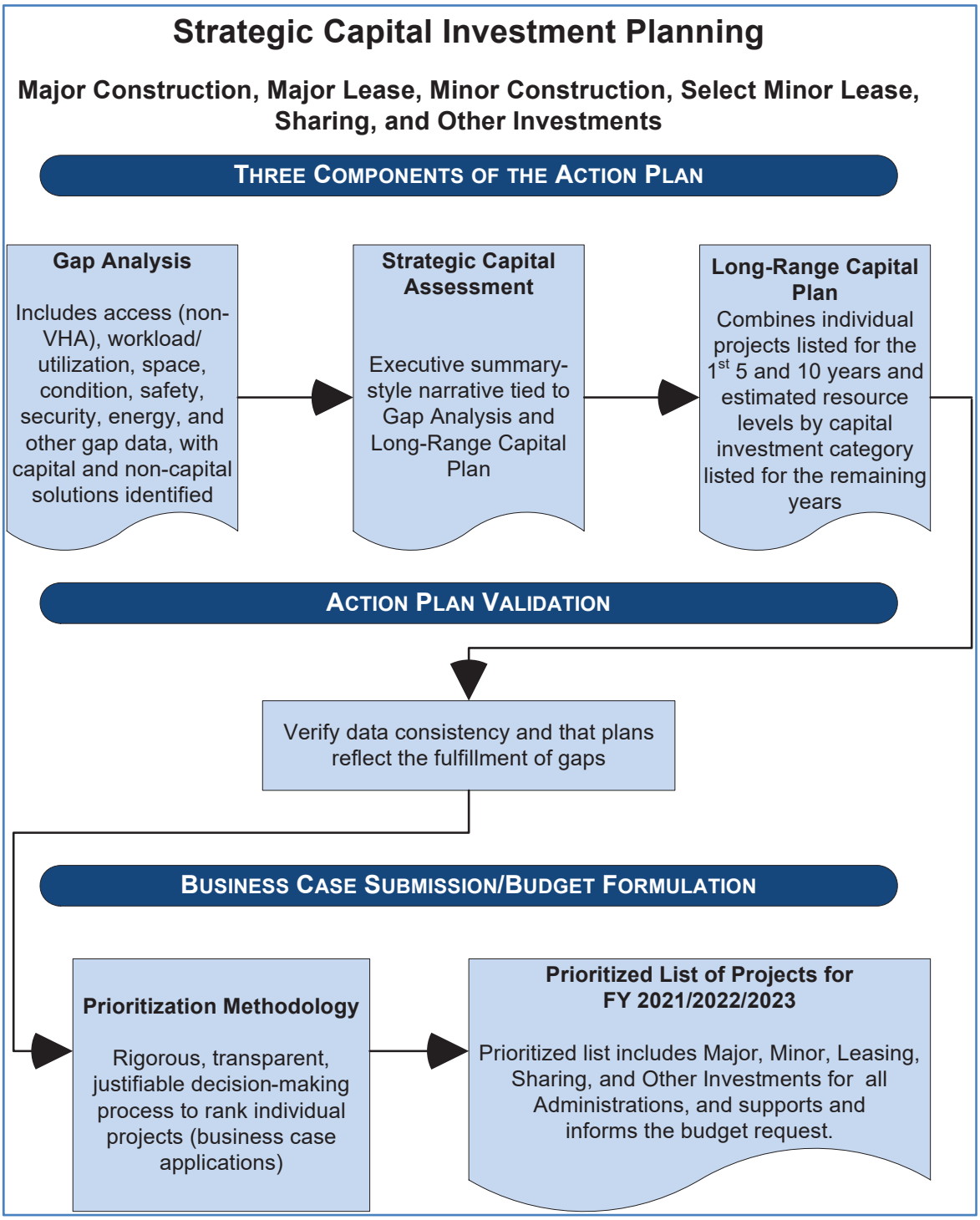
Both SCIP Lists were approved through the VA governance process and can be found in their entirety in Chapter 7. A sub-set of the 2021 Construction SCIP List, consisting of only the major and minor construction projects funded in VA's 2021 capital budget request can be found in table 2-2.

In addition, VHA's prioritized list of NRM projects was created based on SCIP-approved action plan projects that were the VISN's top-priority needs for anticipated funding in 2021. Each VISN's prioritized NRM list was then evaluated and refined using critical and non-critical condition assessment data and planning priorities to create a national NRM priority

list for inclusion in the 2021 Long Range Capital Plan. The 2021 VHA NRM Nationwide Prioritized SCIP List can be found in table 2-4.

The flow chart below illustrates the SCIP process from the development of action plans to the submission of this year's budget request.

Figure 2-2: SCIP Process



1) GAP ANALYSIS

SCIP Gaps

In order to achieve the Department's strategic goals, VA must fully understand Veterans' unmet needs and the continuing changes in Veteran demographics, medical and information technology, health care, and Veteran benefits and services delivery. In the development of the SCIP process, the five Department-wide priorities of Customer Service, MISSION Act, Electronic Health Record, Business Systems Transformation, and Suicide Prevention were identified by VA leadership, as requirements for capital investment across VA's portfolio. These priorities provided a framework upon which VA defined the following main deficiency categories (or gaps):

- **Access Gap:** Defined as the ability of Veterans to obtain needed services. This gap applies only to NCA (access to a burial option) and VBA (access by virtual means).
- **Utilization Gap:** For VHA, defined as the difference between current workload and projected 2027 demand for outpatient clinic stops and inpatient bed days of care. For NCA, defined as the difference between the number and type of gravesites currently available and the projected 2030 demand for those types of gravesites.
- **Space Gap:** Defined as the difference between current space inventory plus in-process projects and projected 2027 space need. A positive gap indicates a need for additional space. A negative gap indicates excess space in need of disposal.
- **Condition Gap:** Defined as the cost estimate to correct all currently-identified deficiencies in buildings and infrastructure, including seismic corrections in existing buildings.
- **Energy Gaps:** Energy gaps are based on compliance with VA Federal and Departmental sustainability goals that require Federal agencies to reduce energy and water consumption, increase alternative energy use, increase use of clean energy sources, and increase the percentage of applicable buildings and direct leases meeting sustainability guidelines. All Federal government construction projects must comply with sustainability, energy, and water requirements.
- **Other Gaps:** Includes correcting safety, security, and privacy issues; information technology deficiencies; and complying with sterile processing and distribution (SPD), operating room, inpatient privacy, benefits delivery standards for privacy and security, maintaining the National Shrine Commitment to cemeteries, and parking standards.

Each year at the beginning of the SCIP process, each Administration (NCA, VBA, OIT and Staff Offices) and VHA VISN is provided gap data, from corporate databases, that demonstrate the difference (or gap) between current or baseline state (including infrastructure being constructed or in the process of being acquired) and future projected need, and compares them to corporate targets for closing these gaps. These service gaps form the basis for each project entered into the Long Range Action Plan.

Use of Non-Capital Means Solutions

SCIP also incorporates the use of non-capital solutions to meet gaps. Non-capital approaches include methods such as the use of tele-medicine, extended hours for the

provision of services on site, and purchasing care from private sources through contracts or on a fee-basis (care in the community). Incorporating such non-capital approaches can reduce the total cost of capital solutions that are used to increase access or add space. For example, tele-medicine technologies allow patients to receive care, diagnostic services or monitoring at home or in other convenient locations, thereby reducing the need for patient travel, reducing the number of exam rooms needed, saving energy costs, and better utilizing providers remotely. Another example is, extending hours of service can also reduce the need for capital at outpatient care sites experiencing high utilization rates or projecting increased demand. VA may also utilize care in the community in lieu of facility construction, renovation/expansion, or leasing in certain circumstances to address access needs and space gaps, or to reduce the local footprint. This approach is useful where the demand for a particular service is low. NCA has established information kiosks at cemeteries, and VBA, NCA and staff offices use telework agreements when appropriate to reduce the need for space. VBA and OIT have reconfigured their offices by using smaller cubicle sizes to fit more people into the same space. VBA is also incorporating paperless technology to reduce the space needed for file storage.

Capital Asset Inventory

The SCIP process takes into account the existing portfolio of capital assets, as well as those that are in the process of being built and compares them with future needs. VA has a vast holding of diverse capital assets consisting of Government (VA) owned buildings and real estate, VA-leased buildings, enhanced-use leases, and sharing agreements pertaining to capital assets. Assets include hospitals, clinics, cemeteries, and office buildings. The number and composition of assets in the VA portfolio is constantly changing in response to VA's needs and priorities. The following table summarizes VA's recent capital holdings**.**

Table 2-1: VA Capital Asset Inventory

	VA Capital Asset Inventory - Data as of 1-10-2020						
	Owned Assets					Leased Assets	
	Bldgs.	Historic Bldgs.	Building Sq Ft	Vacant Sq Ft	Land Acres	Operational Leases	Lease Sq Ft
VHA	5,655	2,119	153,012,050	6,040,969	16,393	1,663	19,104,655
VBA	16	0	815,322	0	33	182	4,559,239
NCA	596	143	1,289,749	60,712	23,076	5	17,187
Staff	10	1	1,771,034	0	193	108	3,565,966
VA Totals	**6,277**	**2,263**	**156,888,155**	**6,101,681**	**39,695**	**1,958**	**27,247,047**
Data Source: VA Capital Asset Management System							

2) Strategic Capital Assessment (SCA)

This is a narrative produced by the Administrations and staff offices describing infrastructure deficiencies and service gaps within the organization and the strategic approach behind closing gaps over the long range SCIP planning horizon while ensuring all investments are aligned with future Veteran needs. This strategic narrative includes: planning assumptions; constraints, historic building issues; broad range plans to improve security and emergency preparedness; and the approach for meeting energy standards. Strategic capital assessments are developed at the VISN, MSN, region or area level.

3) Long Range Action Plan

The Long Range Action Plan capital plan includes 3,595 capital projects that would be necessary to close all currently-identified gaps within a 10-year planning horizon. Individual projects for major construction, minor construction, NRM, and leasing are entered into the action plan. Project cost estimates include acquisition costs only and will likely change as projects move through the investment process and as project requirements become more refined. For example, estimates are fine-tuned from action plan to business case to President's budget (project prospectus for major construction and major lease) to final design, construction documents, and project award.

In SCIP, lease costs are represented as the first year's annual unserviced rent plus any associated build out costs. The lease costs do not include future annual rent payments. This is because specific terms of the individual leases are not known at this stage of the planning process, particularly for leases planned for future years in the long range plan. Total estimated costs for leases are preliminary planning costs and are considered to be the mean cost plus or minus ten percent.

All capital investments in the Action Plan should support the Department's Strategic goals to consistently provide Veterans easy access, greater choice, and clear information to make informed decision; highly reliable and integrated care and support and excellent customer service; and modernized systems. Also, in support of the VA MISSION Act of 2018, strategic principles and guidance were utilized to encourage use of capital and non-capital solutions for expanding access and developing a high performing network, while being good financial stewards. Non-capital solutions considered included expanded use of tele-health, mobile phone apps, evening and weekend clinic hours, and same day appointments as well as addressing demand for additional specialty care. Where appropriate services are not readily available, purchase them through community care, not through expansion of VA space, decompression sites, or new sites. However, some capital solutions were required to meet VA's planning priorities and were submitted as a BC for prioritization.

4) Budget Formulation (includes Project Prioritization)

The capital programs reviewed through SCIP include Major Construction, Minor Construction, Lease, and VHA NRM projects (including Energy Management NRM projects). However, the final funds for VHA NRMs and leases are contingent on the results of the feasibility studies (for NRM energy management projects), the final funding allocations (for non-recurring maintenance), and contracting timelines (for leases). A VHA NRM decision model was created in 2019 and can be found in figure 2-5. The Nationwide

VHA Prioritized NRM SCIP List can be found in table 2-4. SCIP process improvements for 2021 took these program differences and other factors into consideration and created two separate decision models for construction and lease projects that align more closely with each program's goals and objectives. The 2021 SCIP Construction and Lease Business Case Decision Criteria Models are shown in figures 2-3 and 2-4, respectively. The Construction and Lease SCIP lists can be found in Chapter 7. Construction and Lease business case forms were also created for each program type reflecting each set of decision criteria.

While the lease and VHA NRM projects SCIP lists demonstrate the Department's highest capital priorities and inform the budget request, the budget formulation process described in this section pertains only to VA's 2021 construction programs. Formulation of the construction budget request is comprised of three components: a) newly prioritized budget year projects (the Construction SCIP List); b) ongoing projects from prior years; and c) construction programs line items. These three components are discussed in more detail, below.

a) Newly Prioritized Budget Year Construction Projects

Major and minor construction projects contained in the current budget year of the SCIP cycle (or first year) of the Long Range Action Plan are used to develop the VA Construction Programs budget request. Projects in the budget year plus 1 through 9 are considered future year needs and are not included in the funding request for that budget year. Business Cases (BCs) are developed only for the current budget year projects in the action plan that are over established dollar thresholds and contain the necessary project specific justifications that are used for scoring each project. The scoring process results in an integrated, Department-wide, prioritized list (known as the Construction SCIP List) of new unfunded capital projects used to formulate a portion of the total VA construction programs budget request. Approximately 252 major and minor construction projects that submitted BCs, from across the department, were reviewed, scored, and prioritized for the 2021 SCIP cycle.

Project Prioritization

A multi-attribute decision methodology — the analytic hierarchy process (AHP) — was used to develop the decision criteria weights and to score the business cases. This methodology facilitates complex decision making by allowing multiple evaluators to consider a number of diverse criteria when making a decision. The decision criteria weights were developed based on the recommendations of the SCIP Board and approved through the VA governance process.

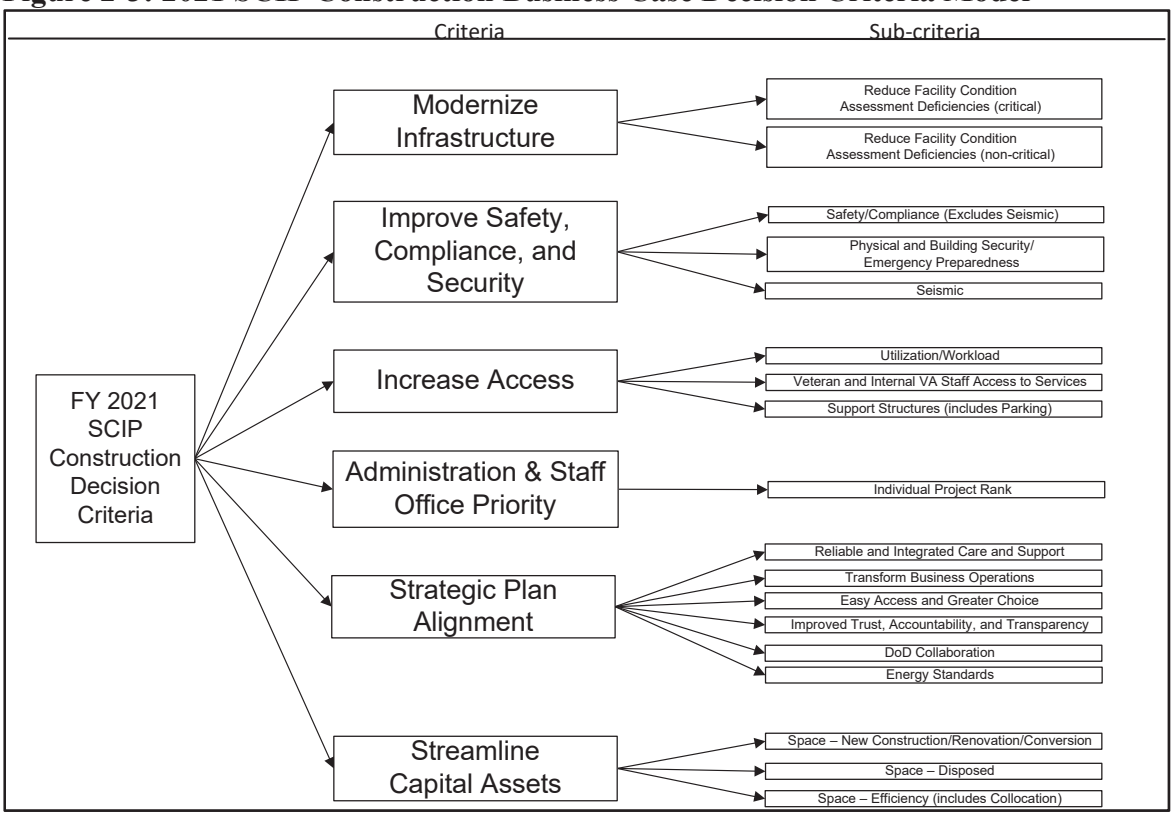
Each 2021 business case was evaluated by SCIP Panel members who scored projects on how well they address questions and demonstrate their contribution to the goals and missions of each sub-criterion, including reducing the gaps defined on page 8.2-5. Decision software was used to apply the criteria weights to the Panel scores and generate two lists of priority-ranked investments — Construction SCIP List and Lease SCIP List.

VHA NRM projects are scored and prioritized on a separate decision model that allows greater focus on local VHA VISN priorities. The VHA Prioritized NRM

Projects List was created based on SCIP approved action plan projects that were the VISN's prioritized needs for anticipated funding. This list and the NRM decision criteria model can be found on page 8.2-23. The criteria definitions used to prioritize NRM projects can be found in Appendix C.

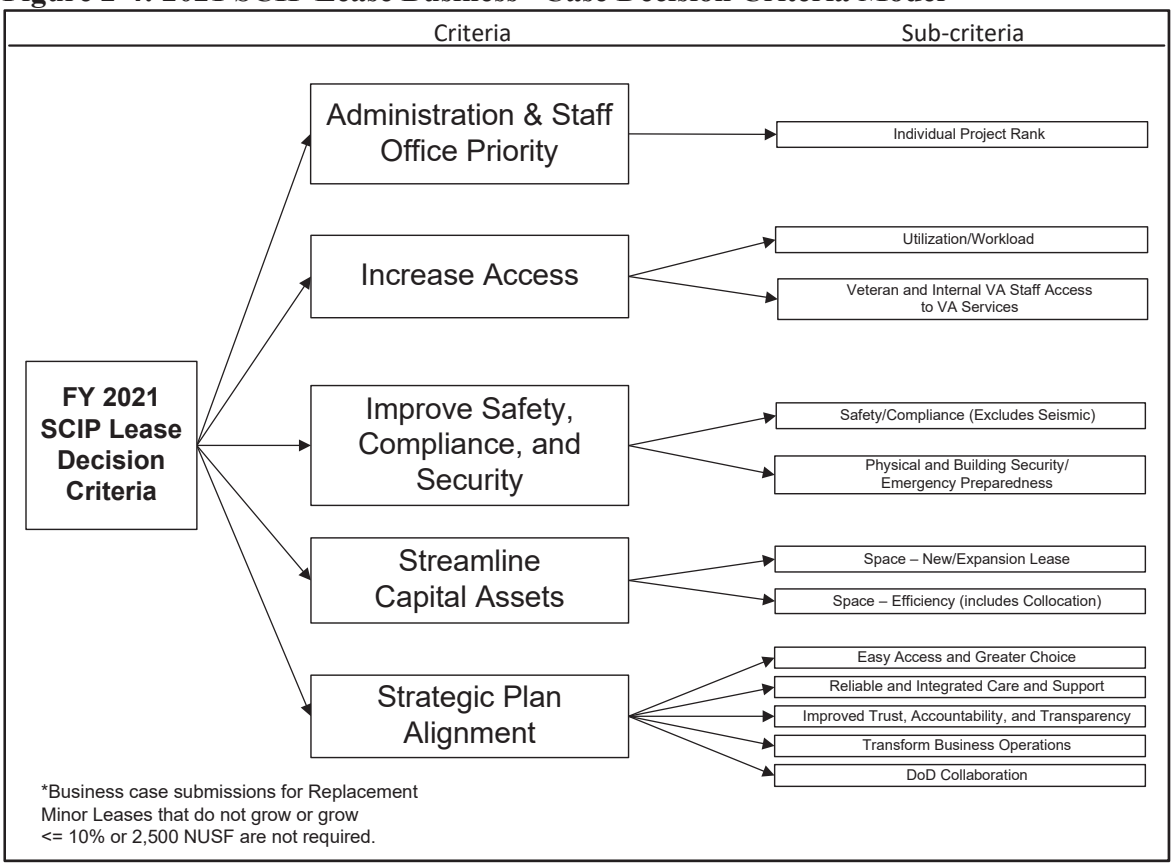
The 2021 Construction SCIP List projects submitted for funding consideration were evaluated based on the decision criteria shown in figure 2-3. The standardized Construction BC contained 18 questions related to the sub-criteria that make up the six major decision criteria and address a mix of objective and subjective areas.

Figure 2-3: 2021 SCIP Construction Business Case Decision Criteria Model



The 2021 Lease SCIP List projects submitted for funding consideration/approval were evaluated based on the decision criteria shown in figure 2-4. The standardized Lease BC contained 12 questions related to the sub-criteria that make up the five major decision criteria and address a mix of objective and subjective areas.

Figure 2-4: 2021 SCIP Lease Business* Case Decision Criteria Model



The list below is an excerpt from the full 2021 Construction SCIP List in Chapter 7 and only includes the newly scored projects for which construction funds are requested.

Table 2-2: 2021 SCIP Potential Construction Projects (Sorted by Priority)

Full Construction SCIP Priority #	VISN/Admin	City/ Cemetery	ST	Table 2-2: 2021 SCIP Potential Construction Projects Projects Considered for 2021 Funding Project Name - Short Description	Total Score	Cons. Prog.	Total Est. Project Cost ($000)	FY 21 Request ($000)
1	NCA	San Antonio	TX	Gravesite Expansion and Cemetery Improvements	0.5484	Major	$56,000	$56,000
5	22	Albuquerque	NM	Expand Spinal Cord Injury	0.4491	Minor	$13,750	$1,375
6	17	Houston	TX	Replace Building 121	0.4485	Minor	$18,481	$1,848
7	19	Oklahoma City	OK	Replace Friendship House	0.4456	Minor	$8,369	$837
8	15	Wichita	KS	Construct Addition and Renovate Bldg 3 for Pharmacy & Associated ADA Parking	0.4439	Minor	$14,950	$1,495
9	7	Charleston	SC	Correct Seismic Deficiencies by Expanding OR's for Hybrid Capabilities	0.4276	Minor	$14,544	$1,454
10	NCA	San Diego	CA	Miramar Gravesite Expansion and Cemetery Improvements	0.4261	Major	$31,000	$31,000
12	12	Chicago	IL	Add 2nd FL Bld 30 Womens Outpatient Specialty Clinic	0.4171	Minor	$15,200	$1,520
13	22	Tucson	AZ	Construct New Prosthetics and Rehab Building	0.4126	Minor	$17,614	$1,761
14	9	Murfreesboro	TN	Construct Integrated Health Center	0.3998	Minor	$17,389	$1,739
15	16	Jackson	MS	Outpatient Services Center	0.3996	Minor	$15,000	$1,500
16	NCA	Canton	GA	Gravesite Expansion and Site Improvements (PPC, IGC, Columbaria)	0.3983	Minor	$13,210	$1,321
17	2	Bronx	NY	Construct New Therapeutic Pool Building	0.3882	Minor	$8,950	$895
18	15	Topeka	KS	Construct Outpatient Mental Health Addition	0.3854	Minor	$9,362	$936
19	23	Fargo	ND	Construct Parking Ramp	0.3752	Minor	$15,943	$1,594
21	4	Lebanon	PA	Construct New Entry Building 17	0.3585	Minor	$6,225	$623
22	NCA	Ft. McPherson	NE	Gravesite Expansion (IGC, Memorial Wall)	0.3521	Minor	$2,030	$2,030
23	10	Ann Arbor	MI	Expand Inpatient Mental Health (Privacy, Infection Control, ADA Deficiencies) Modernization Market Based Initiative	0.3479	Minor	$15,790	$1,579
24	1	Bedford	MA	Construct New Research Phase 1, Demo Bldg 17	0.3460	Minor	$17,532	$1,753
25	5	Baltimore	MD	Construct Building to Expand Behavioral Health, Condense Prosthetics and Relocate Home Based Primary Care	0.3452	Minor	$15,980	$1,598
28	6	Fayetteville	NC	Construct Maintenance Shops	0.3292	Minor	$14,918	$1,492
30	10	Fort Wayne	IN	Build Specialty Care Building	0.3178	Minor	$15,579	$1,558
31	NCA	Los Angeles	CA	Gravesite Expansion (Columbarium)	0.3059	Minor	$18,970	$1,897
32	19	Salt Lake City	UT	Consolidate Research	0.3051	Minor	$14,022	$1,402

Full Construction SCIP Priority #	VISN/Admin	City/ Cemetery	ST	Table 2-2: 2021 SCIP Potential Construction Projects Projects Considered for 2021 Funding Project Name - Short Description	Total Score	Cons. Prog.	Total Est. Project Cost ($000)	FY 21 Request ($000)
33	NCA	Omaha	NE	Gravesite Expansion (PPC, PPUC, Columbaria)	0.3009	Minor	$9,920	$992
35	22	San Diego	CA	Expand Inpatient Psychiatry, B01, 2SE - Phase 2	0.2991	Minor	$7,612	$761
36	15	Poplar Bluff	MO	Construct New Outpatient Mental Health, RRTP Facility for Whole Health Integration	0.2976	Minor	$16,000	$1,600
37	10	Marion	IN	Build Warehouse, Marion	0.2960	Minor	$14,331	$1,433
39	12	Danville	IL	Construct New CLC Homes 9 & 10	0.2932	Minor	$14,760	$1,476
40	6	Asheville	NC	Expand Building 62 for Geriatric-Psychiatric Beds	0.2847	Minor	$8,580	$858
41	10	Dayton	OH	Expand Emergency Department	0.2780	Minor	$14,874	$1,487
42	19	Salt Lake City	UT	Establish Welcome Center	0.2779	Minor	$14,100	$1,410
43	NCA	St Louis	MO	Renovate Chapel	0.2760	Minor	$1,180	$1,180
44	6	Richmond	VA	Improve Privacy of Spinal Cord Injury Patients	0.2744	Minor	$15,918	$1,592
45	19	Tulsa	OK	Construct Inpatient Facility	0.2735	Major	$297,542	$120,000
53	NCA	Biloxi	MS	Gravesite Expansion (Columbaria)	0.2558	Minor	$2,380	$2,380
86	NCA	Sarasota	FL	Gravesite Expansion (PPC, Traditional Sites, Columbaria)	0.2224	Minor	$9,450	$945
97	Staff	Washington	DC	Build Out for 1800 G. Street Replacement	0.2146	Minor	$19,500	$19,500
136	Staff	Washington	DC	Build Out for 425 I St. NW Replacement	0.1937	Minor	$14,000	$14,000
161	VBA	Decatur	GA	Renovate and Realign Atlanta RO, Flr 2	0.1731	Minor	$19,900	$19,900

b) On-going Projects from Prior Years

Major and minor construction projects that are construction-ready and in active development make up a portion of each year's construction programs budget request. Major construction projects that are being actively developed and require additional funding to complete are included in table 2-3: 2021 Five Year Development Plan (FYDP), below.

Five Year Development Plan

The FYDP is VA's funding plan for major construction projects for the next five years. The FYDP complies with Public Law 114-223 (section 258) that directed VA budget justification documents to include the funding requested for the budget year and "the 4 fiscal years succeeding the budget year". The FYPD provides more rigor to the planning process to ensure that proposed major construction projects make the best case possible for why they should receive funding, and that the requested funding is a valid estimate of the actual cost to complete the identified projects.

Projects added to the FYDP are high priority major construction projects on which VA has begun active planning in order to include in a future budget submission for design and/or construction funding. Major VHA projects are eligible for funding consideration once they have met the 35% design requirement. The 35% design requirement was implemented starting with the 2015 budget process to ensure more accurate budget and project cost estimates for major construction projects. The estimated total cost of a project is not locked in and the project cannot request construction funds in a budget request until the 35% design requirement is met. These projects are selected for funding consideration based on their SCIP priority, their ability to award a contract in the budget year, and the Department's best estimate of potential near-future major construction resources. The priority order for all VHA projects listed in the FYDP is locked; they do not have to recompete in SCIP, and would not need to submit a new SCIP business case application in 2022. The specific projects on the FYDP requested for future-year funding will not necessarily be determined solely by priority order but also by the amount of available resources in the budget year.

The 2021 SCIP list was used to identify additional major construction projects for the FYDP and future funding consideration. For 2021, two newly prioritized NCA gravesite expansion projects were chosen for inclusion on the FYDP and in the budget request at the following cemeteries: San Antonio, TX and San Diego, CA. See Chapter 2 for more detailed descriptions (prospectuses) of these projects. Future cemetery projects were added to the FYDP to ensure continued access to burial options for Veterans at those locations. Because gravesite expansion projects also prevent closure at existing National Cemeteries, they are paramount to supporting VA's ability to continue to offer burial services to Veterans in those locations that are in danger of closing without expansion. Business cases for these future year projects will be submitted and prioritized in a future year. Four additional VHA major construction projects were also added to the 2021 FYDP. Those newly scored major construction projects are located in: Gainesville, FL; Charleston, SC; Tampa, FL, and Tulsa, OK. The Tulsa, OK project is in the budget request and is an eligible candidate for the CHIP IN Act of 2016 pilot program. See Chapter 9.2: Communities Helping Invest through Properties and Improvements Needed (CHIP IN) for Veterans Act of 2016 for more details. In addition, seven on-going major construction projects currently on the FYDP and previously funded by other appropriations, require additional appropriations and authorizations to move forward with a subsequent phase have been added to the construction request. Those seven on-going major construction projects for VHA are located in: American Lake, WA; Long Beach, CA; Canandaigua, NY; Alameda, CA; San Diego, CA; Livermore, CA; and Dallas, TX. The prospectuses for these projects are in Chapter 2.

Table 2-3: 2021 Five Year Development Plan[1] (Dollars in Thousands)

City	ST	Project Name - Short Description	TEC[2]	Funding thru FY20	FY21	FY22	FY23	FY24	FY25	Remaining Need After FY25
Portland	OR	Upgrade Bldg 100/101 Seismic Retrofit & Renov	650,000	0	0	0	390,000	0	0	260,000
American Lake[3]	WA	Construction of New Specialty Care Building 201	110,600	16,260	94,340	0	0	0	0	0
San Francisco[4]	CA	Seismic Retrofit/Replace Buildings 1, 6, 8, and 12	346,700	180,480	0	0	0	0	0	166,220
Palo Alto	CA	Centers for Polytrauma/Blind Rehabilitation, Ambulatory Care & Research	716,600	472,600	0	244,000	0	0	0	0
West Los Angeles	CA	Build New Critical Care Center	TBD	75,790	0	TBD	TBD	TBD	TBD	TBD
Long Beach	CA	Mental Health & Community Living Center	367,300	317,300	50,000	0	0	0	0	0
Canandaigua	NY	Construction & Renovation	443,900	353,741	30,000	0	0	0	0	60,159
Alameda	CA	Community Based Outpatient Clinic & National Cemetery	310,500	113,332	152,868	0	44,300	0	0	0
San Diego	CA	SCI & Seismic Bldg 11	311,700	230,840	21,260	0	0	59,600	0	0
Livermore	CA	Realignment & Closure, Livermore Campus	505,000	311,730	143,270	50,000	0	0	0	0
Dallas	TX	Spinal Cord Injury	265,600	170,500	78,500	0	0	0	0	16,600
Roseburg	OR	Seismic Upgrade & Renovate Bldg 2 & Replace Bldg 1	166,520	0	0	0	0	166,520	0	0
Reno	NV	Correct Seismic Deficiencies & Expand Clinical Services Bldg	241,800	223,800	0	18,000	0	0	0	0
Fort Harrison	MT	Seismic Upgrade & Specialty Care Improvements	192,500	0	0	0	192,500	0	0	0
St. Louis (JC)	MO	Replace Bed Tower, Clinical Bldg Expansion & Parking Garage	TBD	43,340	0	0	TBD	TBD	TBD	TBD
El Paso	TX	Construct New Health Care Center	TBD	0	0	0	0	TBD	TBD	TBD
West Haven	CT	Construct New Surgical and Clinical Space Tower, Demolish Bldgs 7, 8, 8.5 and 9	TBD	0	0	0	0	TBD	TBD	TBD
Dallas	TX	Construct Clinical Expansion for Mental Health	TBD	15,640	0	0	TBD	TBD	TBD	TBD
Tampa	FL	Construct and renovate SCI and Polytrauma Transitional Rehab Program Beds Blg 38	TBD	0	0	0	0	TBD	TBD	TBD
San Antonio	TX	Gravesite Expansion and Cemetery Improvements	56,000	0	56,000	0	0	0	0	0
Gainesville	FL	Correct NonCompliant Surgical, Emergency, Pharmacy and Sterile Process	TBD	0	0	0	0	0	TBD	TBD
San Diego	CA	Miramar Gravesite Expansion and Cemetery Improvements	31,000	0	31,000	0	0	0	0	0
Charleston	SC	Charleston Bed Tower Replacement	TBD	0	0	0	0	0	TBD	TBD
Tampa	FL	Expand VAMC Primary Care	TBD	0	0	0	0	0	TBD	TBD
Tulsa[5]	OK	Construct Inpatient Facility	220,900	0	120,000	0	0	0	0	0

City	ST	Project Name - Short Description	TEC[2]	Funding thru FY20	FY21	FY22	FY23	FY24	FY25	Remaining Need After FY25
Ft. Logan	CO	Gravesite Expansion (PPC, IGC, Columbaria)	40,000	0	0	40,000	0	0	0	0
Indiantown Gap	PA	Gravesite Expansion	32,000	0	0	0	32,000	0	0	0
Los Angeles	CA	New Cemetery (Sepulveda)	40,000	0	0	0	40,000	0	0	0
Tahoma	WA	Gravesite Expansion and Cemetery Improvements	30,000	0	0	0	0	30,000	0	0
Albuquerque	NM	Santa Fe Replacement at Albuquerque	55,000	0	0	0	0	55,000	0	0
Philadelphia	PA	Washington Crossing Phase 2 Expansion	50,000	0	0	0	0	0	50,000	0
St. Louis	MO	Jefferson Barracks Expansion	60,000	0	0	0	0	0	60,000	0
Total, Five Year Development Plan				**2,525,353**	**777,238**	**352,000**	**698,800**	**311,120**	**110,000**	**502,979**

[1]The specific projects on the FYDP that will be requested for the future-year funding will not necessarily be determined solely by priority order but also by the amount of available resources in the budget year.
[2] Total estimated cost listed is a magnitude cost that may change as project is fully developed & funds are requested.
[3] Part of this project is funded with the Seismic Line item - Building 81 Seismic Corrections, Renovation of Bldg 81AC and 18
[4] Part of this project is funded with the Seismic Line item - Seismic Retrofit/Replace Buildings 1, 6, and 8 will be funded with the Seismic Line Item. Revised Scope and TEC will be published in a future submission.
[5] Project is CHIP IN Act (P.L. 114-294) eligible. VA contribution is expected to be $120M, with the donor providing land, buildings and funds to complete the project.

c) Major Construction Program Line Items

Costs for construction program line items for advance planning and design funds; asbestos, hazardous waste; judgment fund; construction and facilities management staff; non-departmental Federal entity for project management support; NCA land acquisition; and the seismic corrections funds are also included in the annual construction programs budget request. Descriptions of each of these line items, can be found in Chapter 2.

Combining these three components **— newly prioritized projects, prior year on-going projects, and Major Construction line items —** to formulate the construction programs budget request is described in the next section named Applying the SCIP Process to the Construction Programs Budget Request.

Applying the SCIP Process to the Construction Programs Budget Request

The annual construction programs budget request results from the combination of the three components discussed in the Budget Formulation section, starting on page 8.2-7. Once the budget year's potential new construction projects are prioritized through SCIP, a decision must be made about which projects to include in the annual construction programs budget request. The construction programs budget request consists of the funding necessary to support:

- construction-ready major projects in the VA FYDP (table 2-3, above);
- completion of existing construction-ready ongoing minor construction projects;
- major construction line items; and
- newly prioritized major construction projects (for planning and design of VHA and VBA projects and for construction of NCA projects) and minor construction projects from the 2021 SCIP list (Chapter 7)

Each year emphasis is placed on finding the right balance between including new major construction projects from the FYDP, ongoing major construction FYDP projects, ongoing minor construction projects, line items, and the need to address new critical requirements from the SCIP list. Ongoing minor construction projects are those that are being actively developed, included in approved operating plans, and/or included in previous VA Capital Plans as budget year planned projects.

The three-step process that VA leadership (through the VA governance process) uses to formulate the construction programs budget request is outlined below.

Step One: Choose the specific ongoing major construction and ongoing minor construction projects, from previous years, to fund based on the ability to execute a contract award within the budget year. Major construction projects for VHA and VBA must also meet the 35% design (construction ready) requirement. NCA does not have this requirement as cemetery projects are not as complex and use the design-build method.

Step Two: Add an amount for major construction line items for each Administration and the staff offices.

Step Three: Add newly prioritized construction projects, in priority order, until prescribed funding levels for each construction program (by Administration/ Staff Office) are reached. This step also includes selecting, from the highest ranked new major construction projects, one or more to be added to the five year development plan.

Occasionally major construction projects may not be included in the funding request, resulting in projects selected out of priority order, due to a number of reasons. These include the need to acquire land, complete studies, dependence on a previous project phase, programmatic reasons (such as new program guidance or directives that would impact infrastructure decisions), expected resource levels, or other reasons that would not allow a contract to be awarded in the budget year. It is important to also point out that the SCIP process is a management tool that assists senior VA officials in making their capital investment decisions; it is not a mechanism by which funding amounts are determined. SCIP identifies Department-wide needs/gaps and determines the relative criticality of projects for the budget year (the SCIP List), and long-range potential projects (future year needs), after a rigorous evaluation process using specific criteria (prioritization).

Leases

VA may utilize leasing in lieu of facility construction to address access needs and space gaps. Leasing enables VA to quickly respond to health care advances and adopt changing technology in order to provide state-of-the-art healthcare to Veterans. Leasing provides flexibility to help address the constant challenge to keep up with the ever changing pace of medical advancement. Leasing also provides flexibility to rapidly adjust to current and future demographic shifts and changing service demands. More specifically, leasing allows VA to scale real property assets to adapt to changes without committing the Department to long-term obligations.

VA's capital needs also change quickly with the evolution of medical technology – and leasing provides a flexible alternative to construction. Should the government no longer have a need for the asset – for example, due to the changing demographics of the Veteran population – under a lease, the Government has no future responsibility after the expiration of the lease. Federal ownership means the government bears the responsibility of disposing of the owned asset. Disposal also requires additional outlays of funds, time, and personnel resources; with leasing, these resources may be redirected toward serving our Veteran community.

In all leasing scenarios, OMB Circular A-11 outlines the budgetary treatment of the lease. The criteria for determining lease treatment is in place to ensure that the lease makes financial sense for the government. A copy of this test is provided to VA's authorizing committees with each Congressional notification package for major lease awards, as required by P.L. 113-146 (the Veterans Choice Act). Another benefit of leasing is that the lessor bears the responsibility of maintaining the leased space. This degree of continuity is important because any potential concerns with the space can be quickly addressed and resolved by the lessor. Should the government no longer have a need for the leased space, the government can quickly dispose of the asset by simply returning the space to the lessor.

This benefits Veterans by eliminating a strain on resources that could result from maintaining outdated assets, freeing funding to potentially provide additional facilities to increase access for Veterans.

To further illustrate the flexibility that leasing provides, between July 2014 (FY 2014) and September 2019 (FY 2019), GSA approved 1,527 lease delegation requests from VA. Of the 1,527 delegations, 683 (45%) involved existing contracts and 844 (55%) involved new contracts. Existing contracts consisted of situations that involved minor within-scope modifications (expansions) or instances where the lease continued within its original scope (extensions and renewals). New contracts consisted of situations where either no lease had existed (new) or where an existing lease was replaced with a new lease (new/replacing, succeeding, or superseding). One subset of new contracts consisted of instances where there was a new requirement to provide Veterans services in a specific service area, but no facility existed within the service area. In these cases, VA sought delegations to obtain 274 new leases and 100% of these new leases therefore resulted from a change in requirements, in this case a brand new requirement. The other subset of new contracts consisted of replacement contracts which were instances where an existing lease was replaced with, succeeded by, or superseded by a new lease. In these cases, VA sought delegations to obtain 570 replacement contracts and 311 (55%) of these leases involved a change in requirements that necessitated either a new lease scope and/or a move to a new location. As a result, the flexibility provided by leasing in those instances where VA needed to move locations or change the scope of a leased facility is clearly demonstrated in the majority of the delegation requests that involved new contracts.

Specific Lease/GSA Space Assignment projects for FY 2021 are not included in the construction program's budget request because they are funded from individual Administration's and Staff Office operating accounts, subject to availability of funds. The SCIP process created two lease lists — one consists of all new and replacement major leases and replacement minor leases that increase in size over the established threshold of 10% or 2,500 net useable square feet and required a full business case submission to be scored and prioritized. This list can be found in table 7-2: 2021 SCIP Lease List, in Chapter 7. The second list contains all replacement minor leases that did not increase beyond the established growth threshold, were submitted in approved action plans, and did not require a full business case submission to be scored. This list can be found below in table 2-4: 2021 SCIP-Approved Potential Replacement Minor Leases. The leases on both lists are approved to be awarded in 2021 based on funding availability and programmatic needs and priorities.

The amounts for each lease in the FY 21 Request column of table 2-4 represent a preliminary planning estimate of the first year annual unserviced rent plus any build out and are considered to be the mean cost in a range of plus or minus 10 percent. Major Leases (for a medical facility with an annual unserviced rent of $1 million or more) included in the table require Congressional authorization and are presented in more detail in Chapter 6: VA Lease Notifications, Major Medical Facility Project & Lease Authorizations. Minor Leases with an annual unserviced rent of less than $1 million and all leases that are not for a medical facility do not require Congressional authorization. The leases may change because they are considered potential and subject to the availability of funds and GSA oversight and delegation of authority before they can be executed.

Table 2-4: 2021 SCIP-Approved Potential Replacement Minor Lease List (Sorted by State, then by City)

VISN/ Admin	City	ST	2021 SCIP-Approved Potential Replacement Minor Leases Project Name - Short Description	FY 21 Request ($000)
Staff	Washington	DC	OGC - Akron	$63
Staff	Washington	DC	OGC - Winston-Salem	$66
VBA	Montgomery	AL	Mobile VR&E Office	$20
VBA	Montgomery	AL	Daleville VR&E Office	$117
VBA	Montgomery	AL	Pensacola VR&E Office	$246
VBA	Phoenix	AZ	Tucson VR&E Office	$430
VBA	Oakland	CA	Oakland RO Storage	$22
VBA	Oakland	CA	Chico VR&E Office	$42
VBA	Decatur	GA	Columbus VR&E Office	$17
VBA	Decatur	GA	Savannah VR&E Office	$70
VBA	Boston	MA	Worcester VR&E Office	$12
VBA	Detroit	MI	Detroit RO Parking	$50
VBA	Fort Snelling	MN	Duluth VR&E Office	$6
VBA	St Louis	MO	St Louis RMC 104E Bldg	$285
VBA	Manchester	NH	Manchester RO 1	$801
VBA	Newark	NJ	Newark RO Antenna	$2
VBA	Buffalo	NY	Buffalo RO3	$240
VBA	Cleveland	OH	Cincinnati VR&E Office	$434
VBA	Muskogee	OK	Muskogee RO 4	$47
VBA	Portland	OR	Eugene VR&E Office	$160
VBA	Philadelphia	PA	Philadelphia RO 2	$140
VBA	Philadelphia	PA	Philadelphia RO 4	$310
VBA	Manila	RP	Christian Mejia SSD Chief	$52
VBA	Nashville	TN	Knoxville Parking	$3
VBA	Nashville	TN	Memphis VR&E Office	$145
VBA	Nashville	TN	Knoxville VR&E Office	$155
VBA	Nashville	TN	Nashville RO Parking	$193
VBA	Waco	TX	Fort Worth VR&E Office	$190
VBA	Roanoke	VA	Roanoke Parking	$20
VBA	Seattle	WA	Seattle RO2	$55
VBA	Seattle	WA	Mount Vernon VR&E Office	$99
VBA	Seattle	WA	Bremerton VR&E Office	$201
16	Fayetteville	AR	Mental Health Services	$40
16	Fayetteville	AR	Ozark, AR CBOC	$132
16	Fayetteville	AR	Jay, OK CBOC	$318
22	Tucson	AZ	Green Valley Outpatient Clinic	$645
22	Tucson	AZ	Yuma Outpatient Clinic	$2,675
22	Loma Linda	CA	Blythe Tele-Health	$80
22	Loma Linda	CA	Prosthetics	$280
22	Loma Linda	CA	Business Office	$340
22	Long Beach	CA	Santa Ana Community Resource and Referral Center	$353
22	Long Beach	CA	Long Beach Veterans Villages Recovery Center	$765
22	Los Angeles	CA	Westside Residence Hall	$558
21	Palo Alto	CA	Modesto CBOC	$985
21	Sacramento	CA	Redding Clinical Annex	$1,108
22	San Diego	CA	San Diego Comp & Pen Exam	$939
19	Denver	CO	Mt. Towers OIG St. 305	$75

VISN/ Admin	City	ST	2021 SCIP-Approved Potential Replacement Minor Leases Project Name - Short Description	FY 21 Request ($000)
19	Denver	CO	La Junta CBOC	$151
VHA	Washington	DC	VC209.2 Aberdeen, MD Vet Center	$20
VHA	Washington	DC	VC406.1 Grand Forks, ND Vet Center Outstation	$25
VHA	Washington	DC	VC442.1 Wausau, WI Vet Center	$45
VHA	Washington	DC	VC702 Amarillo, TX Vet Center	$55
VHA	Washington	DC	VC431 Cedar Rapids, IA Vet Center	$60
VHA	Washington	DC	VC227 DuBois, PA Vet Center	$65
VHA	Washington	DC	VC243 Georgetown, DE Vet Center	$65
VHA	Washington	DC	VC108 Manchester, NH Vet Center	$65
VHA	Washington	DC	VC619 San Luis Obispo, CA Vet Center	$70
VHA	Washington	DC	VC444 South Bend, IN Vet Center	$75
VHA	Washington	DC	VC401 Dearborn, MI Vet Center	$75
VHA	Washington	DC	VC349 Columbus, GA	$90
VHA	Washington	DC	VC236 Dundalk, MD Vet Center	$90
VHA	Washington	DC	VC102 Jersey City, NJ Vet Center	$90
VHA	Washington	DC	VC205 Cleveland, OH Vet Center	$90
VHA	Washington	DC	VC733 Abilene, TX Vet Center	$95
VHA	Washington	DC	VC516 Farmington, NM Vet Center	$100
VHA	Washington	DC	VC336 Pompano Beach, FL Vet Center	$100
VHA	Washington	DC	VC348 Naples, FL Vet Center	$105
VHA	Washington	DC	VC213 Silver Spring, MD Vet Center	$111
VHA	Washington	DC	VC541 Walla Walla County, WA Vet Center	$112
VHA	Washington	DC	VC537 Yuma, AZ Vet Center	$115
VHA	Washington	DC	VC415 Milwaukee, WI Vet Center	$127
VHA	Washington	DC	VC621 Western Oahu, HI Vet Center	$160
VHA	Washington	DC	VC502 Anchorage, AK Vet Center	$167
VHA	Washington	DC	VC236 Dundalk, MD Vet Center	$200
VHA	Washington	DC	VC626 Eugene, OR Vet Center	$208
VHA	Washington	DC	VC510 Spokane, WA Vet Center	$283
VHA	Washington	DC	VC536 Lake Havasu, AZ Vet Center	$468
VHA	Washington	DC	VC340 Lakeland, FL Vet Center	$535
VHA	Washington	DC	VC434 Escanaba, MI Vet Center	$540
VHA	Washington	DC	VC101 Boston, MA Vet Center	$595
VHA	Washington	DC	VC425 Sioux Falls, SD Vet Center	$625
VHA	Washington	DC	VC424 Omaha, NE Vet Center	$660
8	Miami	FL	Hollywood CBOC	$161
8	Orlando	FL	Port Orange PRRC	$825
8	St Petersburg	FL	VISN 8 ORM ORC	$816
20	Boise	ID	HBPC/OIT	$876
12	Hines	IL	LaSalle CBOC	$1,256
15	Wichita	KS	Dodge City VA Clinic	$658
10	Ann Arbor	MI	Toledo Annex Lease	$28
10	Ann Arbor	MI	Packard Road Clinic	$60
10	Ann Arbor	MI	CWT/Homeless Lease	$62
10	Battle Creek	MI	Grand Rapids Service Center Lease	$128
12	Iron Mountain	MI	Sault Ste Marie CBOC	$501
23	Eagan	MN	VISN 23	$900
15	Columbia	MO	Marshfield CBOC	$456
15	Kansas City	MO	Warrensburg VA Clinic	$1,337
15	St Louis	MO	St. Louis Administrative	$1,122

VISN/ Admin	City	ST	2021 SCIP-Approved Potential Replacement Minor Leases Project Name - Short Description	FY 21 Request ($000)
6	Durham	NC	Parking Lease 2	$330
6	Durham	NC	Hillandale 1 Clinic	$505
6	Durham	NC	Renew Raleigh II (IOP Office)	$560
6	Durham	NC	Raleigh Dialysis Clinic and Blind Rehab	$580
6	Durham	NC	VA NCHPD	$700
6	Fayetteville	NC	Pembroke/Robeson CBOC	$811
6	Fayetteville	NC	Dialysis Unit	$1,212
6	Fayetteville	NC	Goldsboro CBOC	$1,247
6	Fayetteville	NC	Warehouse	$1,543
23	Omaha	NE	Omaha Logistic Warehouse Space	$139
2	Buffalo	NY	Jamestown HBPC	$190
2	Montrose	NY	Monticello CBOC	$770
10	Cincinnati	OH	IPEC and Fiscal	$1,160
VHA	Cleveland	OH	Network Contracting Office, Honolulu, HI	$250
VHA	Cleveland	OH	Network Contracting Office in Fresno, CA	$300
VHA	Cleveland	OH	Regional Procurement Office-West, McClellan, CA	$300
10	Cleveland	OH	Akron Community Resource Referral Center	$693
10	Cleveland	OH	Community Referral and Resource Center	$835
VHA	Cleveland	OH	NCO 22G	$1,525
VHA	Cleveland	OH	GLAC Office	$2,208
4	Philadelphia	PA	Philadelphia Medical Center Administration Space	$210
1	Providence	RI	Middletown CBOC	$250
1	Providence	RI	Audiology and Comp&Pen (Eagle 5)	$260
7	Charleston	SC	Community Resource and Referral Center	$424
20	Walla Walla	WA	Boardman (Morrow County) CBOC	$140
20	Walla Walla	WA	La Grande Oregon Clinic	$500

Prioritized VHA Non-Recurring Maintenance SCIP List

VHA uses its Non-Recurring Maintenance (NRM) projects to make additions, alterations, and modifications to land, buildings, other structures, nonstructural improvements of land, and fixed equipment (when the equipment is acquired under contract and becomes permanently attached to or part of the building or structure); to maintain and modernize existing campus facilities, buildings, and building systems; replace existing building system components; provide for adequate future functional building system capacity without constructing any new building square footage for functional program space; and/or provide for environmental remediation and abatement, and building demolition.

The NRM program is the primary means of addressing VHA's most pressing infrastructure needs as identified by Facility Condition Assessments (FCA). These assessments are performed at each facility every three years and highlight a building's most pressing and mission critical repair and maintenance needs. VHA specifically supports research and development infrastructure projects by ensuring that the Office of Research and Development is involved in the identification of gaps to support the SCIP process. This inclusion ensures a research focus for mitigation within a 10-year window of identified research infrastructure deficiencies.

The three NRM project types are described below. NRM-Sustainment (NRM-Sus) and NRM-Infrastructure Modernization (NRM-IM) are included in the SCIP process.

NRM-Sustainment (NRM-Sus):
NRM-Sus projects involve the provision of resources that will convert functional space to a different program function within existing buildings or spaces, without adding any new space. Each sustainment project must be equal to, or less than, the amount set forth in in title 38, United States Code, section 8104 (currently $20 million). The total project cost includes all amounts and expenditures associated with design, impact, contingency, and construction costs.

NRM Infrastructure Modernization (NRM-IM):
NRM-IM projects involve the provision of resources to repair, modernize, replace, renovate, and provide for new "building systems," and do not convert functional space to a different program function. Such projects have no project cost limitation; however, any work to be done beyond the underlying building system must be ancillary to the overall total project cost (not exceed 25% of the total project cost). The overall total project cost includes all amounts and expenditures associated with design, impact, contingency, and construction costs.

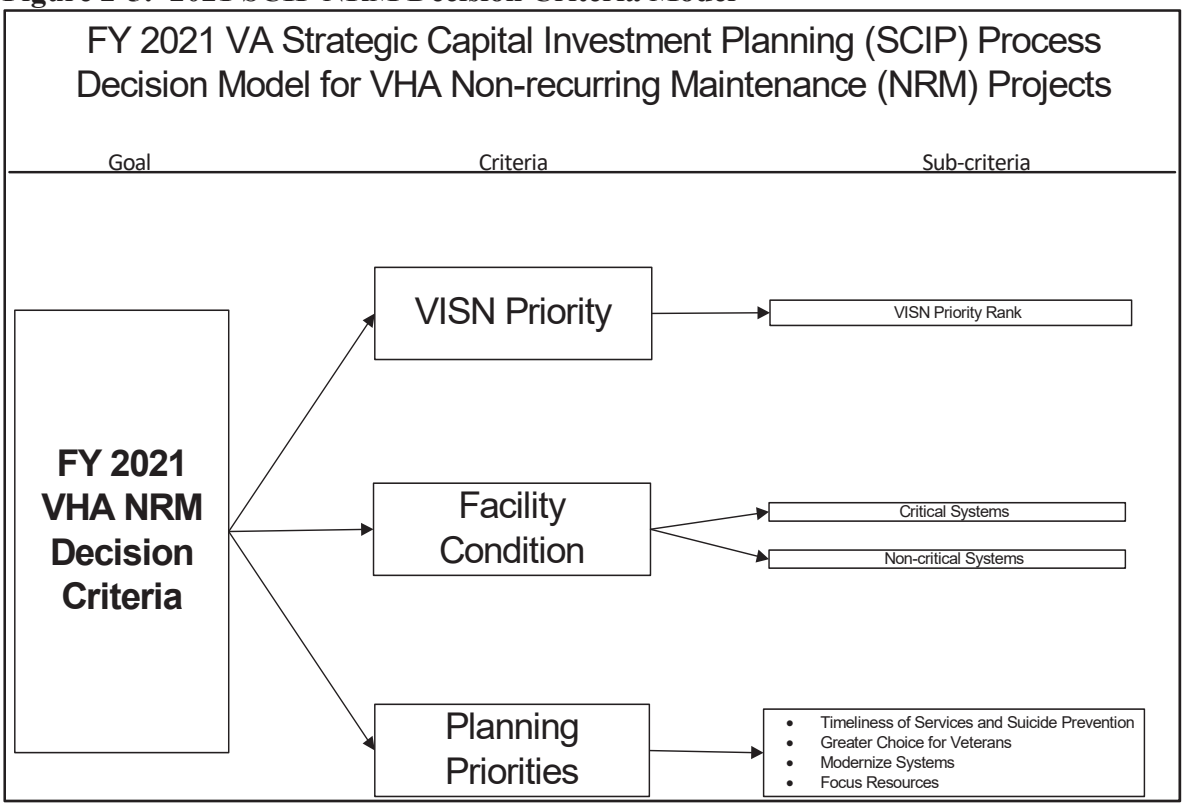
The types of building systems permitted for NRM-IM projects consist of the following: building thermal and moisture protection; doors and windows; interior finishes only directly related with building system work; conveyance and transport systems; fire suppression; plumbing; heating, ventilation, and air conditioning; electrical systems; communication systems; safety and security systems; utility systems, boiler plants, chiller plants, water filtration and treatment plants, cogeneration plants, central energy plants, elevator towers, connecting corridors, and stairwells.

Clinical Specific Initiative (CSI):
CSI projects are not included in the SCIP process. CSI projects are emergent projects that cannot be planned due to dynamic health care environments. Associated funding for these projects is distributed to the VISNs at the beginning of each year, to obligate towards existing clinical building space, and address workload gaps, or support access within the following VHA high profile categories:

- Women's Health
- Mental Health
- High-Cost/High Tech Medical Equipment Site Prep/Installations (only this CSI project type may involve the construction of new program functional building space)
- Reduce the Footprint Reduction (includes building demolition or conversion of under-utilized space to clinical functions)
- Donated Building Site Preparation (e.g. Fisher House) when constructed on VHA land
- Other Emergent Need Categories may be added to CSI program based on direction from the Under Secretary for Health.

NRM-Sus and NRM-IM projects were submitted from all VHA facilities, nationwide and were prioritized using the SCIP NRM decision criteria and weights. The 2021 NRM decision criteria model can be found in Figure 2-4, below. See Appendix C for the NRM criteria definitions.

Figure 2-5: 2021 SCIP NRM Decision Criteria Model



Listed below are the potential non-recurring maintenance (NRM) projects for 2021, in priority order. NRM projects are funded from the Medical Facilities appropriation and are subject to change during execution based on funding availability and project readiness. Projects that may be eligible to be funded by the Major Construction Seismic Corrections program are indicated in Table 2-5 below.

Table 2-5: 2021 VHA Non-Recurring Maintenance (NRM) SCIP List (Sorted by Priority)

*SUS is the NRM-Sustainment project type and IM is the NRM-Infrastructure Modernization project type.

Priority #	VISN	City	ST	2021 Nationwide Prioritized NRM SCIP List Project Name - Short Description	Total Score	NRM Project Type*	Total Est. Project Cost ($000)
1	8	Tampa	FL	Renovate for Surgery Support, Building 1, 2nd Floor, A Wing	0.9681	SUS	$16,261
2	20	Boise	ID	Correct Mechanical/Electrical Deficiencies	0.9511	IM	$2,228
3	8	Tampa	FL	Renovate Building 1, 7th Floor North Wing	0.9395	SUS	$7,013
4	8	Tampa	FL	Renovate Building 1, 4 West, Specialty Clinics	0.9379	SUS	$7,976
5	15	Leavenworth	KS	Upgrade SPS to Comply with HVAC VHA Directive 1116(2)	0.9228	IM	$2,420
6	15	Columbia	MO	Relocate Medical Ward for Patient Privacy	0.9195	SUS	$11,927
7	10	Marion	IN	Remodel Building 3	0.9059	SUS	$13,000
8	15	Poplar Bluff	MO	Replace Air Handler 5	0.8986	IM	$5,000
9	23	Sioux Falls	SD	Renovate 1st Floor/Dock/180 for Kitchen and Café	0.8892	SUS	$5,089
10	1	Togus	ME	Replace Elevators, Building 200/200E	0.8781	SUS	$5,471
11	9	Memphis	TN	Replace Boilers 1, 2, and 3	0.8660	IM	$8,836
12	10	Ann Arbor	MI	Modernize Building 22	0.8483	SUS	$6,691
13	7	Birmingham	AL	Replace/Upgrade Elevators P1-P4, S5, P7, P8, P9, and P10	0.8447	IM	$6,233
14	12	Danville	IL	Replace Medium Voltage Circuits 4, 6, 7, & 8	0.8435	IM	$2,283
15	17	San Antonio	TX	Replace Elevators P1, P2, P3, and P4	0.8432	IM	$2,888
16	1	White River Junction	VT	Repair HVAC Systems, Administration, Building 28	0.8363	SUS	$7,370
17	19	Salt Lake City	UT	Renovation for Urology	0.8338	SUS	$3,244
18	7	Columbia	SC	Modernize Plumbing Fixtures and Piping in Patient Buildings 100, 103, and 106	0.8288	IM	$1,384
19	19	Oklahoma City	OK	Correct Pharmacy Ventilation System	0.8277	SUS	$1,659
20	10	Battle Creek	MI	Upgrade HVAC, Various Buildings, Phase II	0.8261	IM	$3,136
21	19	Oklahoma City	OK	Convert Surgery Air Handlers to Utilize 80% Return Air	0.8233	IM	$1,112
22	20	Spokane	WA	Upgrade Air Handlers 18, 20, and 22	0.8205	IM	$4,400
23	17	Temple	TX	Reconfigure Outpatient Rehab Medicine	0.8203	SUS	$4,758
24	12	Milwaukee	WI	Replace Mental Health Emergency Generator and Switchboard, Building 123	0.8201	IM	$2,070
25	5	Baltimore	MD	Replace Automatic Transfer Switches	0.8185	IM	$13,785
26	20	Roseburg	OR	Correct Patient Access Walkways	0.8161	IM	$2,700
27	1	Newington	CT	Upgrade Air Handler and Distribution, SPS	0.8148	SUS	$1,100
28	5	Washington	DC	Upgrade Plumbing System, B 1/Ph 1 and B 6	0.8114	IM	$3,950
29	7	Atlanta	GA	Upgrade Telecommunication Deficiencies, Buildings 1, 12, and T13	0.8108	IM	$1,361

Priority #	VISN	City	ST	2021 Nationwide Prioritized NRM SCIP List Project Name - Short Description	Total Score	NRM Project Type*	Total Est. Project Cost ($000)
30	15	St Louis (JC)	MO	Renovate Space for Radiation Oncology Suite Expansion	0.8097	SUS	$2,091
31	6	Richmond	VA	Replace Nurse Call System	0.8096	IM	$6,600
32	20	Spokane	WA	Renovate Building 7	0.8087	SUS	$4,015
33	4	Altoona	PA	Convert Primary Care to PACT Model	0.8079	SUS	$5,444
34	12	Madison	WI	Upgrade Elevators	0.8074	IM	$4,000
35	16	Little Rock	AR	Replace AHU 47, 48, 48B, and 22 - JLM	0.8064	IM	$3,850
36	23	Omaha	NE	Install New HVAC for RME Storage, Omaha & Grand Island	0.8049	IM	$1,155
37	1	West Haven	CT	Steam System Upgrade, Phase 1	0.8042	SUS	$3,300
38	21	Fresno	CA	Renovate Imaging and Catheterization Lab for Patient Safety	0.8038	SUS	$4,353
39	10	Battle Creek	MI	Correct Safety Deficiencies, Buildings 14 and 22	0.8034	IM	$6,137
40	21	Sacramento	CA	Replace Elevators	0.8032	IM	$20,300
41	4	Altoona	PA	Renovate Specialty Care	0.8028	SUS	$7,405
42	22	Long Beach	CA	Building 126 Radiology Department and IR Holding Room Renovation	0.8019	SUS	$8,960
43	20	Anchorage	AK	Upgrade Building 100 Safety and Security	0.8019	IM	$1,210
44	23	Des Moines	IA	Renovate and Expand Infusion and Oncology Center	0.8018	SUS	$2,035
45	5	Martinsburg	WV	Replace/Upgrade HVAC/Ancillary Systems, AC-8	0.8016	IM	$1,163
46	16	Little Rock	AR	Switchgear Upgrade	0.8012	IM	$2,000
47	5	Beckley	WV	Renovate for USP 797 and 800	0.8011	SUS	$1,111
48	2	Albany	NY	Renovate for Ambulatory Surgery and Post Anesthesia Care Unit	0.8010	SUS	$2,334
49	23	St Cloud	MN	Upgrade HVAC And Environmental Controls in Surgery	0.8009	IM	$6,050
50	17	Amarillo	TX	Renovate Eye Clinic and Ambulatory Care Service Primary Care	0.8009	SUS	$2,715
51	17	San Antonio	TX	Replace Elevators S5, S6, and S10	0.8007	IM	$1,254
52	9	Nashville	TN	Construct Apheresis/Photopheresis Unit	0.8001	SUS	$1,001
53	21	San Francisco	CA	Upgrade Nurse Call and Public Address Notification System	0.8000	IM	$1,160
54	10	Ann Arbor	MI	Modernize Short Stay Unit and Observation Beds	0.8000	SUS	$6,407
55	19	Denver	CO	Install Door Operators	0.8000	SUS	$1,000
56	20	Roseburg	OR	Seismic Upgrade and Facility Condition Correction, Building 16	0.8000	IM	$15,800
57	22	Prescott	AZ	Correct Physical Security Deficiencies	0.8000	SUS	$2,650
58	22	Prescott	AZ	Upgrade and Expand Patient Communication System	0.8000	IM	$1,100
59	6	Fayetteville	NC	Buildout Community Living Center, Building 72	0.8000	SUS	$2,675
60	7	Augusta	GA	Upgrade Air Handling Units, Uptown Division, Phase 1	0.8000	IM	$2,382
61	7	Charleston	SC	Correct Electrical Deficiencies, Phase 3	0.8000	IM	$10,939
62	1	Bedford	MA	Renovate Building 12 for Women's Health	0.7744	SUS	$8,250
63	10	Cincinnati	OH	Correct Interior Deficiencies	0.7415	IM	$3,754
64	19	Sheridan	WY	Upgrade Elevators, Bldgs B7, 4, 71N, 71, 9, and 8	0.7343	SUS	$5,000
65	15	St. Louis (JB)	MO	Replace Mechanical Systems, Building 53	0.7340	IM	$4,306
66	17	Dallas	TX	Replace Mechanical Systems	0.7340	IM	$4,350

Priority #	VISN	City	ST	2021 Nationwide Prioritized NRM SCIP List Project Name - Short Description	Total Score	NRM Project Type*	Total Est. Project Cost ($000)
67	6	Hampton	VA	Correct Structural Deficiencies, Various Buildings	0.7340	IM	$4,928
68	7	Atlanta	GA	Correct Mechanical and Electrical Deficiencies, Buildings 1, T13, and 130	0.7340	IM	$9,909
69	4	Wilmington	DE	Correct Electrical Deficiencies	0.7262	IM	$4,400
70	20	Roseburg	OR	Seismically Retrofit Building 3	0.7252	IM	$11,600
71	17	Dallas	TX	Replace Fire Sprinkler and Pump, Building 2J	0.7137	IM	$4,400
72	23	Fargo	ND	Replace OI&T Cabling	0.7000	IM	$2,893
73	21	San Francisco	CA	Replace/Upgrade Operating Room Air Handling Units	0.6917	IM	$3,775
74	21	Honolulu	HI	Repair Minor Condition Deficiencies in Ambulatory Care Clinic	0.6864	SUS	$2,750
75	10	Marion	IN	Improve Sewer System and Water Loop	0.6844	IM	$8,500
76	16	Little Rock	AR	Renovate 3K for Private Patient Rooms-NLR	0.6780	SUS	$6,600
77	7	Columbia	SC	Correct Elevator Deficiencies, Buildings 9, 100, 106, and 100A	0.6735	IM	$4,343
78	17	San Antonio	TX	Replace 9 Air Handler Units, Ph VI	0.6721	IM	$5,489
79	7	Tuscaloosa	AL	Correct Steam and Condensate Deficiencies	0.6714	IM	$5,929
80	21	Fresno	CA	Repair the Exterior Finishes Building 1 and OPC	0.6713	IM	$3,500
81	4	Lebanon	PA	Electrical Upgrades, Phase 1	0.6705	IM	$2,200
82	16	Little Rock	AR	Renovate Mental Health Services - NLR	0.6692	SUS	$10,900
83	10	Cincinnati	OH	Upgrade Air Handler Units	0.6685	SUS	$6,420
84	7	Augusta	GA	Upgrade Electrical Distribution Systems, Downtown	0.6680	IM	$10,116
85	15	Leavenworth	KS	Replace North Parking Lot	0.6660	IM	$2,580
86	17	Dallas	TX	Upgrade Interior Finishes and Doors, Buildings 1, 2, 2J, and 60	0.6660	IM	$7,474
87	5	Perry Point	MD	Replace Boilers 1, 3, and 4	0.6660	IM	$10,149
88	6	Hampton	VA	Replace Windows, Various Buildings	0.6660	IM	$7,212
89	8	West Palm Beach	FL	Replace Air Handlers 5, 6, 10, 13, 31, 37, 38, and 45	0.6656	IM	$4,500
90	19	Salt Lake City	UT	Replace Windows, Phase 1	0.6579	IM	$1,980
91	1	Northampton	MA	Upgrade Steam, Phase 3	0.6559	IM	$3,515
92	23	Sioux Falls	SD	Replace Roofing Campus-wide	0.6555	SUS	$6,000
93	9	Lexington	KY	Renovate 4th Floor for Research Consolidation	0.6544	SUS	$10,500
94	10	Chillicothe	OH	Demolish Buildings 2, 4, 5, 6, 8, 12, 13, 14, 205, 206, 207, and 250	0.6521	IM	$3,500
95	5	Washington	DC	Replace/Upgrade Ductwork and Secondary Water Distribution System, Building 1, Phase I	0.6489	IM	$5,940
96	4	Altoona	PA	Correct Electrical and Telecom Deficiencies	0.6459	SUS	$9,507
97	21	Fresno	CA	Replace Electrical System Equipment, Building 1 and Outpatient Clinic	0.6454	IM	$5,500
98	6	Hampton	VA	Modernize and Correct Interior Finishes Deficiencies	0.6450	IM	$4,916
99	7	Columbia	SC	Correct Roofing Deficiencies on Campus	0.6446	IM	$2,298
100	12	Madison	WI	Renovate Research Laboratory	0.6439	SUS	$11,000
101	19	Fort Harrison	MT	Renovate Space Residential Rehab Building	0.6423	SUS	$5,134
102	17	Dallas	TX	Renovate Radiation Therapy to Provide Cancer Treatment Center	0.6417	SUS	$4,387

Priority #	VISN	City	ST	2021 Nationwide Prioritized NRM SCIP List Project Name - Short Description	Total Score	NRM Project Type*	Total Est. Project Cost ($000)
103	17	Waco	TX	Renovate Bldg 10 for CLC	0.6404	SUS	$10,503
104	4	Butler	PA	Renovate Building 47 for Logistics	0.6391	SUS	$8,800
105	15	Wichita	KS	Renovate and Repair Structural Deficiencies, Bldg 4	0.6387	SUS	$4,890
106	19	Oklahoma City	OK	Replace Roofs - Main Hospital	0.6348	SUS	$3,030
107	6	Hampton	VA	Abate Asbestos, Campus-wide, Phase I	0.6343	IM	$3,850
108	16	Biloxi	MS	Expand Emergency Power, Bldg 3	0.6343	IM	$1,473
109	12	North Chicago	IL	HVAC Redesign for Green House Homes	0.6340	IM	$4,400
110	16	Biloxi	MS	Repair Hot Water Piping, Building 3	0.6340	SUS	$1,511
111	22	Loma Linda	CA	HVAC Diffusers	0.6340	IM	$5,744
112	7	Columbia	SC	Correct Medical Gas Deficiencies, Building 100	0.6321	IM	$1,118
113	5	Perry Point	MD	Renovate Building 23H, A&B, CLC	0.6310	IM	$7,026
114	12	North Chicago	IL	Update OR HVAC System	0.6305	IM	$1,100
115	15	St. Louis (JB)	MO	Replace Elevators and Add Elevator, Building 52	0.6303	IM	$1,950
116	21	Sacramento	CA	Correct Electrical Systems, Mather	0.6300	IM	$8,000
117	1	Northampton	MA	Repair/Replace Sanitary Sewer Main Campus	0.6295	IM	$2,200
118	17	San Antonio	TX	Replace Campus Exterior Lighting	0.6288	IM	$1,574
119	23	Sioux Falls	SD	Expand Steam Infrastructure, Building 5	0.6282	SUS	$8,250
120	4	Wilmington	DE	Replace the Campus Fire Alarm System	0.6275	IM	$2,200
121	21	Fresno	CA	Consolidate Sterile Supply Rooms, Building 1 and Outpatient Clinic	0.6274	SUS	$2,450
122	10	Cincinnati	OH	Remediate Temperature Controls	0.6274	SUS	$6,900
123	5	Washington	DC	Replace/Upgrade Ductwork and Primary Side Distribution Piping	0.6272	IM	$3,900
124	7	Augusta	GA	Correct Chiller Plant Deficiencies, Building 79, Uptown Division	0.6260	IM	$3,789
125	21	Fresno	CA	Remodel Building 24, 3rd Floor for Womens Health	0.6254	SUS	$2,035
126	5	Beckley	WV	Replace Windows	0.6253	IM	$9,900
127	22	San Diego	CA	Renovate Supply Processing Service	0.6238	SUS	$11,231
128	22	Tucson	AZ	Replace Plumbing Lines, Buildings 2 and 38	0.6232	IM	$4,951
129	19	Cheyenne	WY	Improve Med/Surge Privacy	0.6228	SUS	$3,300
130	7	Columbia	SC	Correct Air Handling Unit Deficiencies, Building 9	0.6226	IM	$1,207
131	8	San Juan	PR	Replace Motor Control Center at OPA and Main Building	0.6218	SUS	$3,630
132	17	San Antonio	TX	Replace Air Handler, Phase VII	0.6216	IM	$6,534
133	15	St. Louis (JB)	MO	Renovate Main Lobby and Adjacent Spaces, Building 53	0.6215	SUS	$1,640
134	10	Chillicothe	OH	Replace Emergency Generators, Power Grid Interconnect and Automatic Transfer Switches 3, 5, 7, 297, 259 & 314.	0.6205	IM	$5,500
135	2	Bath	NY	ArcFlash Survey - Site Wide Upgrades	0.6203	IM	$1,400
136	22	Prescott	AZ	Renovate Bldg 107 Floor 4A for Specialty Clinics	0.6202	SUS	$2,800
137	19	Sheridan	WY	Upgrade IT Comm Closets, Buildings 6, 5, 24, & 2	0.6184	SUS	$1,925
138	20	Anchorage	AK	Repair Building 100 Envelope Moisture Barrier	0.6182	SUS	$1,650
139	20	Roseburg	OR	Renovate Seismically Deficient Building 13	0.6174	IM	$12,300

Priority #	VISN	City	ST	2021 Nationwide Prioritized NRM SCIP List Project Name - Short Description	Total Score	NRM Project Type*	Total Est. Project Cost ($000)
140	19	Salt Lake City	UT	Rehabilitate Sewer Lines	0.6166	IM	$1,980
141	19	Oklahoma City	OK	Correct Prosthetics Ventilation System	0.6157	SUS	$1,099
142	15	Kansas City	MO	Upgrade HVAC and Renovate Police, Pharmacy, and Phlebotomy, Buildings 1 and 26	0.6157	SUS	$4,690
143	8	Miami	FL	Replace Elevator, Building 1A	0.6150	SUS	$2,200
144	17	San Antonio	TX	Replace 7th Floor Roof	0.6144	IM	$1,682
145	23	Minneapolis	MN	Correct Mechanical Deficiencies	0.6143	IM	$2,300
146	4	Philadelphia	PA	Upgrade Plumbing, Building 2	0.6140	IM	$4,791
147	7	Dublin	GA	Renovate Nutrition and Food Service Kitchen to Correct Safety Deficiencies, Building 2	0.6133	SUS	$6,480
148	20	Spokane	WA	Upgrade Air Handlers 01 and 04	0.6131	IM	$2,630
149	23	Minneapolis	MN	Construct Evidence Based Ward 2L	0.6129	SUS	$6,926
150	2	Syracuse	NY	Upgrade Rome CBOC 1st Floor for Whole Health and Mental Health Clinics	0.6129	SUS	$8,550
151	5	Baltimore	MD	Replace Site Water Piping, Loch Raven	0.6128	IM	$2,356
152	12	Milwaukee	WI	Replace Chiller Plant Building 43 Mental Health	0.6124	IM	$1,461
153	19	Sheridan	WY	Complete Chilled Water Loop	0.6119	IM	$3,300
154	5	Perry Point	MD	Renovate Building 14H, CLC	0.6115	IM	$10,530
155	5	Beckley	WV	Correct IT Infrastructure Deficiencies	0.6114	IM	$2,514
156	8	San Juan	PR	Renovate Main Building Sub Basement Deck and Piping	0.6097	IM	$2,200
157	7	Atlanta	GA	Correct Main Computer Room, Building 1	0.6090	IM	$1,029
158	23	Des Moines	IA	Upgrade Fiber Optics System and Telecom Rooms	0.6087	IM	$3,325
159	16	Little Rock	AR	Renovate Ground Floor for Support Services-JLM	0.6085	SUS	$5,500
160	9	Murfreesboro	TN	Renovate and Expand Physical Medicine and Rehabilitation Service	0.6083	SUS	$4,928
161	22	San Diego	CA	Correct Patio Deck Roof and Center Core Water Infiltration	0.6077	IM	$4,470
162	2	Canandaigua	NY	Upgrade Plumbing, Station Wide	0.6076	SUS	$1,500
163	8	San Juan	PR	Replace and Harden Connector Between Main Building and Building 10	0.6073	SUS	$1,200
164	10	Fort Wayne	IN	Upgrade Lobby Restrooms	0.6071	SUS	$1,500
165	4	Wilmington	DE	Renovate Radiology	0.6066	SUS	$6,782
166	23	Des Moines	IA	Upgrade Domestic Water System for Prevention of Legionella	0.6061	IM	$5,000
167	17	Big Spring	TX	Renovate Lab	0.6060	SUS	$1,780
168	10	Cincinnati	OH	Replace Roof	0.6060	IM	$6,720
169	16	Little Rock	AR	Renovate Restrooms, Building 170 - NLR	0.6059	SUS	$1,650
170	23	Minneapolis	MN	Renovate Public Restrooms	0.6057	IM	$2,200
171	10	Detroit	MI	Remodel A2 South from Inpatient Ward to Outpatient Cancer Clinic	0.6056	SUS	$7,249
172	23	Fort Meade	SD	Upgrade Overhead Paging & Nurse Call System	0.6054	SUS	$2,350
173	5	Martinsburg	WV	Replace Raw Water Distribution System to Water Treatment Building, Phase 1	0.6049	IM	$1,300
174	1	West Haven	CT	Reroof Building 2	0.6047	SUS	$5,500
175	22	Tucson	AZ	Replace Chillers, Building 80	0.6040	IM	$1,646
176	4	Coatesville	PA	Repair Tuckpointing	0.6038	IM	$1,320

Priority #	VISN	City	ST	2021 Nationwide Prioritized NRM SCIP List Project Name - Short Description	Total Score	NRM Project Type*	Total Est. Project Cost ($000)
177	5	Martinsburg	WV	Renovate Building 401B	0.6037	SUS	$1,960
178	23	Iowa City	IA	Remodel 2W for IR/Cath/EP	0.6035	SUS	$8,800
179	5	Baltimore	MD	Expand Women's Health and Relocate Dermatology	0.6034	SUS	$6,980
180	4	Altoona	PA	Renovate Portions of Building 1 Basement and Building 3 Garage	0.6034	SUS	$3,680
181	6	Hampton	VA	Replace Perimeter Fencing	0.6033	SUS	$3,960
182	16	Little Rock	AR	Replace/Upgrade Elevators - NLR	0.6028	IM	$2,200
183	4	Philadelphia	PA	Convert 5 & 6 South to Inpatient Wards	0.6025	SUS	$7,276
184	1	West Haven	CT	Upgrade Normal Power, Bldg 19/Old LC Bldg 5	0.6024	SUS	$1,100
185	10	Cleveland	OH	Replace Substations A and B	0.6020	IM	$3,300
186	16	Little Rock	AR	Replace/Upgrade Heating Hot Water System - JLM	0.6016	IM	$1,650
187	12	Madison	WI	Renovate Inpatient Ward 7B	0.6016	SUS	$5,500
188	2	Buffalo	NY	Site Prep for 3T MRI	0.6016	SUS	$2,640
189	17	Bonham	TX	Replace Patient Exterior and Interior Signage	0.6016	IM	$1,650
190	22	Tucson	AZ	Repair Roofs	0.6015	IM	$1,620
191	4	Wilmington	DE	Modernize 4 West for Inpatient Rooms	0.6013	SUS	$6,843
192	2	Albany	NY	Replace Primary Electrical Distribution	0.6012	IM	$7,000
193	10	Detroit	MI	Replace Bio-Hoods and Laminar Flow Hoods	0.6012	IM	$4,156
194	23	Minneapolis	MN	Upgrade Security System	0.6012	SUS	$2,200
195	21	San Francisco	CA	Replace Windows, Building 208	0.6011	SUS	$1,870
196	16	Little Rock	AR	Renovate SICU - JLM	0.6011	SUS	$7,400
197	23	Omaha	NE	Renovate Bldg 25 to Relocate Radiology, Phase II	0.6006	SUS	$9,414
198	17	Waco	TX	Energy Center Condensate Return Project	0.6005	IM	$4,400
199	10	Dayton	OH	Renovate Cardiology, Building 330	0.6004	SUS	$1,919
200	16	Little Rock	AR	Remove and Replace Underground Fuel Storage Tanks at NLR and JLM	0.6003	IM	$1,925
201	10	Saginaw	MI	Fire Alarm System Replacement	0.6002	IM	$2,482
202	17	Big Spring	TX	Replace Boilers	0.6001	IM	$2,750
203	1	Togus	ME	Upgrade Boiler Plant Infrastructure for Natural Gas	0.6001	SUS	$3,100
204	6	Salem	VA	Replace Dry Systems (Fire Sprinkler)	0.6001	IM	$3,945
205	10	Columbus	OH	Replace Roof, Building 1A	0.6001	IM	$4,707
206	2	Albany	NY	Develop As-built Drawings	0.6000	SUS	$3,330
207	10	Cleveland	OH	Renovate Progressive Care Unit to Relocate Same Day Surgery Center	0.6000	SUS	$7,700
208	10	Indianapolis	IN	Expand OIT/Telecomm Closets and Correct Deficiencies	0.6000	IM	$2,904
209	1	White River Junction	VT	Repair Roof, Building 44	0.6000	SUS	$2,200
210	16	Fayetteville	AR	Replace Fan Coil Units, Building 4	0.6000	IM	$2,200
211	16	Little Rock	AR	Replace/Upgrade HVAC systems for Canteen and Dietetics - JLM	0.6000	SUS	$2,200
212	16	Little Rock	AR	Replace/Upgrade Elevators - JLM	0.6000	IM	$2,200
213	16	Shreveport	LA	Renovate Pharmacy Cache, Building 42	0.6000	SUS	$1,045
214	19	Denver	CO	Alterations to SCI Pool	0.6000	SUS	$2,200
215	19	Oklahoma City	OK	Upgrade Responder 4 Nurse Call to Responder 5 Nurse Call Facility Wide	0.6000	IM	$2,884
216	20	Portland	OR	Construct Campus Security Fence and Access Control, Vancouver	0.6000	SUS	$2,500
217	20	Portland	OR	Renovate Imaging Admin Space to Angio/CT Space	0.6000	SUS	$1,600

Priority #	VISN	City	ST	2021 Nationwide Prioritized NRM SCIP List Project Name - Short Description	Total Score	NRM Project Type*	Total Est. Project Cost ($000)
218	22	Tucson	AZ	Repave Parking Lots and Streets	0.6000	IM	$1,422
219	22	Tucson	AZ	Community Living Center Renovation, Building 60	0.6000	SUS	$4,375
220	22	Tucson	AZ	PIV/PACS Expansion	0.6000	IM	$1,800
221	22	Tucson	AZ	Replace/Upgrade Steam System	0.6000	IM	$2,200
222	22	Los Angeles	CA	Replace/Upgrade Fiber Optics Backbone	0.6000	IM	$3,300
223	23	Grand Island	NE	Renovate Exam Rooms to PACT Model - GI	0.6000	SUS	$7,150
224	23	Des Moines	IA	Remodel DOM for Safety Deficiencies	0.6000	SUS	$1,300
225	23	St Cloud	MN	Build Two Emergency Egress Stair Towers, B 29	0.6000	IM	$3,656
226	2	Northport	NY	Build Cardiac Catheterization Suite	0.6000	SUS	$1,320
227	4	Altoona	PA	Replace Underground Storage Tanks	0.6000	SUS	$1,130
228	4	Philadelphia	PA	Renovate Primary Care Clinic to PACT Model	0.6000	SUS	$9,946
229	5	Clarksburg	WV	Building 1 & CA Legionella Eradication Initiatives	0.6000	SUS	$3,209
230	7	Augusta	GA	Upgrade Security, Downtown and Uptown	0.6000	IM	$1,399
231	7	Birmingham	AL	Expand Specialty Care Clinics & Administrative Services	0.6000	SUS	$8,873
232	7	Tuscaloosa	AL	Renovate Bldg 6 for CLC Admin	0.6000	SUS	$2,101
233	8	Miami	FL	Replace Sanitary Sewer Mains and Branches, Floors 1 and 2, Phase 1	0.6000	IM	$10,000
234	8	West Palm Beach	FL	Renovate Halls and Walls 3rd and 4th floors	0.6000	SUS	$2,200
235	8	Gainesville	FL	Install Plate and Frame Heat Exchanger	0.6000	IM	$2,530
236	8	San Juan	PR	Renovate Hematology Oncology	0.6000	SUS	$1,535
237	8	San Juan	PR	Provide Hurricane Hardening at Generator Farm	0.6000	IM	$3,566
238	16	Alexandria	LA	Replace Roof, Building 7	0.5967	IM	$3,300
239	19	Oklahoma City	OK	Abate Asbestos, Phase I	0.5910	IM	$2,363
240	4	Wilkes Barre	PA	Upgrade HVAC, Phase 3	0.5840	IM	$6,600
241	4	Philadelphia	PA	Install New Air Cooled Chillers, Building 2	0.5805	IM	$5,108
242	19	Cheyenne	WY	Window Improvement & Correction	0.5754	IM	$1,022
243	22	Phoenix	AZ	Renovate for Specialty Care Clinics, Building 8, 2nd Floor	0.5704	SUS	$6,170
244	10	Indianapolis	IN	Replace Electrical Panels and Expand Distribution	0.5703	IM	$2,800
245	19	Denver	CO	Renovate Infrastructure and Finishes, Building 38	0.5671	IM	$5,500
246	22	Loma Linda	CA	In-Patient Nursing Station Repair	0.5660	IM	$3,434
247	4	Philadelphia	PA	Replace Roof, Building 2, Phase III	0.5613	IM	$3,323
248	10	Battle Creek	MI	Replace Elevators, Buildings 2, 5, 6, 7, 9, 13, 39, 82	0.5545	IM	$4,477
249	5	Washington	DC	Replace Flat Roof Areas, Building 1	0.5543	IM	$3,135
250	10	Marion	IN	Remodel Building 47 for Conference Center	0.5532	SUS	$6,000
251	10	Detroit	MI	Insulate Exterior Walls and Replace Windows	0.5529	IM	$10,000
252	10	Detroit	MI	Repair Parking Garage Deficiencies	0.5527	SUS	$3,540
253	2	Albany	NY	Consolidate Primary Care, Phase 2	0.5488	SUS	$3,686
254	8	Bay Pines	FL	Renovate Radiology Office & Waiting Areas, B 100	0.5468	SUS	$1,595
255	1	Newington	CT	Study All Facades; Minor Repair, Bldg 2E, Phase 1	0.5457	SUS	$1,925
256	10	Indianapolis	IN	Replace Doors and Correct Deficiencies, Building 1	0.5439	IM	$1,320
257	16	Little Rock	AR	Renovate/Upgrade, Warehouse, Building 182, NLR	0.5431	SUS	$5,800
258	2	Canandaigua	NY	Renovate Building 36G	0.5422	IM	$1,310
259	10	Chillicothe	OH	Resolve IT Deficiencies and Prepare for EHRM	0.5386	IM	$2,500
260	10	Battle Creek	MI	Replace Roofs, Various Buildings, Phase II	0.5365	SUS	$2,432
261	4	Butler	PA	Replace B-7 Master Control Panel	0.5361	IM	$2,750

Priority #	VISN	City	ST	2021 Nationwide Prioritized NRM SCIP List Project Name - Short Description	Total Score	NRM Project Type*	Total Est. Project Cost ($000)
262	1	Bedford	MA	Replace Elevators Campus Wide, Phase III	0.5347	IM	$1,750
263	10	Battle Creek	MI	Upgrade Physical Security, Campus Wide	0.5344	SUS	$3,530
264	5	Washington	DC	Renovate/Upgrade Common Area Finishes and Lighting, Building 1 Basement and First Floor	0.5335	IM	$3,025
265	23	Minneapolis	MN	Renovate 4th Floor for PTRP	0.5322	SUS	$4,686
266	4	Philadelphia	PA	Exterior Maintenance, Building 1	0.5312	IM	$10,335
267	2	Batavia	NY	Renovate E-Ward	0.5301	SUS	$6,236
268	19	Cheyenne	WY	Mechanical and Plumbing Repair	0.5297	IM	$4,015
269	5	Washington	DC	Construct New Boiler Plant	0.5287	IM	$33,684
270	2	Northport	NY	Renovate Building 7 for PTSD Residential Program	0.5286	SUS	$3,850
271	5	Baltimore	MD	Convert Semi-Private Surgical Inpatient Rooms to Private 5B	0.5284	SUS	$10,710
272	10	Ann Arbor	MI	Replace Windows and Remove Window AC Units	0.5274	SUS	$1,650
273	4	Altoona	PA	Renovate Bldg 1 First Floor	0.5269	SUS	$2,377
274	2	Northport	NY	Replace AC-5, Building 200	0.5259	IM	$2,500
275	23	Iowa City	IA	Upgrade Fire Alarm and Life Safety Systems	0.5259	IM	$2,475
276	10	Indianapolis	IN	Modernize Canteen Services	0.5259	SUS	$3,154
277	12	Hines	IL	Replace Branch Duct Distribution, Building 217	0.5255	IM	$1,180
278	23	Omaha	NE	Renovate Bldg 25 to Relocate MRI	0.5255	SUS	$3,155
279	4	Wilmington	DE	Replace General Exhaust System, Building 1	0.5252	IM	$2,200
280	22	Los Angeles	CA	Replace Roof, Building 508	0.5250	IM	$2,860
281	10	Ann Arbor	MI	Renovate Station 15 and Expand Eye Clinic	0.5250	SUS	$5,903
282	10	Cleveland	OH	Consolidate Medicine Service	0.5250	SUS	$6,600
283	10	Marion	IN	Remodel Building 1	0.5250	SUS	$13,000
284	16	Little Rock	AR	Renovate Canteen Services - NLR	0.5250	SUS	$4,400
285	19	Denver	CO	Site Prep to Move Prosthetics to Bldgs DF FITZ	0.5250	SUS	$1,092
286	19	Denver	CO	Renovate CBS North Main Entrance & Canopy Install	0.5250	SUS	$1,360
287	23	Fargo	ND	Remodel CLC	0.5250	SUS	$1,445
288	23	St Cloud	MN	Replace Flooring and Paint	0.5250	IM	$1,001
289	4	Altoona	PA	Replace Patient Lifts	0.5250	SUS	$2,722
290	4	Philadelphia	PA	Renovate 4 Center for Pulmonary and Tele-Sleep	0.5250	SUS	$2,480
291	4	Wilkes Barre	PA	Replace Roof, Building 27	0.5250	SUS	$1,500
292	5	Baltimore	MD	Construct Linear Accelerator	0.5250	SUS	$6,830
293	5	Martinsburg	WV	Renovate for Women's Wellness Space in Community Living Center	0.5250	SUS	$1,293
294	5	Martinsburg	WV	Renovate for Dental Service	0.5250	SUS	$1,778
295	15	Marion	IL	Renovate 3B for Patient Privacy and ICU	0.5211	IM	$4,235
296	5	Perry Point	MD	Replace Roofs - Patient Buildings	0.5210	IM	$10,141
297	2	Northport	NY	Replace Boiler Plant	0.5196	IM	$17,500
298	2	Syracuse	NY	Renovate for SCI Primary Care, Floor 4, D Wing	0.5191	SUS	$4,013
299	10	Battle Creek	MI	Replace Windows, Various Buildings, Phase II	0.5156	SUS	$5,040
300	19	Muskogee	OK	Replace Steam Distribution	0.5148	IM	$1,650
301	4	Pittsburgh	PA	Renovate Nursing Home Care Unit 2B and Upgrade Nurse Call System, Building 51, Heinz Division	0.5147	SUS	$4,950
302	17	Waco	TX	Upgrade Fire Alarm System, Campus Wide	0.5121	IM	$4,150
303	6	Salisbury	NC	Install New Campus Emergency Generators	0.5120	IM	$6,500
304	4	Lebanon	PA	Pave and Modify Loop and Parking	0.5080	IM	$6,649
305	9	Nashville	TN	Upgrade Elevators and Main Facility Access	0.5049	IM	$4,241

Priority #	VISN	City	ST	2021 Nationwide Prioritized NRM SCIP List Project Name - Short Description	Total Score	NRM Project Type*	Total Est. Project Cost ($000)
306	4	Coatesville	PA	Demolish Buildings 19, 26, 27, 28	0.5027	IM	$1,870
307	2	Montrose	NY	Renovate 13CD for Homeless/Domiciliary Resident	0.5008	SUS	$8,100
308	6	Fayetteville	NC	Replace Fire Alarm System	0.5005	IM	$3,520
309	2	Buffalo	NY	Upgrade Air Handling Units, Building 1, E-Wing	0.5002	IM	$1,441
310	6	Salisbury	NC	Renovate Med-Surg 2-3 SE Wing	0.5000	SUS	$2,349
311	16	New Orleans	LA	Install Load Bank at 2400 Canal St.	0.5000	IM	$1,100
312	21	Las Vegas	NV	Construct Additional Parking Lots	0.5000	IM	$4,620
313	2	East Orange	NJ	Site Prep for Cath. Lab	0.5000	SUS	$1,430
314	8	Bay Pines	FL	Renovate PACU, Building 100	0.5000	SUS	$1,650
315	8	Bay Pines	FL	Renovate Building 23, 2nd Floor	0.5000	SUS	$7,005
316	9	Johnson City	TN	Renovate Building 77 for Customer Service Center	0.5000	SUS	$1,164
317	10	Indianapolis	IN	Replace Flooring and Finishes and Correct Deficiencies	0.4751	SUS	$1,250
318	10	Cincinnati	OH	Correct Retro-Commissioning Recommendations	0.4744	SUS	$6,968
319	10	Battle Creek	MI	Replace Interior Doors and Install Keyless Entry, Various Locations	0.4725	IM	$5,667
320	10	Indianapolis	IN	Replace D Wing Elevators and Upgrade Controls	0.4693	IM	$5,280
321	10	Detroit	MI	Upgrade Air Handler Flow Stations, Dampers, and Controls	0.4692	IM	$4,770
322	2	Bath	NY	Renovate Building 14 to Resolve Condition Deficiencies	0.4647	IM	$1,870
323	2	Northport	NY	Replace HVAC, Buildings 8 and 92	0.4640	IM	$4,400
324	2	Canandaigua	NY	Replace Electrical Panels Stationwide	0.4638	IM	$1,650
325	4	Wilmington	DE	Replace Morgue HVAC	0.4624	IM	$1,100
326	4	Altoona	PA	Replace Main Sewer Line	0.4621	SUS	$1,779
327	2	Northport	NY	Replace/Repair Duct Work and VAV Boxes, B 200	0.4610	IM	$5,000
328	10	Detroit	MI	Provide HVAC to Electrical and Mechanical Spaces	0.4597	IM	$2,067
329	2	Northport	NY	Replace Direct Digital Controls Across Campus	0.4581	IM	$4,000
330	10	Detroit	MI	Renovations for Whole Health Program	0.4572	SUS	$1,311
331	10	Dayton	OH	Stabilize/Improve Building 120	0.4568	IM	$2,184
332	10	Dayton	OH	Expand Tele-Pharmacy	0.4549	SUS	$1,751
333	10	Ann Arbor	MI	Replace Facility Interior Signage	0.4542	SUS	$3,850
334	10	Dayton	OH	Convert Dining Room to Outpatient Care Space	0.4542	SUS	$1,710
335	10	Ann Arbor	MI	Physical Security Upgrades	0.4540	SUS	$4,950
336	10	Indianapolis	IN	Improve Radiation Oncology	0.4540	SUS	$2,596
337	4	Altoona	PA	Modernize 4th Floor for Inpatient Rooms	0.4536	IM	$12,100
338	2	Buffalo	NY	Modernize Digestive Disease Clinic	0.4528	SUS	$5,282
339	4	Wilmington	DE	Modernize 4 East and Center for Primary and Specialty Care	0.4526	SUS	$6,488
340	4	Wilmington	DE	Evaluate and Repair Tuckpointing and Masonry	0.4525	IM	$2,200
341	2	Castle Point	NY	Renovate/Upgrade for MRI Installation	0.4525	SUS	$1,785
342	10	Detroit	MI	Expand Personnel Access Control System	0.4518	IM	$2,226
343	10	Indianapolis	IN	Create Primary Care Backfill	0.4514	SUS	$6,058
344	4	Altoona	PA	Replace All Fire and Smoke Doors	0.4513	SUS	$2,223
345	2	Montrose	NY	Relocate Radiology to Ground Floor of Building 3	0.4511	SUS	$2,525
346	2	Batavia	NY	Overhead Paging System	0.4508	IM	$1,760
347	10	Dayton	OH	Expand Dental Clinic	0.4504	SUS	$3,624
348	2	Buffalo	NY	Exterior Site Improvements	0.4503	IM	$3,759
349	4	Altoona	PA	Repair Mortar & Brick, Building 1	0.4502	SUS	$2,170

Priority #	VISN	City	ST	2021 Nationwide Prioritized NRM SCIP List Project Name - Short Description	Total Score	NRM Project Type*	Total Est. Project Cost ($000)
350	10	Detroit	MI	Upgrade Nurse Call System	0.4501	IM	$3,710
351	10	Ann Arbor	MI	Renovate Primary Care to PACT Standards, B 1E	0.4500	SUS	$6,469
352	10	Ann Arbor	MI	Add Emergency Power to Central Chiller Plant	0.4500	SUS	$4,400
353	10	Cincinnati	OH	Upgrade Terminal Units	0.4500	SUS	$6,910
354	10	Cincinnati	OH	Replace Fan Coil Units	0.4500	SUS	$6,650
355	10	Cleveland	OH	Provide Temperature and Humidity Controls to SPD Storage Rooms	0.4500	IM	$3,300
356	10	Cleveland	OH	Renovate Sleep and Home Oxygen Areas	0.4500	SUS	$3,300
357	10	Indianapolis	IN	Expand Cooling Tower Pump Capacity	0.4500	IM	$2,500
358	10	Saginaw	MI	Replacement Physical Access Control System	0.4500	IM	$1,050
359	10	Saginaw	MI	Secondary Sterile Supply Closet Renovations	0.4500	SUS	$3,606
360	10	Columbus	OH	Construct Specialty Care Aligned Space	0.4500	SUS	$3,557
361	2	Northport	NY	Renovate Kitchen and Ambulatory Specialty Care	0.4500	SUS	$8,800
362	4	Wilmington	DE	Replace/Upgrade Sidewalks, Roadways, and Parking Areas	0.4500	IM	$1,100
363	4	Altoona	PA	Replace Steam System	0.4500	SUS	$10,125
364	4	Altoona	PA	Replace Elevators P2, P3, S4, & F5	0.4500	SUS	$4,426
365	4	Philadelphia	PA	Upgrade Multi-Purpose Room & Biomed	0.4500	SUS	$5,314
366	8	Miami	FL	Correct Electrical Deficiencies, Bs 1, 7, 10, 44, 1A	0.4117	SUS	$7,500
367	12	North Chicago	IL	Renovate Building 134-3B	0.3992	SUS	$5,500
368	6	Salisbury	NC	Replace Roofs, Buildings 5, 6, and 11	0.3911	IM	$3,360
369	21	Sacramento	CA	Renovate 1st and 2nd Floor, Building 98, McClellan	0.3910	SUS	$9,350
370	4	Lebanon	PA	Replace Elevators, Building 18	0.3868	IM	$1,750
371	6	Fayetteville	NC	Replace Domestic Water, Steam Risers, and Valves	0.3825	IM	$9,845
372	5	Perry Point	MD	Demolish Building 25H and Connecting Corridor	0.3823	IM	$2,963
373	12	North Chicago	IL	Renovate Lab, Building 133	0.3715	IM	$3,000
374	4	Lebanon	PA	Replace Steam, Condensate, and Vault, Phase 1	0.3660	IM	$7,700
375	8	Tampa	FL	Upgrade Telephone/Data Closets Campus Wide	0.3511	IM	$1,100
376	5	Perry Point	MD	Demolish Building 24H and Connecting Corridor	0.3494	IM	$2,963
377	21	Palo Alto	CA	Correct Mechanical Deficiencies, Bs 370 and 371	0.3415	IM	$1,210
378	12	Hines	IL	Replace Electrical, Building 217	0.3404	IM	$2,370
379	15	Marion	IL	Correct Seismic Deficiencies B14	0.3388	IM	$2,700
380	16	Pineville	LA	Replace Roof, Building 2	0.3358	IM	$1,665
381	19	Cheyenne	WY	Upgrade Emergency Generator System	0.3330	IM	$6,283
382	1	Boston (JP)	MA	Upgrade Clinic Areas Condition Gaps	0.3311	IM	$6,600
383	4	Coatesville	PA	Upgrade HVAC System B/38	0.3277	IM	$2,750
384	1	Brockton	MA	Upgrade Water Distribution System, Phase 2	0.3272	IM	$3,300
385	1	Boston (JP)	MA	Structural Repairs to Parking Garage	0.3254	IM	$1,650
386	12	Hines	IL	Demolish Building 5	0.3235	IM	$1,500
387	1	Boston (WR)	MA	Upgrade Security, Lighting, and Parking Lot Pavement	0.3227	IM	$3,300
388	2	Syracuse	NY	Renovate Rome 2nd Floor for Primary Care	0.3213	SUS	$8,870
389	2	East Orange	NJ	Renovate 1st Floor Lab	0.3212	SUS	$1,645
390	1	Boston (JP)	MA	Replace Roofs, Buildings 1 and 9	0.3191	IM	$4,400
391	6	Fayetteville	NC	Replace Roof, Building 1, D-wing	0.3189	IM	$2,750
392	16	Alexandria	LA	Replace Roof and Windows, Building 8	0.3181	IM	$1,237

Priority #	VISN	City	ST	2021 Nationwide Prioritized NRM SCIP List Project Name - Short Description	Total Score	NRM Project Type*	Total Est. Project Cost ($000)
393	22	Los Angeles	CA	Renovate Building 500 First Floor Restrooms	0.3178	IM	$3,150
394	19	Cheyenne	WY	Roof and Architectural Corrections and Repairs	0.3177	IM	$1,297
395	6	Salisbury	NC	Construct Entry Canopies at Building 2, 21, 42 and Parking Garage	0.3172	SUS	$1,800
396	1	Brockton	MA	Upgrade Elevators	0.3166	IM	$1,980
397	8	San Juan	PR	Replace Secondary Sanitary Line at Main Hospital	0.3161	IM	$2,700
398	23	Fargo	ND	Renovate Basement for CRM Expansion	0.3152	SUS	$1,096
399	19	Muskogee	OK	Update Parking and Walkways, Building 1	0.3149	SUS	$1,650
400	4	Wilkes Barre	PA	Upgrade Blue Elevators	0.3136	IM	$7,700
401	12	Hines	IL	Renovate Front and Rear Entrances, Building 200	0.3130	SUS	$1,000
402	21	Sacramento	CA	Renovate Building 650 Kitchen and Canteen	0.3117	SUS	$6,000
403	2	New York	NY	Renovate for Ambulatory Specialty Care	0.3103	SUS	$8,800
404	1	Brockton	MA	IT Infrastructure Upgrades	0.3080	IM	$4,400
405	2	Castle Point	NY	Replace Chilled Water Piping, Campus Wide	0.3077	SUS	$3,360
406	12	Milwaukee	WI	Reconstruct and Expand General Mitchell Blvd	0.3069	IM	$2,459
407	6	Fayetteville	NC	Renovate Audiology Space for Specialty Clinics	0.3069	SUS	$1,815
408	6	Durham	NC	Replace Erwin Road Entrance	0.3068	IM	$4,500
409	22	San Diego	CA	HVAC Retro-Commissioning	0.3065	IM	$5,500
410	6	Richmond	VA	Improve Generator System	0.3058	SUS	$3,520
411	17	Temple	TX	Relocate Dental to Building 205	0.3056	SUS	$5,668
412	5	Huntington	WV	Refurbish Parking Garage and Parking Lots	0.3047	IM	$1,763
413	2	Bronx	NY	Replace Exterior Windows Ph I (300 EA)	0.3045	IM	$5,451
414	5	Perry Point	MD	Replace Roofs - Support Buildings	0.3042	SUS	$1,438
415	2	New York	NY	Renovate Patient Ward 13N	0.3035	SUS	$8,800
416	12	Iron Mountain	MI	Upgrade Primary Care Floor 1	0.3027	SUS	$1,150
417	5	Clarksburg	WV	Repair Building Facades and Replace Windows	0.3026	IM	$8,950
418	10	Battle Creek	MI	Waterproof Basements, Various Buildings	0.3022	SUS	$2,913
419	2	New York	NY	Renovate Patient Ward 10N	0.3019	SUS	$8,800
420	1	Boston (WR)	MA	Replace Roofs	0.3014	IM	$2,200
421	2	Bronx	NY	Renovate for Urology - 2C	0.3010	SUS	$2,329
422	4	Pittsburgh	PA	Replace Nutrition and Food Service Cart Wash and Tray Wash	0.3009	SUS	$2,200
423	17	Temple	TX	Complete Commissioning Critical Repairs	0.3006	IM	$1,200
424	5	Huntington	WV	Renovate Inpatient Space	0.3004	SUS	$4,400
425	19	Denver	CO	Convert Community Living Center Building 38 to Hot Water Boilers	0.3004	IM	$1,430
426	6	Salisbury	NC	Replace Existing Underground Fuel Tanks	0.3000	SUS	$2,000
427	22	Los Angeles	CA	Correct Deficiencies for Female Privacy	0.3000	IM	$1,012
428	22	Los Angeles	CA	Provide Temperature and Humidity Control for SPS Areas	0.3000	IM	$1,540
429	2	Bronx	NY	Renovate for Medical Specialty-Employee Health	0.3000	SUS	$8,105
430	6	Richmond	VA	Design and Replace Air Handling Units, Bldg 500	0.3000	IM	$7,700
431	8	Orlando	FL	Replace Elevators at Lake Baldwin	0.3000	IM	$2,000
432	8	Orlando	FL	Replace Cooling Towers, Lake Baldwin	0.3000	IM	$1,375
433	9	Johnson City	TN	Install Historical Site Enhancements	0.3000	IM	$3,685
434	1	Boston (WR)	MA	Abate Asbestos Hazards in Crawl Spaces	0.2910	IM	$2,750
435	5	Perry Point	MD	Demolish Building 9H to Correct Seismic Deficiencies	0.2898	IM	$2,708

Priority #	VISN	City	ST	2021 Nationwide Prioritized NRM SCIP List Project Name - Short Description	Total Score	NRM Project Type*	Total Est. Project Cost ($000)
436	22	Phoenix	AZ	Replace Chiller	0.2695	IM	$9,900
437	22	Phoenix	AZ	Modernize Facility Special Systems	0.2695	IM	$4,400
438	22	Phoenix	AZ	Upgrade Boiler Plant and Related infrastructure	0.2645	IM	$24,750
439	5	Perry Point	MD	Locate and Repair Sewer Cross Connections for the MS4 Stormwater Permit	0.2614	IM	$10,241
440	4	Wilkes Barre	PA	Upgrade Plumbing, Ph 3	0.2510	IM	$11,100
441	10	Cincinnati	OH	Replace Domestic Water and Chilled Drinking Water Piping	0.2487	IM	$4,051
442	19	Muskogee	OK	Replace Windows, Building 1, A-Wing	0.2457	SUS	$1,925
443	22	Phoenix	AZ	Renovate Bldg 2 Laundry Facility	0.2434	IM	$4,400
444	5	Perry Point	MD	Pave Roads and Parking Lots	0.2428	IM	$5,530
445	2	Buffalo	NY	Renovate Inpatient Medical Ward	0.2357	SUS	$6,900
446	22	Los Angeles	CA	Replace Roofs, Bldgs 210, 213, 214, 217, & 224	0.2328	IM	$5,500
447	22	Phoenix	AZ	Correct Toland Mizell Power Study Findings - Install WAG System	0.2311	IM	$1,650
448	2	Lyons	NJ	Replace Roofs	0.2309	SUS	$3,300
449	2	Syracuse	NY	Replace Air Handlers 2, 7, and 11	0.2304	IM	$2,340
450	2	Montrose	NY	Renovate 14AB/CD to Improve Privacy for Substance Abuse Residents	0.2302	SUS	$9,991
451	4	Pittsburgh	PA	Repair Exterior Masonry and Roof, Bldg 32, Heinz	0.2295	IM	$8,250
452	2	Bronx	NY	Renovate Main Lobby	0.2278	SUS	$7,986
453	1	Manchester	NH	Renovate Basement Corridors, Building 1	0.2277	SUS	$1,838
454	5	Perry Point	MD	Replace Steam Traps	0.2277	IM	$2,101
455	2	Syracuse	NY	Renovate 9A	0.2267	SUS	$1,377
456	2	New York	NY	Replace Walk in Box Refrigerators	0.2256	IM	$3,850
457	5	Huntington	WV	Refurbish Building 19	0.2254	IM	$1,325
458	2	New York	NY	Replace AC Units	0.2252	IM	$1,650
459	22	Phoenix	AZ	Correct VHA Directive 1162(2) and 1761(1) Deficiencies - SPS & RME Storage	0.2250	IM	$1,650
460	22	Phoenix	AZ	Reconfiguration and Reinstallation of Solar PV	0.2250	IM	$3,850
461	22	Los Angeles	CA	Compliance Legionella Directive Building 500 - Install Anti-Scald Devices and Remove Dead Legs	0.2250	IM	$9,500
462	23	Iowa City	IA	Upgrade Physical Security of Leased Properties	0.2250	IM	$2,420
463	2	Bronx	NY	Replace PA System	0.2250	SUS	$2,200
464	2	Bronx	NY	Replace Generac Generators	0.2250	SUS	$2,200
465	4	Philadelphia	PA	Upgrade Toilet and Locker Rooms, Phase 1	0.2250	SUS	$2,146
466	4	Coatesville	PA	Construct Accessible Entrance to Building 1	0.2172	IM	$3,300
467	10	Cincinnati	OH	Replace Expansion Joints and Update Finishes in Public Places	0.2158	IM	$5,040
468	10	Battle Creek	MI	Replace Telephone and Data Infrastructure	0.2085	IM	$6,912
469	2	East Orange	NJ	Replace Windows	0.1868	SUS	$4,100
470	2	East Orange	NJ	Renovate Research Basement, Building 7	0.1824	SUS	$6,160
471	2	East Orange	NJ	Renovate Building 11	0.1783	SUS	$5,060
472	2	St. Albans	NY	Repair Parking Lots and Roads	0.1774	SUS	$6,600
473	10	Cincinnati	OH	Renovate 3rd Floor Fort Thomas for CLC	0.1757	SUS	$10,043
474	2	East Orange	NJ	Modify Main Entrance to Building 1	0.1749	SUS	$3,820
475	2	East Orange	NJ	Upgrade Building 18	0.1730	IM	$3,180
476	2	East Orange	NJ	Improve Site IT	0.1710	IM	$4,170
477	2	East Orange	NJ	Renovate/Upgrade Kitchen on B Level	0.1687	SUS	$4,700

Priority #	VISN	City	ST	2021 Nationwide Prioritized NRM SCIP List Project Name - Short Description	Total Score	NRM Project Type*	Total Est. Project Cost ($000)
478	10	Battle Creek	MI	Repair Roads/Sidewalks/Parking Areas	0.1671	SUS	$6,720
479	2	Batavia	NY	Modernize Food and Nutrition	0.1666	SUS	$2,000
480	2	Montrose	NY	Replace Roof and Solar Panels and Install Solar Hot Water, Building 5	0.1619	SUS	$4,050
481	2	Lyons	NJ	Correct Boiler Plant Deficiencies	0.1583	SUS	$1,650
482	4	Pittsburgh	PA	Resurface Roads and Maintenance Garage Upgrades, Heinz	0.1579	IM	$8,250
483	2	Brooklyn	NY	Replace Boiler #4	0.1572	IM	$6,600
484	2	East Orange	NJ	Replace Main Chillers & Cooling Tower	0.1565	SUS	$3,960
485	2	Syracuse	NY	Replace Air Handlers 31, 32, 33, and 37	0.1563	IM	$3,081
486	10	Battle Creek	MI	Renovate Audiology, Building 2	0.1560	SUS	$1,223
487	2	New York	NY	Upgrade Sanitary Risers/Storm Water Outflow	0.1559	IM	$6,600
488	2	Brooklyn	NY	Replace HVAC Units	0.1549	IM	$5,500
489	4	Coatesville	PA	Renovate Chapel	0.1543	IM	$2,700
490	2	St. Albans	NY	Install Lighting Upgrades	0.1542	IM	$2,200
491	2	St. Albans	NY	Replace Site Steam Lines	0.1538	IM	$8,800
492	2	New York	NY	Replace Plumbing Riser/House Tank	0.1531	IM	$8,250
493	2	New York	NY	Replace Air Handlers 15, 16, and 17	0.1530	IM	$2,530
494	2	St. Albans	NY	Replace Boiler Plant Piping	0.1530	IM	$7,700
495	10	Battle Creek	MI	Replace Asbestos Floor Tile, Various Buildings	0.1527	SUS	$2,140
496	2	East Orange	NJ	Upgrade AHUs and Water Cooled Equipment	0.1527	IM	$3,520
497	2	New York	NY	Replace Building Site Lighting	0.1524	IM	$1,320
498	2	New York	NY	Replace Air Handlers 1 and 18	0.1524	IM	$1,650
499	2	New York	NY	Replace Steam Traps	0.1523	IM	$1,650
500	2	St. Albans	NY	Replace Electrical Switchgear, Building 89	0.1522	IM	$7,700
501	2	Buffalo	NY	Renovate for Podiatry	0.1522	SUS	$2,438
502	4	Erie	PA	Modernize IT-Teledata Infrastructure	0.1521	IM	$3,410
503	2	St. Albans	NY	Replace Roofs, Buildings 60,64,65, 85, and 86	0.1520	IM	$3,300
504	2	Batavia	NY	Replace Water Distribution System	0.1520	IM	$2,300
505	2	Buffalo	NY	Renovate for Second Cardiac Cath Lab	0.1519	SUS	$4,726
506	2	New York	NY	Replace Air Handlers 10 and 11	0.1518	IM	$1,650
507	2	New York	NY	Replace Air Handlers 3 and 4	0.1518	IM	$1,650
508	2	Brooklyn	NY	Replace Roofs, Buildings 2, 4, 6, and 8	0.1518	IM	$3,850
509	2	New York	NY	Replace Air Handlers 12 and 14	0.1517	IM	$1,650
510	2	New York	NY	Replace Air Handlers 5 and 6	0.1517	IM	$1,650
511	2	St. Albans	NY	Replace Canteen Air Handling Unit	0.1515	IM	$2,200
512	2	Brooklyn	NY	Replace North Building Roof	0.1514	IM	$2,750
513	2	New York	NY	Furnish and Install Parking Lifts and Upgrade Access to Parking Lots	0.1512	IM	$3,700
514	2	St. Albans	NY	Replace Air Handling Unit, Building 89, 7th Floor	0.1511	IM	$1,980
515	2	Montrose	NY	Replace Roof and Install Solar PV, Building 17	0.1511	SUS	$1,056
516	2	Brooklyn	NY	Implement Legionella Prevention Measures	0.1509	SUS	$8,810
517	2	New York	NY	Replace AC 28, 48, and 49	0.1508	IM	$1,540
518	2	Brooklyn	NY	Replace HVAC Controls, Building 15	0.1508	IM	$5,500
519	2	Batavia	NY	Boiler Plant Incinerator Remediation and Security Upgrades	0.1506	SUS	$2,397
520	2	Montrose	NY	Renovate Urgent Care, Building 3	0.1506	SUS	$3,520
521	2	New York	NY	Replace AC 20, 21, and 29	0.1506	IM	$2,200
522	2	Brooklyn	NY	Replace Perimeter Heat Control Valves	0.1505	IM	$1,980

Priority #	VISN	City	ST	2021 Nationwide Prioritized NRM SCIP List Project Name - Short Description	Total Score	NRM Project Type*	Total Est. Project Cost ($000)
523	2	Brooklyn	NY	Replace Direct Expansion HVAC units	0.1505	IM	$5,500
524	4	Wilkes Barre	PA	Replace Flooring in Clinical Areas	0.1504	SUS	$2,530
525	2	St. Albans	NY	Install Instantaneous Hot Water Heater	0.1504	IM	$2,200
526	2	Brooklyn	NY	Replace Pressure Reducing Valve and Condensate Pump, Building 2	0.1503	IM	$1,227
527	2	New York	NY	Replace AC 10, 44, and 45	0.1503	IM	$1,650
528	2	New York	NY	Replace Perimeter Heat Control System	0.1503	IM	$3,850
529	2	St. Albans	NY	Upgrade Fuel Tank Monitoring Systems	0.1502	IM	$1,320
530	2	New York	NY	Install Occupancy Sensors and Upgrade Lighting	0.1502	IM	$5,500
531	2	Brooklyn	NY	Install Occupancy Sensors and Upgrade Lighting	0.1501	IM	$3,850
532	2	New York	NY	Replace AC 22, 24, and 30	0.1501	IM	$2,420
533	2	Brooklyn	NY	Upgrade Data Center HVAC	0.1500	IM	$2,750
534	10	Dayton	OH	Improve Loading Dock, Building 305	0.1500	IM	$1,290
535	2	New York	NY	Replace AC 50, 51, and 58	0.1500	IM	$1,540
536	2	Brooklyn	NY	Replace 800 Ton Engine Chiller #1	0.1500	IM	$2,750
537	2	Brooklyn	NY	Replace 900 Ton Chiller	0.1500	IM	$2,750
538	2	Brooklyn	NY	Replace 700 Ton Absorption Chiller	0.1500	IM	$2,750
539	2	Brooklyn	NY	Replace 500 Ton Absorption Chiller	0.1500	IM	$2,750
540	4	Pittsburgh	PA	Expand Cellular and Guest Wi-Fi Service at UD and HZ	0.1500	IM	$3,300
541	4	Pittsburgh	PA	Replace Building Management System, Phase 1	0.1500	SUS	$5,500
542	4	Pittsburgh	PA	Upgrade Security Systems at UD and HZ	0.1500	SUS	$3,300
543	4	Pittsburgh	PA	Repair and Upgrade Roof, Building One, 4 North	0.1500	SUS	$3,300
544	4	Pittsburgh	PA	Construct Site Preparations for New Fisher House	0.1500	SUS	$2,750

New 2021 Major Construction Projects

Each year, newly scored major construction projects can be added to the FYDP depending on the project size, estimated cost, and funding provided. Projects on the FYDP are funded from the Major Construction Program fund and are not required to recompete in subsequent SCIP cycles. Typically, only NCA projects can be added to the FYDP and the budget request in the same year, because they are not required to reach the 35% design milestone, have no future year cost, and will be procured using a design/build method. Two NCA gravesite expansion projects (San Antonio, TX and San Diego, CA) were added to the FYDP to ensure continued access to burial options for Veterans at those locations.

VHA and VBA major projects must meet the 35% design requirement before being included in a funding request. The exception this year is the VHA Tulsa, OK project, which was added to the FYDP and is in the budget request, because it is an eligible candidate for the CHIP IN Act of 2016 pilot program and no future funding request is expected. See Chapter 9.2: Communities Helping Invest through Properties and Improvements Needed (CHIP IN) for Veterans Act of 2016 for more details. Three additional VHA projects (Gainesville, FL; Charleston, SC; and Tampa, FL) were also added to the FYDP for 2021. The total estimated project cost for FYDP projects are provided when the project requests construction funds.

All scored 2021 major construction projects are listed in Table 2-6 below. The seven projects between Major Only Priority #2 and #13 are not included in the budget request, because they are potentially eligible to be funded from the Seismic Fund. For that reason they have also not been added to the FYDP. The major projects that could potentially be funded from the Seismic fund are located in: Perry Point, MD, White City, OR (3); Reno, NV; San Juan, PR; and Palo Alto, CA. For more information on the Seismic Fund, see Chapter 2. All major construction projects that are not on the FYDP, not included in the annual funding request, or not funded from the Seismic Fund must recompete in the SCIP 2022 cycle.

Table 2-6: Excerpt from 2021 Construction SCIP List - Major Construction Only

Full SCIP List Priority #	Major Only Priority #	VISN/Admin	City/ Location	ST	Project Name - Short Description	Total Score	Total Est. Project Cost ($000)	New 2021 SCIP Projects Budget Request ($000)
1	1	NCA	San Antonio	TX	Gravesite Expansion and Cemetery Improvements	0.5484	$56,000	$56,000
2	2	5	Perry Point	MD	Construct Replacement Dietetics Building to Correct FCA, Seismic and Structural Deficiencies	0.4837	$26,878	$0
3	3	20	White City	OR	Replace Seismically Deficient Clinical and Support Buildings with New Building 301	0.4744	$98,800	$0
4	4	8	Gainesville	FL	Correct Non-Compliant Surgical, Emergency, Pharmacy, and Sterile Process	0.4682	TBD in FYDP	$0
10	5	NCA	San Diego	CA	Miramar Gravesite Expansion and Cemetery Improvements	0.4261	$31,000	$31,000
11	6	20	White City	OR	Replace Seismically Deficient Clinical Support Buildings with New Building 300	0.4228	$75,240	$0
20	7	21	Reno	NV	Building 10 Seismic Mitigation	0.3695	$77,000	$0
26	8	8	San Juan	PR	Correct Seismic Deficiencies, Bldg 19	0.3443	$36,059	$0
27	9	20	White City	OR	Replace Seismically Deficient Clinical and Support Buildings with New Building 302	0.3416	$42,000	$0
29	10	21	Palo Alto	CA	Replace Spinal Cord Injury Center Seismic Mitigation	0.3289	$198,348	$0
34	11	7	Charleston	SC	Charleston Bed Tower Replacement	0.3005	TBD in FYDP	$0
38	12	8	Tampa	FL	Expand VAMC Primary Care	0.2949	TBD in FYDP	$0
45	13	19	Tulsa[1]	OK	Construct Inpatient Facility	0.2735	TBD in FYDP	$120,000
122	14	22	Tucson	AZ	Construct Replacement Bed Tower	0.2000	$74,237	$0
133	15	22	San Diego	CA	Purchase Land & Renovate Patient/Visitor Surface Parking Lot	0.1949	$93,972	$0
134	16	10	Cleveland	OH	Construct Health Care Center in Support of the Cleveland VAMC	0.1941	$245,000	$0

[1]The TEC for this project is TBD, even though funds are requested, because the details of this CHIP IN Act pilot project have not been finalized.

SCIP Results

The Long-Range SCIP plan includes 3,595 capital projects that would be necessary to close all currently-identified gaps with an estimated magnitude cost of between $63-$76 billion including activation costs ($49-$59 billion, not including activation costs). It is important to note that this estimate is a snapshot in time, it is based on current market conditions, baseline capital portfolio and demographic data and projected needs. In addition, future innovations in health care or benefits service delivery, or increases in the use of non-capital solutions, may significantly reduce the need for infrastructure. In addition, there may be some locations and facilities undergoing study, ongoing environmental studies, etc., therefore the 2021 SCIP List projects and potential future projects listed in the Long Range Capital Plan should not be construed as VA having made decisions to execute projects at these sites. The individual project cost estimates provided include acquisition costs only and will likely change as projects move through the investment process and cost estimating and project requirements become more refined. For example, estimates are fine-tuned from action plan to business case to project prospectus (for major construction and major lease) to final design and construction documents.

As part of the SCIP process, VA developed an Activation Cost Budget Model (ACBM) tool to support estimates of non-recurring and recurring activation needs for new VHA capital projects. The tool includes IT costs associated with each project and is intended to identify "all-in" costs to support the capital budget. The tool calculates activation needs based on estimated patient workload (clinic stops and bed days of care) and building square footage being added or renovated. It includes activation costs for all capital initiatives (Major Construction, Minor Construction, NRMs and Leases) to support SCIP, and incorporates activation needs for each project based on geographic location, size of project, and relative functional categories within the project (such as dental, surgical, primary care, etc.). The aggregate activation costs are provided in Table 2-6: VA Capital Investment Projects by Type (VA-wide, below).

VA Capital Investment Projects by Type

Total estimated costs (TECs) provided in the table below are preliminary planning costs and are considered to be the mean cost in a range of plus or minus 10 percent. The cost to correct all currently-identified gaps for the Department is estimated to be between $63 and $76 billion. This range is an estimate only; costs may change as projects are further refined.

Table 2-7: VA Capital Investment Projects by Type

VA	2021		Future Years	
Project Type	# of Projects	2021 TEC ($000)	# of Projects	Future Year TEC ($000) [1]
Major Construction	3	$384,542	83	$16,001,859
Leases	172	$241,015	210	$862,570
Minor Construction	37	$486,313	676	$7.263.366
NRM (includes GMP-Green projects)	544	$2,309,588	1,860	$8.367.862
Other (includes disposal and sharing projects)	0	$0	10	$11.066
Project Specific Subtotal	**756**	**$3,421,458**	**2,839**	**$32,506,724**
Future Year Planning (Minors and NRM)[1]	N/A	$0	-	$17.298.182
Below Threshold/Emergent Needs[2]	TBD	$0	-	$741.484
Non-Recurring Activation Costs[3]	-	$997,723	-	$8,233,306
Recurring Activation Costs[3]	-	$191,838	-	$4.756,026
IT Non-Recurring Activation Costs[3]	-	$159,563	-	$828,557
IT Recurring Activation Costs[3]	-	$53,188	-	$276,186
Total	**756**	**$4,823,769**	**2,839**	**$64,640,464**

[1]Future year planning includes estimates for NRM, Minor Construction, Minor Lease, disposal, and sharing projects for the ten-year planning horizon.
[2]VA Action Plans include lump sums that will be allocated during the year, for emergent needs and NRM projects below the established dollar thresholds.
[3]Non-recurring and recurring activation totals are inclusive of the entire cost over a 10 year time frame and are reflected in the first funding year for each project.

Potential Future/Outyear Projects

Listed below are projects that have been identified as potential future or outyear projects. These projects have been identified as part of the long range action plan to close the identified gaps. Total estimated costs provided in the table below are preliminary planning costs and are subject to change as projects are further refined. The long term planning horizon Cost Estimate Range does not include under-threshold or out-year planning estimates.

For planning purposes, VA utilizes an established dollar amount for project-specific inclusion in the Action Plans. Those potential projects for future years (beyond 2021) are provided in Table 2-8, below. The costs for all below-threshold projects are included in the overall VA estimate as a lump-sum.

Table 2-8: Potential Future/Outyear Projects (Sorted by State, by City)

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
VBA	Anchorage	AK	Renovate and Realign Anchorage to eRO Format	Minor	$3,630
NCA	Alabama	AL	Gravesite Expansion	Major	$30,000
7	Birmingham	AL	Lease for Primary Care, Ancillary/Diagnostics, and Specialty Care	Leases	$11,800
7	Birmingham	AL	Expand Administrative Services - Lease	Leases	$3,430
7	Birmingham	AL	Birmingham Warehouse Space Lease Replacement	Leases	$600
7	Birmingham	AL	Improve Heating Ventilation Air Conditioning System Test and Balance	NRM	$44,500
7	Birmingham	AL	Correct Plumbing Deficiencies by Replacing Critical Research Wing Domestic and Deionized Water Systems	NRM	$8,017
7	Birmingham	AL	Install New Finishes - 4th, 5th, & 6th Floor Patient Rooms	NRM	$7,100
7	Birmingham	AL	Replace Windows Phase III	NRM	$6,629
7	Birmingham	AL	Seventh Floor Inpatient Services Correction	NRM	$6,014
7	Birmingham	AL	Correct Safety Deficiencies and Architectural Issues within Building 1 Ground and 3rd Floor	NRM	$5,956
7	Birmingham	AL	Renovate Eighth Floor for Inpatient Med/Surg Consolidation (Phase I)	NRM	$3,057
7	Birmingham	AL	Replace Fixed Equipment	NRM	$2,720
7	Birmingham	AL	Improve Public Area Functionality	NRM	$2,000
7	Birmingham	AL	Replace Interior Lighting and Correct Lighting Deficiencies	NRM	$1,980
7	Birmingham	AL	Correct Critical Mechanical Deficiencies by Replacing and Upgrading Heating and Cooling Controls - Phase III	NRM	$1,929
7	Birmingham	AL	Correct Critical Seismic Deficiencies and Improve Transitional Residence House Infrastructure	NRM	$1,892
7	Birmingham	AL	Correct Electrical Deficiencies - Research Wing	NRM	$1,627
7	Birmingham	AL	Replace / Upgrade Medical Gas System	NRM	$1,500
7	Birmingham	AL	Improve 8th Avenue Entrance	NRM	$1,428
7	Birmingham	AL	Replace Unsafe Conditions in Flooring/Finishes on Ground Floor, Building 1	NRM	$1,047
NCA	Ft. Mitchell	AL	Gravesite Expansion (PPC, IGC)	Minor	$4,000
7	Montgomery	AL	Dothan Clinic Lease Replacement	Leases	$156
VBA	Montgomery	AL	Renew lease at Birmingham VR&E Office	Leases	$48
VBA	Montgomery	AL	Renew Lease at Ft Walton Beach VR&E Office	Leases	$45
7	Montgomery	AL	Construct Building #40 Replacement - West	Minor	$15,192
VBA	Montgomery	AL	Renovate and Realign Montgomery RO to the eRO Model	Minor	$8,131
VBA	Montgomery	AL	Replace Air Handling Units at Montgomery RO	Minor	$2,700
7	Montgomery	AL	Correct Deficiencies in Boiler Plant, Building 14	NRM	$10,499
7	Montgomery	AL	Correct Deficiencies in Mission Critical Buildings	NRM	$9,020
7	Montgomery	AL	Correct Deficiencies in Patient Care Areas, Building 1	NRM	$7,150
7	Montgomery	AL	Correct Mechanical Deficiencies, Phase II	NRM	$7,150
7	Montgomery	AL	Expand Specialty Care Services	NRM	$6,930
7	Montgomery	AL	Correct OR Emergency Power Deficiencies	NRM	$6,050
7	Montgomery	AL	Expansion of Imaging Services in Building 1 Ground Level	NRM	$5,703
7	Montgomery	AL	Replace Plumbing Valves in Building #1 - West Campus	NRM	$5,000
7	Montgomery	AL	Correct Architectural Deficiencies in Building 1 - Phase II	NRM	$4,950
7	Montgomery	AL	Improve Mechanical Controls - Direct Digital Controls	NRM	$4,400
7	Montgomery	AL	Air Handling Equipment Building 1, Phase II	NRM	$3,000
7	Montgomery	AL	Correct Deficiencies in Life Safety Protected Buildings	NRM	$2,474

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
7	Montgomery	AL	Repair Site Deficiencies in the Water Mains, Natural Fuel System, and Steam Distribution Lines	NRM	$2,420
7	Montgomery	AL	Replace Water Tower and Correct Deficiencies	NRM	$2,420
7	Montgomery	AL	Correct Electrical Deficiencies on Campus, Phase II	NRM	$2,200
7	Montgomery	AL	Replace Heating Systems, Bldgs 12, 13, & T27, W. Campus	NRM	$1,980
7	Montgomery	AL	Backfill Rehab Medicine/Specialty Care	NRM	$1,784
7	Montgomery	AL	Improve Site Accessibility - West Campus	NRM	$1,210
7	Montgomery	AL	Modify Telecommunications Rooms, Bldg 1, W. Campus	NRM	$1,210
7	Montgomery	AL	Correct Elevator Deficiencies, Phase II	Other	$1,375
7	Tuscaloosa	AL	Construct Building 38 Addition	Minor	$16,089
7	Tuscaloosa	AL	Correct Accessibility and Interior Deficiencies, Bs 41 & 137	NRM	$27,500
7	Tuscaloosa	AL	Improve Site Conditions, Phase II	NRM	$9,955
7	Tuscaloosa	AL	Correct Interior Deficiencies, Building 39	NRM	$9,900
7	Tuscaloosa	AL	Correct Condition Deficiencies Building 1	NRM	$9,350
7	Tuscaloosa	AL	Correct Sanitary Sewer, Water Main, and Fire Protection Deficiencies	NRM	$8,800
7	Tuscaloosa	AL	Correct Deficiencies in Chiller Plant	NRM	$6,600
7	Tuscaloosa	AL	Modernize Building 135 and Building 63	NRM	$5,273
7	Tuscaloosa	AL	Correct Building 135 Mechanical Deficiencies	NRM	$5,170
7	Tuscaloosa	AL	Correct Condition Deficiencies Building 5	NRM	$4,730
7	Tuscaloosa	AL	Replace Bldg. 139 Generator, UST, & Correct FCA Deficiencies in Bldg 137	NRM	$4,705
7	Tuscaloosa	AL	Correct Condition Deficiencies Basement B39	NRM	$4,510
7	Tuscaloosa	AL	Elevator Upgrades in Buildings 5, 38, 39, 33, 135 and 137	NRM	$4,400
7	Tuscaloosa	AL	Correct Steam and Condensate Deficiencies, Phase II	NRM	$4,400
7	Tuscaloosa	AL	Correct Condition Deficiencies Buildings 38 and 12	NRM	$4,180
7	Tuscaloosa	AL	Correct Failing Deficiencies for Building 3	NRM	$4,180
7	Tuscaloosa	AL	Replace Connecting Corridor 38 to 135 Roof and Connected Components, Phase II	NRM	$3,850
7	Tuscaloosa	AL	Renovate Building 39 for Call Center	NRM	$3,352
7	Tuscaloosa	AL	Renovate Building 40 for Mental Health	NRM	$3,000
7	Tuscaloosa	AL	Correct Condition Deficiencies Building 2	NRM	$2,702
7	Tuscaloosa	AL	Correct Deficiencies Building 46 Chapel	NRM	$2,640
7	Tuscaloosa	AL	Renovate B145 Basement & 1st Floor for Alternative Care & Recreation Services	NRM	$2,640
7	Tuscaloosa	AL	Correct Site Lighting Deficiencies	NRM	$2,200
7	Tuscaloosa	AL	Consolidate Mental Health in Building 2, Ground Level	NRM	$1,548
7	Tuscaloosa	AL	Renovate Bldg 137 1st Floor for Physical Therapy	NRM	$1,500
7	Tuscaloosa	AL	Correct Deficiencies, Building 143 Dietetics Facility	NRM	$1,210
7	Tuscaloosa	AL	Correct Life Safety Deficiencies in Bldgs 46, 63, 135	NRM	$1,210
7	Tuscaloosa	AL	Expand Pharmacy in Building 135	NRM	$1,042
7	Tuscaloosa	AL	Legionella Survey Assessment and Corrections - Phase II	NRM	$1,000
7	Tuskegee	AL	Construct Community Living Cottages - I	Minor	$16,000
7	Tuskegee	AL	Construct Community Living Center Cottages - II	Minor	$16,000
7	Tuskegee	AL	Construct Community Living Center Cottages - III	Minor	$16,000
7	Tuskegee	AL	Renovate Building 50 for Rehab and Alternative Therapy	NRM	$12,399
7	Tuskegee	AL	Renovate Bldg 120 for Inpatient Mental Health	NRM	$9,350
7	Tuskegee	AL	Correct Deficiencies in Buildings 3A and 83	NRM	$9,350
7	Tuskegee	AL	Correct Building 90 Deficiencies	NRM	$9,020
7	Tuskegee	AL	Correct Deficiencies in Mission Critical Buildings	NRM	$8,250

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
7	Tuskegee	AL	Correct Plumbing Deficiencies	NRM	$8,250
7	Tuskegee	AL	Replace / Improve Miscellaneous Interior/Accessibility Items	NRM	$7,700
7	Tuskegee	AL	Correct Life Safety Deficiencies in Mission Critical Buildings	NRM	$6,930
7	Tuskegee	AL	Renovate Primary Care and Geriatrics clinics, Bldg 83-1	NRM	$6,357
7	Tuskegee	AL	Demolish Buildings 1, 7, 8, 9, 10, 44, 50, and 51	NRM	$6,270
7	Tuskegee	AL	Replace Generators and Connected Electrical Equipment	NRM	$5,550
7	Tuskegee	AL	Correct Life Safety Deficiencies in Buildings, Phase II	NRM	$5,060
7	Tuskegee	AL	Restore the Integrity of Building Envelopes	NRM	$4,950
7	Tuskegee	AL	Correct Life Safety Deficiencies, Phase II	NRM	$4,180
7	Tuskegee	AL	Repair Electrical Deficiencies, Buildings 5 and 14	NRM	$4,180
7	Tuskegee	AL	Improve Access for Building #3	NRM	$3,960
7	Tuskegee	AL	Repair Roof Deficiencies on Campus	NRM	$3,840
7	Tuskegee	AL	Renovate Pathology, Building 4	NRM	$3,736
7	Tuskegee	AL	Renovate Building 9	NRM	$3,455
7	Tuskegee	AL	Renovate Vacant 3rd floor Building 3 Space for Clinical Specialty Care	NRM	$3,299
7	Tuskegee	AL	Improve Parking & Road Surfaces	NRM	$2,616
7	Tuskegee	AL	Repair Electrical Deficiencies on the Tuskegee Site	NRM	$2,530
7	Tuskegee	AL	Demolish Buildings 19 through 29 and 63	NRM	$2,364
7	Tuskegee	AL	Replace Double Glazed Windows	NRM	$2,223
7	Tuskegee	AL	Renovate Pharmacy	NRM	$2,155
7	Tuskegee	AL	Repair Electrical Deficiencies in Buildings 13, 92, and 93	NRM	$2,090
7	Tuskegee	AL	Repair Electrical Deficiencies in Buildings 88, 90, and 97	NRM	$1,871
7	Tuskegee	AL	Repair Exterior Walls and Interior Finish in Building 120	NRM	$1,650
7	Tuskegee	AL	Asbestos Abatement	NRM	$1,320
7	Tuskegee	AL	Replace / Improve Window Items	NRM	$1,320
16	Fayetteville	AR	Reconfigure Electrical Distribution System	NRM	$6,600
16	Fayetteville	AR	Expand Standby Power System	NRM	$4,400
NCA	Ft. Smith	AR	Repair/Replace Roads, Curbing, and Drainage	Minor	$1,230
Staff	Little Rock	AR	Create LETC Dormitory Space -Ph3	Minor	$17,337
Staff	Little Rock	AR	Create LETC Dormitory Space - Ph2	Minor	$16,512
Staff	Little Rock	AR	Create LETC Dormitory Space - Ph1	Minor	$15,726
Staff	Little Rock	AR	Create LETC Education Complex	Minor	$11,954
Staff	Little Rock	AR	Create LETC Classroom Space	Minor	$10,797
16	Little Rock	AR	Lab Renovations	NRM	$6,650
16	Little Rock	AR	Renovate Bldg 5 and Space for Regional Counsel	NRM	$1,672
VHA	American Samoa	AS	Replacement Lease - VC616 American Samoa, AS Vet Center	Leases	$195
VBA	Phoenix	AZ	Renew Lease at Phoenix RO	Leases	$3,300
VBA	Phoenix	AZ	Renew Lease at Phoenix RO2	Leases	$550
VBA	Phoenix	AZ	Renew Lease at Flagstaff VR&E Office	Leases	$26
22	Phoenix	AZ	Construct New Bed Tower, Emergency Department, Inpatient Mental Health, and Support Services	Major	$498,241
22	Phoenix	AZ	Replace Bldgs 14, 20, 22, 25 and 26 with Warehouse	Minor	$15,400
22	Phoenix	AZ	Upgrade Infrastructure to Support Anticipated Campus Growth	NRM	$44,000
22	Phoenix	AZ	Correct Condition Deficiencies	NRM	$18,150
22	Phoenix	AZ	Campus Optimization Study on Inpatient Beds	NRM	$14,560
22	Phoenix	AZ	Construct Back-up Water System	NRM	$6,600
22	Phoenix	AZ	Expand Emergency Power to HVAC	NRM	$6,600
22	Phoenix	AZ	Renovate SPS Backfill for Engineering	NRM	$4,950

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
22	Phoenix	AZ	Renovate Building 1-Halls & Walls	NRM	$3,850
22	Phoenix	AZ	Install a Continuous Municipal Water Quality Monitoring System	NRM	$1,650
22	Phoenix	AZ	Renovate Building 8 Conference Rooms	NRM	$1,650
22	Phoenix	AZ	Construct Facility Interconnected Structures Lightening Protection and Grounding	NRM	$1,320
22	Prescott	AZ	Replacement Lease for Flagstaff Community CBOC	Leases	$1,410
22	Prescott	AZ	Replacement Lease for Cottonwood CBOC	Leases	$938
22	Prescott	AZ	Replacement Lease for Holbrook PTOC	Leases	$134
22	Prescott	AZ	Replacement Lease for the Page Telemed Clinic	Leases	$81
22	Prescott	AZ	Modernize/Convert Community Living Center to Private Patient Rooms - Phase I (South)	Minor	$19,300
22	Prescott	AZ	Modernize/Convert Community Living Center to Private Patient Rooms - Phase II (North)	Minor	$19,300
22	Prescott	AZ	Construct Parking Facility (Garage)	Minor	$18,700
22	Prescott	AZ	Construct New Central Kitchen	Minor	$8,570
22	Prescott	AZ	Replace Steam Boilers with Condensing Boilers	NRM	$4,050
22	Prescott	AZ	Expand Central Chiller Plant and Upgrade HVAC Systems for the Main Hospital Complex	NRM	$3,900
22	Prescott	AZ	Renovate Buildings 24 thru 27 and 76 and 77 for Program Space	NRM	$3,500
22	Prescott	AZ	Seismic Upgrade/Retrofit Project - Multiple Buildings	NRM	$3,300
22	Prescott	AZ	Renovate Bldg 107 Floor 4B	NRM	$3,161
22	Prescott	AZ	Replace Heating Systems for Outer Buildings	NRM	$3,000
22	Prescott	AZ	Renovate Bldg 107 Floor 2B	NRM	$2,550
22	Prescott	AZ	Repair & Resurface Roads, Ph 5	NRM	$2,200
22	Prescott	AZ	Correct Security Deficiencies and Construct New Main Entrance	NRM	$2,200
22	Prescott	AZ	Install Wayfinding Signage	NRM	$1,700
22	Prescott	AZ	Replace and Install Upper Loop Utilities	NRM	$1,650
22	Prescott	AZ	Install new passenger elevators, space build-outs, and emergency generator for buildings 162 and 164	NRM	$1,350
22	Prescott	AZ	Renovate 2nd Floor B108 for Occupational Therapy	NRM	$1,330
22	Tucson	AZ	Replace Safford Outpatient Clinic Lease	Leases	$484
22	Tucson	AZ	Construct New Ancillary and Diagnostic Building	Major	$154,000
22	Tucson	AZ	Construct New Specialty Care and CLC Building	Major	$132,000
22	Tucson	AZ	Construct Replacement Bed Tower	Major	$74,237
22	Tucson	AZ	Construct New Parking Garage	Minor	$19,800
22	Tucson	AZ	Expand Outpatient Mental Health	Minor	$19,750
22	Tucson	AZ	Construct Inpatient Imaging Suite	Minor	$17,700
22	Tucson	AZ	Construct New Audiology, Hemodialysis, and Medical Admin Building	Minor	$16,480
22	Tucson	AZ	Expand and Renovate Emergency Department	Minor	$11,244
22	Tucson	AZ	Expand PACT	Minor	$10,857
22	Tucson	AZ	Construct New Dental Building	Minor	$10,350
22	Tucson	AZ	Construct New Building for Outpatient Diagnostic	Minor	$10,270
22	Tucson	AZ	Expand OR Support Space	Minor	$7,883
VHA	Tucson	AZ	Construct Emergency Pharmacy Building in Tucson	Minor	$9,745
22	Tucson	AZ	Upgrade Boiler Infrastructure	NRM	$9,949
22	Tucson	AZ	Construct Combined Power Plant for Clean Energy	NRM	$9,900

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
22	Tucson	AZ	Construct Perimeter Fence	NRM	$7,600
22	Tucson	AZ	Correct Plumbing Deficiencies	NRM	$6,600
22	Tucson	AZ	Renovate for SPS, Clinical and Support Space	NRM	$6,050
22	Tucson	AZ	Renovate Quarters	NRM	$5,500
22	Tucson	AZ	Correct Mechanical Deficiencies	NRM	$5,500
22	Tucson	AZ	Replace Building 60 Mechanical System	NRM	$4,840
22	Tucson	AZ	Correct IT Deficiencies	NRM	$4,400
22	Tucson	AZ	Correct Structural Deficiencies	NRM	$4,400
22	Tucson	AZ	Renovate for Biomedical Engineering	NRM	$2,530
22	Tucson	AZ	Renovate Space for Logistics	NRM	$2,530
22	Tucson	AZ	Upgrade Building Automation System	NRM	$1,100
21	Fresno	CA	Replace Merced Lease	Leases	$814
21	Fresno	CA	Replace Oakhurst CBOC	Leases	$734
VHA	Fresno	CA	Replacement Lease - VC628 Fresno, CA Vet Center	Leases	$210
21	Fresno	CA	Construct Bed Tower and Correct Physical Security Design Manual Deficiencies on Main Campus	Major	$373,000
21	Fresno	CA	Construct Clovis Multispecialty Clinic	Major	$212,000
21	Fresno	CA	Construct Parking Garage Main Campus Lot B	Minor	$19,055
21	Fresno	CA	Expand Community Living Center, Phase 2	Minor	$18,851
21	Fresno	CA	Expand and Renovate Laboratory, Building 1, 2nd Floor	Minor	$18,088
21	Fresno	CA	Relocate/Replace Main Facility Oxygen Supply Infrastructure for Safety and Security	Minor	$15,900
21	Fresno	CA	Improve Facility Vulnerability Deficiencies to Sustain 96 Hour Independent Operations	NRM	$8,800
NCA	Golden Gate	CA	Install Irrigation Mainline and Controller Upgrades	Minor	$1,100
22	Loma Linda	CA	Replace Warehouse 1 Lease	Leases	$110
22	Loma Linda	CA	Construct Joint Medical Clinic March Air Reserve Base	Minor	$19,500
22	Loma Linda	CA	Construct Mental Health IP/OP Clinic	Minor	$19,500
22	Loma Linda	CA	Renovate Geriatric Psych	Minor	$14,300
22	Loma Linda	CA	Relocate Dialysis Center	Minor	$13,200
22	Loma Linda	CA	Upgrade Building Management System	Minor	$9,153
22	Loma Linda	CA	Renovate 4NW Med/Surg Ward for Private Beds	NRM	$13,200
22	Loma Linda	CA	Renovate Inpatient Behavioral Health Unit	NRM	$11,100
22	Loma Linda	CA	Renovate 1W Med Clinic	NRM	$8,250
22	Loma Linda	CA	Replace Secondary Electrical Distribution System	NRM	$8,000
22	Loma Linda	CA	VHA Electrical Condition Assessment Compliance	NRM	$6,490
22	Loma Linda	CA	Construct Operating Room #9	NRM	$5,500
22	Loma Linda	CA	Install Emergency Equipment Branch Electrical Distro Monitors	NRM	$5,000
22	Loma Linda	CA	Construct SW Campus Sub Station	NRM	$4,500
22	Loma Linda	CA	Install Electronic Lighting Controls	NRM	$3,600
22	Loma Linda	CA	Replace Existing Fire Alarm System	NRM	$3,500
22	Long Beach	CA	Construct New SCI/D, Rehab, Prosthetics Buildings & Women's Health Center	Major	$860,700
22	Long Beach	CA	Construct OR Tower	Major	$215,158
22	Long Beach	CA	Construct Parking Garage No 2	Minor	$19,950
22	Long Beach	CA	Expand and Renovate Building 164, 1st Floor for Central Pharmacy	Minor	$17,654
22	Long Beach	CA	Build New Hemodialysis Center	Minor	$9,240

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
22	Long Beach	CA	Build Environmental Management Service (Waste Management Center)	Minor	$2,700
22	Long Beach	CA	Build 2nd Floor on top of Building 5	Minor	$1,155
22	Long Beach	CA	Increase Physical Security Infrastructure	NRM	$31,900
22	Long Beach	CA	Correct Site Civil Access Deficiencies	NRM	$20,000
22	Long Beach	CA	Replace Mechanical HVAC Equipment Various Bldgs	NRM	$15,300
22	Long Beach	CA	ESPC Technical Support VALB	NRM	$1,000
NCA	Los Angeles	CA	New Cemetery (Sepulveda)	Major	$40,000
NCA	Los Angeles	CA	Correct Condition Deficiencies	Minor	$3,920
21	Martinez	CA	Replace Oakland Outpatient and Behavioral Health Clinics	Leases	$18,997
21	Martinez	CA	Replace Yuba City VA Outpatient Clinic	Leases	$1,622
21	Martinez	CA	Interim Lease for the Oakland Behavioral Health and Substance Abuse Clinic	Leases	$760
21	Martinez	CA	Construct New Community Living Center	Major	$143,000
21	Martinez	CA	Correct Deficiencies in Sterile Processing Service and Relocate Research	Minor	$19,200
21	Martinez	CA	Construct Outpatient Mental Health for Addiction Recovery and Education Building	Minor	$18,998
21	Martinez	CA	Renovate Space for Patient Aligned Care Teams (PACT) through relocation of Nuclear Medicine	Minor	$18,112
21	Martinez	CA	Construct Clinic Addition and Renovate for Primary Care and Ancillary Services	Minor	$17,767
21	Martinez	CA	Construct and Renovate Foundational Services to Patient Aligned Care Team Model	Minor	$17,107
21	Martinez	CA	Construct and Renovate Primary Care and Mental Health to Patient Aligned Care Team	Minor	$17,090
21	Martinez	CA	Construct Sleep Lab and Specialty Care Service Center	Minor	$16,000
21	Martinez	CA	Expand Community Living Center for Patient Privacy	Minor	$15,173
21	Martinez	CA	Construct Parking Structure in Support of VA/DoD Joint Venture	Minor	$15,050
21	Martinez	CA	Purchase Modular Buildings for Interim Use on VA Owned Alameda Point	Minor	$14,662
21	Martinez	CA	Purchase Land and Construct New Building for Post-Deployment Assessment & Treatment	Minor	$11,303
21	Martinez	CA	Construct new womans imaging space and renovate radiology and pharmacy, McClellan	Minor	$9,000
21	Martinez	CA	Renovate Building 98 Pharmacy and Administrative Wing	NRM	$8,800
21	Martinez	CA	Correct Electrical Systems	NRM	$8,200
21	Martinez	CA	Correct Mather Entrance Access and Parking	NRM	$6,600
21	Martinez	CA	Construct Parking South East Campus	NRM	$5,500
21	Martinez	CA	Replace Elevators in Martinez	NRM	$4,400
21	Martinez	CA	Correct and Upgrade Building 19 Sterile Processing Suite	NRM	$4,400
21	Martinez	CA	Correct and Upgrade Building 650 Sterile Processing Suite	NRM	$3,300
21	Martinez	CA	Replace Boiler Plant Chilled and Hot Water Units	NRM	$3,300
21	Martinez	CA	Replace Elevators Mare Island, McCellan, Mather	NRM	$3,000
21	Martinez	CA	Remodel Vacated Dental Clinic, Mare Island	NRM	$2,750
21	Menlo Park	CA	Construct Dialysis and Physical Therapy	Minor	$8,910
VBA	Oakland	CA	Renew Lease at Oakland RO	Leases	$3,000
NCA	Oakland	CA	Mini-minor Projects	Minor	$1,000
21	Palo Alto	CA	Replace Spinal Cord Injury Center Seismic Mitigation	Major	$198,348

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
21	Palo Alto	CA	Consolidate Clinical Services to Palo Alto Division	Major	$54,950
21	Palo Alto	CA	Consolidate Mental Health Research (MIRECC) at Sunnyvale Campus	Minor	$14,650
21	Palo Alto	CA	Improve Mental Health Access in Palo Alto Division Building 520	Minor	$11,660
21	Palo Alto	CA	Improve site infrastructure and building engineering systems	NRM	$7,400
21	Palo Alto	CA	Renovate Specialty Care in PAD B100 for Pharmacy Compounding	NRM	$4,950
21	Palo Alto	CA	Enhance Site Physical Security and Emergency Engineering Systems	NRM	$3,425
21	Palo Alto	CA	Demolish Engineering Buildings at Menlo Park	NRM	$2,050
NCA	Riverside	CA	Construct Permanent Honor Guard Building	Minor	$1,330
22	San Diego	CA	New San Diego County CBOC Major Lease	Leases	$12,619
22	San Diego	CA	New UCSD Land Lease	Leases	$1,049
22	San Diego	CA	San Diego Homeless Counseling Center Lease Renewal	Leases	$950
22	San Diego	CA	San Diego Sorrento Valley Clinic Lease Renewal	Leases	$810
VBA	San Diego	CA	Renew Lease at San Diego RO	Leases	$3,000
VBA	San Diego	CA	Renew Lease at San Diego RO4	Leases	$1,750
VBA	San Diego	CA	Renew Lease at San Diego Storage	Leases	$26
22	San Diego	CA	Expand New Research Building	Major	$152,567
22	San Diego	CA	Construct New Research Building	Major	$133,892
22	San Diego	CA	UCSD Land Acquisition & Renovate Patient/Visitor Surface Parking Lot	Major	$93,972
22	San Diego	CA	Construct & Expand New Pathology Building - Phase 2	Minor	$18,936
22	San Diego	CA	Construct Outpatient Mental Health & Ancillary/Diagnostic Addition, B01 - SW	Minor	$18,868
22	San Diego	CA	Expand and Renovate ASU/PACU, 5W, Building 1, Phase 3	Minor	$18,832
22	San Diego	CA	Construct New Ancillary/Diagnostic & Auditorium Building, Phase 1	Minor	$18,432
22	San Diego	CA	Expand New Ancillary/Diagnostic & Auditorium Building - Phase 2	Minor	$18,083
22	San Diego	CA	Expand Research Facility - Phase 2	Minor	$18,076
22	San Diego	CA	Construct & Expand New Pathology Building - Phase 1	Minor	$18,048
22	San Diego	CA	Construct & Expand New Radiology Building - Phase 1	Minor	$17,468
22	San Diego	CA	Construct & Expand New Radiology Building - Phase 2	Minor	$16,669
22	San Diego	CA	Research Renovation 6W-A&B	Minor	$16,243
22	San Diego	CA	Replace & Expand MRI - Phase 1	Minor	$16,053
22	San Diego	CA	New Research Facility - Phase 1	Minor	$15,524
22	San Diego	CA	Research Renovation 6W-C&D	Minor	$15,504
22	San Diego	CA	Renovate Specialty Clinics & On-Call, 3E-C&D	Minor	$14,381
22	San Diego	CA	Renovate and Expand Intensive Care Unit, 5 South A&B	Minor	$14,261
22	San Diego	CA	Expand Research Facility - Phase 3	Minor	$14,241
22	San Diego	CA	Relocate & Renovate Surgery Service, 5N-D, Phase 4	Minor	$13,229
22	San Diego	CA	Renovate Cardiology, 4N B&C - Phase 1	Minor	$12,818
22	San Diego	CA	Modernize Radiology Department, Building 1, Phase 1	Minor	$12,647
22	San Diego	CA	Construct Additional Levels to Parking Structure 1 & 2	Minor	$12,591
22	San Diego	CA	Renovate & Expand Inpatient Psychiatry, B01, 2S-B&C	Minor	$11,883
22	San Diego	CA	Renovate Outpatient Mental Health 2N-C&D	Minor	$10,248
22	San Diego	CA	Modernize Physical Medicine and Rehabilitation	Minor	$9,543
22	San Diego	CA	Renovate & Expand Intensive Care Unit, 5 South C&D	Minor	$9,539

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
22	San Diego	CA	Renovate Infusion (3S) & Clinical Admin (3N)	Minor	$8,936
22	San Diego	CA	Renovate Outpatient Mental Health 2N-A&B	Minor	$8,919
22	San Diego	CA	Renovate Specialty Clinics & Pharmacy, 3 East-A&B	Minor	$8,731
22	San Diego	CA	Parking Garage 3 Addition	Minor	$8,629
22	San Diego	CA	Expand Ancillary/Diagnostic & Canteen Services, B 1	Minor	$7,318
22	San Diego	CA	Expand GI Procedure Center, 3S-A	Minor	$6,294
22	San Diego	CA	Renovate Surgical Service, B01-F05	Minor	$5,438
VBA	San Diego	CA	Build out at new San Diego RO Leases Consolidation	Minor	$17,707
22	San Diego	CA	Replace & Install New Cogen Turbine	NRM	$20,000
22	San Diego	CA	Replace Air handlers and Exhaust Fans - Group 3	NRM	$16,400
22	San Diego	CA	Replace Air handlers and Exhaust Fans - Group 2	NRM	$16,062
22	San Diego	CA	Replace Primary Electrical Distribution Leg - High Voltage - Group 2	NRM	$10,245
22	San Diego	CA	Site Physical Security Upgrade	NRM	$9,400
22	San Diego	CA	Replace Failing Riser System, Building 1 - Group 2	NRM	$9,306
22	San Diego	CA	Replace Failing Lateral System, Building 1 - Group 3	NRM	$9,092
22	San Diego	CA	Renovate B11 for Primary Care - PACT	NRM	$8,589
22	San Diego	CA	Replace Failing Lateral System, Building 1 - Group 2	NRM	$8,450
22	San Diego	CA	Upgrade Domestic Hot & Cold Water System A - Legionella Prevention	NRM	$8,428
22	San Diego	CA	Renovate & Secure Interstitial Space Entrances - Group 2	NRM	$8,305
22	San Diego	CA	Renovate Canteen Services	NRM	$8,076
22	San Diego	CA	Energy Management Controls Integration Upgrade, Group 2	NRM	$8,000
22	San Diego	CA	Energy Management Controls Integration Upgrade, Group 3	NRM	$8,000
22	San Diego	CA	Correct Stairwell 10 Life Safety Deficiencies	NRM	$7,619
22	San Diego	CA	Renovate Center Core, Floor 2-4	NRM	$7,577
22	San Diego	CA	Modernize/Convert CLC to Inpatient Med/Surg. Beds	NRM	$7,541
22	San Diego	CA	Replace Failing Riser System, Building 1 - Group 3	NRM	$7,290
22	San Diego	CA	Non-structural Seismic Upgrades	NRM	$6,900
22	San Diego	CA	Improve Traffic and Pedestrian Flow - Site	NRM	$6,750
22	San Diego	CA	Correct Flooring Elevation	NRM	$6,350
22	San Diego	CA	Install Lighting Occupancy Sensors & Retrofit Fixtures, Site	NRM	$6,150
22	San Diego	CA	Expand Emergency Water Storage Tank	NRM	$5,500
22	San Diego	CA	HVAC Re-Commissioning - Site	NRM	$5,000
22	San Diego	CA	Correct Interior Stairwell Headroom	NRM	$4,986
22	San Diego	CA	Upgrade Domestic Hot & Cold Water System B - Legionella Prevention	NRM	$4,978
22	San Diego	CA	Install and Correct Water Saving Plumbing Fixtures	NRM	$4,135
22	San Diego	CA	Renovate Transition Center for Health Care Needs Combat Veterans	NRM	$3,721
22	San Diego	CA	Correct Stairwell Deficiencies	NRM	$3,200
22	San Diego	CA	Upgrade Emergency Generator	NRM	$3,000
22	San Diego	CA	Upgrade Access Control System	NRM	$2,970
22	San Diego	CA	Correct Fire Sprinkler Deficiencies Above Loading Dock	NRM	$2,500
22	San Diego	CA	Upgrade Internal Physical Security	NRM	$2,300
22	San Diego	CA	Modernize Ambulatory Clinic Waiting Area, Building 1	NRM	$2,259
22	San Diego	CA	Recycled Water Connection for Irrigation and Cooling Tower Make-up	NRM	$2,200
22	San Diego	CA	Correct Front Lobby Heating/Cooling Ventilation	NRM	$1,529
22	San Diego	CA	Replace & Relocate Refrigeration Compressor	NRM	$1,210

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
22	San Diego	CA	Thermal Energy Storage System Addition	NRM	$1,100
21	San Francisco	CA	Lease Community Living Center	Leases	$16,365
21	San Francisco	CA	Construct Veteran Care and Access Center	Major	$154,000
21	San Francisco	CA	Renovate Acute Medical/Surgical Bed Sections for Patient Privacy in Building 203	NRM	$18,000
21	San Francisco	CA	Seismic Retrofit Building 2	NRM	$18,000
21	San Francisco	CA	Reinforce physical security of entrance/patient drop-off for building 200 & 203	NRM	$7,482
21	San Francisco	CA	Correct Campus Wide Physical Security Site Deficiencies	NRM	$6,663
21	San Francisco	CA	Replace Existing Wastewater Holding tank for 200 & 203	NRM	$6,600
21	San Francisco	CA	Replace Inpatient Windows in Hospital for Patient Safety	NRM	$6,350
21	San Francisco	CA	Renovate Building 203 Wing 1B for Primary Care Clinics	NRM	$5,450
21	San Francisco	CA	Renovate Mail Room for Physical Security	NRM	$2,550
21	San Francisco	CA	Construct New Storm Water Drainage System	NRM	$2,500
21	San Francisco	CA	Resurface roads and improve grounds	NRM	$2,370
21	San Francisco	CA	Correct Server Room Cooling Deficiencies, multiple locations	NRM	$2,255
21	San Francisco	CA	Upgrade Office of Information and Technology Main Data Infrastructure Connection	NRM	$1,910
21	San Francisco	CA	Renovate and Upgrade Canteen Kitchen	NRM	$1,900
21	San Francisco	CA	Replace and Expand Patient Wi-Fi	NRM	$1,800
22	Sepulveda	CA	Replace Chiller Building 40	NRM	$9,350
22	Sepulveda	CA	Renovate B200 Radiology	NRM	$4,675
22	Sepulveda	CA	Replace and Insulate Steam & Condensate Lines	NRM	$3,850
22	Sepulveda	CA	Replace Four Air Handling Units for Building 22	NRM	$3,800
22	Sepulveda	CA	Replace Irrigation System	NRM	$3,300
22	Sepulveda	CA	Upgrade Building 1 Ground Floor Utilities and Conditions.	NRM	$3,250
22	Sepulveda	CA	Correct Electrical Deficiencies for Building 1	NRM	$2,900
22	Sepulveda	CA	Replace LAACC chillers	NRM	$2,475
22	Sepulveda	CA	Replace 3 boilers / Water Heaters LAACC	NRM	$2,450
22	Sepulveda	CA	Correct Electrical Deficiencies for Building 62	NRM	$1,650
22	Sepulveda	CA	Replace Two Air Handling Units for Building 24	NRM	$1,600
22	Sepulveda	CA	Upgrade Information Technology Closets Bs 7, 10, 20, 22	NRM	$1,600
22	Sepulveda	CA	Replace Flooring and Finishes for Building 200	NRM	$1,300
22	Sepulveda	CA	Correct Electrical Deficiencies B40, B44, 45 & B46	NRM	$1,300
22	West Los Angeles	CA	Replace San Luis Obispo CBOC	Leases	$888
22	West Los Angeles	CA	Construct Ambulatory Care Center Replacement (Seismic Correction by Substantial Replacement of Building 500)	Major	$1,110,500
22	West Los Angeles	CA	Construct New Community Living Center Complex	Major	$505,000
22	West Los Angeles	CA	Seismic Replacement Consolidated Research Center (Seismic Corrections Fund)	Major	$328,380
22	West Los Angeles	CA	Restoration of Historical Structures - Buildings 20 & 66	Major	$39,600
22	West Los Angeles	CA	Replace Seismic Deficient Building 259	Minor	$7,100
22	West Los Angeles	CA	Compliance Legionella Directive Buildings 213, 214, 215, 217, 257, 523 and 525 - Recirculate & Insulate Domestic Water	NRM	$8,176
22	West Los Angeles	CA	Compliance Legionella Directive Building 500 - Install Automation System - Water Temperature & Quality	NRM	$6,451

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
22	West Los Angeles	CA	Upgrade Heating Ventilation and Cooling for Building 506	NRM	$5,500
22	West Los Angeles	CA	Compliance Legionella Directive Building 500 - Chill, Recirculate & Insulate Domestic Cold Water	NRM	$4,820
22	West Los Angeles	CA	Replace Building Transformers (B256 and B297)	NRM	$4,400
22	West Los Angeles	CA	Install Central Air Conditioning in Building 218	NRM	$3,000
22	West Los Angeles	CA	Upgrade Security Communication System	NRM	$3,000
22	West Los Angeles	CA	Compliance Legionella Directive - Install Automation Water Temperature & Quality Systems	NRM	$2,750
22	West Los Angeles	CA	Repair Roads and Walks	NRM	$2,750
22	West Los Angeles	CA	Renovate space for Mail Room and Reprographics in Building 297	NRM	$2,640
22	West Los Angeles	CA	Upgrade B256 HVAC	NRM	$2,500
22	West Los Angeles	CA	Compliance Legionella Directive Buildings 213 and 215 - Remove Unused Plumbing Components	NRM	$2,350
22	West Los Angeles	CA	Replace Galvanized Waterlines B158	NRM	$2,200
22	West Los Angeles	CA	Upgrade Heating Ventilation and Cooling for Building 297 Logistics Warehouse	NRM	$2,200
22	West Los Angeles	CA	Install Wireless Access Control	NRM	$2,200
22	West Los Angeles	CA	Replace Altitude and Backflow Manifold for Main Water Supply (North Campus)	NRM	$2,200
22	West Los Angeles	CA	Replace Steam Condensate for B304	NRM	$1,650
22	West Los Angeles	CA	Replace Roofs for B113 and B256	NRM	$1,500
22	West Los Angeles	CA	Upgraded B500 Server Room and Logistics Loading Dock HVAC	NRM	$1,440
22	West Los Angeles	CA	Replace Piping in Building 217	NRM	$1,320
22	West Los Angeles	CA	Enhance Use Lease for Veteran Housing	Other	$0
19	Denver	CO	Colorado Springs Clinic	Leases	$21,500
NCA	Denver	CO	Mini-minor Projects	Minor	$1,000
NCA	Fort Logan	CO	Gravesite Expansion (PPC, IGC, Columbaria)	Major	$40,000
NCA	Fort Logan	CO	Gravesite Expansion (Columbarium)	Minor	$8,000
1	West Haven	CT	Major Lease for Audiology/ENT/Eye Clinic	Leases	$8,931
1	West Haven	CT	Expand Building 1 3rd Floor for Surgery	Minor	$18,650
1	West Haven	CT	Expand Building 2 for Specialty Care	Minor	$15,470
1	West Haven	CT	Correct Electrical Deficiencies Building 1	NRM	$8,195
1	West Haven	CT	Upgrade Specialty Care Space First Floor Building 2	NRM	$7,700
Staff	Washington	DC	Lease Renewal for 801 I Street	Leases	$16,700
5	Washington	DC	Establish New Northern Virginia Multi-Specialty CBOC	Leases	$8,256
5	Washington	DC	Expand Fort Belvoir CBOC	Leases	$2,116

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
5	Washington	DC	Replace and Expand Landover Business Office Lease	Leases	$1,380
5	Washington	DC	Acquire Research, Clinic and Admin Lease from Armed Forces Retirement Home	Leases	$1,375
5	Washington	DC	Construct Outpatient Mental Health Building	Major	$121,000
5	Washington	DC	Construct Outpatient Clinical Addition	Major	$29,700
Staff	Washington	DC	GSA Construction	Minor	$1,000
Staff	Washington	DC	VACO Construction	Minor	$1,000
Staff	Washington	DC	General Counsel Office Renovations, 810 Vermont Avenue	Minor	$450
Staff	Washington	DC	Renovate NCA Space in 810 Vermont	Minor	$450
Staff	Washington	DC	Renovate OALC Space in 810 Vermont Avenue	Minor	$450
Staff	Washington	DC	Space Planning Services	Minor	$300
VBA	Washington	DC	Realign 722 I Street NW DC	Minor	$8,844
5	Washington	DC	Construct Fourth floor addition to Research building #14	Minor	$19,470
5	Washington	DC	Construct third floor addition to Research Building 14	Minor	$18,700
5	Washington	DC	Demolish and Relocate Parking garage 6P for correction of structural, seismic and physical security deficiencies	Minor	$18,700
5	Washington	DC	Construct Second Floor Addition to Research Building 14	Minor	$17,270
5	Washington	DC	Renovate 3E Inpatient Medical Ward for Inpatient Acute Psych	NRM	$16,830
5	Washington	DC	Renovate 2D Surgical Ward	NRM	$14,300
5	Washington	DC	Renovate Pathology	NRM	$11,770
5	Washington	DC	Replace and Upgrade Air Handling Units Buildings 1 and 6	NRM	$8,262
5	Washington	DC	Replace and Upgrade Building 1 heating system - Phase III	NRM	$7,700
5	Washington	DC	Renovate OR	NRM	$6,721
5	Washington	DC	Upgrade Steam and Condensate Distribution System	NRM	$6,050
5	Washington	DC	Renovate 2E SICU	NRM	$6,050
5	Washington	DC	Convert Central Dental Lab to Expand Poly Trauma, Prosthetics and Rehab Center	NRM	$5,830
5	Washington	DC	Renovate and Upgrade Outpatient mental Health on 3C	NRM	$5,775
5	Washington	DC	Renovate Existing Research Space Basement Building #1	NRM	$5,233
5	Washington	DC	Replace and Upgrade Ductwork and Secondary Water Distribution Piping Building 1 phase 2	NRM	$4,950
5	Washington	DC	Implement Steam & Condensate System Repairs	NRM	$4,400
5	Washington	DC	Construct 1 million gallon elevated water tank	NRM	$4,400
5	Washington	DC	Renovate 2C for Heart Center	NRM	$4,400
5	Washington	DC	Correct Condition Deficiencies, 4th Floor D Wing	NRM	$4,400
5	Washington	DC	Improve Accessibility and Access Control	NRM	$4,070
5	Washington	DC	Convert Surplus Laboratory Space to Imaging	NRM	$3,960
5	Washington	DC	Install Solar Panels	NRM	$3,300
5	Washington	DC	Upgrade Plumbing System Building 1, Phase II and implement engineering controls for prevention of legionella	NRM	$3,300
5	Washington	DC	Replace Parallel Water Mains and Water Well System	NRM	$2,756
5	Washington	DC	Renovate Dialysis Center	NRM	$2,750
5	Washington	DC	Upgrade IT Closets to Correct Deficiencies – VAMC-Wide	NRM	$2,676
5	Washington	DC	Replace Low Slope Roofs Areas 1D and 4A building #1	NRM	$2,323
5	Washington	DC	Replace Existing and Install additional Zone Isolation Valves for Heating and Cooling Water Distribution Systems	NRM	$2,200
5	Washington	DC	Correct Deficiencies of Parking and Roads	NRM	$1,962
5	Washington	DC	Renovate Dermatology and Neurology Third Floor Specialty Clinics	NRM	$1,870
5	Washington	DC	Replace Exterior Windows, Phase I	NRM	$1,650

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
5	Washington	DC	Construct Additional 1000KW Emergency Generator, Enclosure, associated transfer switches and panels	NRM	$1,650
5	Washington	DC	Replace Existing Windows Phase II	NRM	$1,650
5	Washington	DC	Replace and Upgrade Pressure Reducing Valves and heating system piping Facility wide	NRM	$1,650
5	Washington	DC	Correct Elevators Deficiencies, Buildings 1 and 6	NRM	$1,592
5	Washington	DC	Correct Grounding in Secondary Electrical System and Primary Switchgear	NRM	$1,320
5	Washington	DC	Correct Deficiencies in Therapeutic Swimming Pool	NRM	$1,245
5	Washington	DC	Renovate Social Work Service	NRM	$1,100
5	Washington	DC	Implement Geothermal Sourced Heat Pump Systems for Out Buildings	NRM	$1,100
VBA	Wilmington	DE	Renovate and Realign Wilmington RO to eRO Format	Minor	$2,152
4	Wilmington	DE	CLC Addition for Modernization	Minor	$16,199
4	Wilmington	DE	Construct Addition for Pharmacy	Minor	$14,117
8	Bay Pines	FL	Renew Sarasota CBOC	Leases	$435
8	Bay Pines	FL	Construct Parking Garage #2	Minor	$15,999
8	Bay Pines	FL	Construct Audiology/Ear Nose & Throat/Speech Clinic	Minor	$9,515
8	Bay Pines	FL	Construct Drive-Through Outpatient Pharmacy	Minor	$8,773
8	Bay Pines	FL	Expand Imaging - Lee County Healthcare Center	Minor	$6,680
8	Bay Pines	FL	Construct Parking Garage #3	Minor	$5,533
8	Bay Pines	FL	Construct Parking Garage #4	Minor	$5,533
NCA	Bay Pines	FL	Gravesite Expansion (Columbarium)	Minor	$3,000
NCA	Bay Pines	FL	Replace Irrigation System	Minor	$2,417
NCA	Bay Pines	FL	Replace Roads and Add Storm Drainage	Minor	$1,810
8	Bay Pines	FL	Improve Traffic Flow on the Bay Pines Campus	NRM	$5,690
8	Bay Pines	FL	Replace Fiber Data and Telecom Backbone System	NRM	$4,665
8	Bay Pines	FL	Correct Architectural Deficiencies - Building 71	NRM	$3,850
8	Bay Pines	FL	Renovate Mechanical Systems, B 102, Domiciliary, Ph III	NRM	$3,800
8	Bay Pines	FL	Renovate Domiciliary Building 102 Phase I	NRM	$3,740
8	Bay Pines	FL	Install Radio Frequency Identification (RFID) Equipment and Patient Location System	NRM	$3,520
8	Bay Pines	FL	Install Solar Photovoltaic System Building 100 Roof	NRM	$3,045
8	Bay Pines	FL	Renovate "Service Mall" Area Building 100	NRM	$2,585
8	Bay Pines	FL	Replace Corroded Galvanized Water Piping with Copper - Water Mains and Buildings 2, 13, 19, and 20	NRM	$1,425
8	Bay Pines	FL	Repurpose Emergency Department Space for Psychiatric Observation Area - Building 100	NRM	$1,350
8	Gainesville	FL	Replacement Jacksonville 1 Outpatient Clinic	Leases	$11,130
8	Gainesville	FL	Replace The Villages Outpatient Clinic	Leases	$11,000
8	Gainesville	FL	Replace Existing Lecanto Outpatient Clinic	Leases	$4,390
8	Gainesville	FL	Replace Existing Domiciliary Lease	Leases	$2,700
8	Gainesville	FL	Establish Prosthetics Lease	Leases	$850
8	Gainesville	FL	Establish a New Gainesville Dental Clinic Lease	Leases	$595
8	Gainesville	FL	Establish a Rural Health Clinic in Levy County	Leases	$383
8	Gainesville	FL	Construct Ambulatory Care Building	Major	$220,000
8	Gainesville	FL	Construct Diagnostic Imaging Building	Major	$78,000
8	Gainesville	FL	Construct New Outpatient Surgery Center Phase 1	Minor	$19,800
8	Gainesville	FL	Construct New Consolidated Logistics Center	Minor	$19,600
8	Gainesville	FL	Construct New Imaging & Dialysis Center	Minor	$19,600

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
8	Gainesville	FL	Construct Medical Staff Garage #4 (Pride)	Minor	$19,550
8	Gainesville	FL	Expand Vertical Parking Garage #3 (Liberty) Level 3-7	Minor	$18,600
8	Gainesville	FL	Construct New Emergency Care Center	Minor	$18,500
8	Gainesville	FL	Expand Horizontal Parking Garage #3 (Liberty) Level 1-2	Minor	$18,250
8	Gainesville	FL	Construct Valet Parking Garage #5 (Patriot)	Minor	$16,775
8	Gainesville	FL	Construct New Pharmacy Center	Minor	$15,400
8	Gainesville	FL	Expand Vertical Parking Garage #2 (Independence)	Minor	$10,780
8	Gainesville	FL	Construct Radiation Therapy Unit	Minor	$8,450
8	Gainesville	FL	Upgrade IT Backbone Infrastructure	NRM	$13,250
8	Gainesville	FL	Correct Facility Deficiencies	NRM	$11,000
8	Gainesville	FL	Renovate Vacated Medical Center Space	NRM	$9,900
8	Gainesville	FL	Renovate Intensive Care Units	NRM	$9,850
8	Gainesville	FL	Correct Facility Deficiencies, Phase 2	NRM	$9,850
8	Gainesville	FL	Renovate Research Laboratories	NRM	$9,850
8	Gainesville	FL	Renovate Laboratory Area for Radiology Service Expansion	NRM	$9,350
8	Gainesville	FL	Correct Architectural Deficiencies	NRM	$8,800
8	Gainesville	FL	Renovate 5A and 5B for Mental Health	NRM	$8,100
8	Gainesville	FL	Correct Mechanical and Electrical Improvements	NRM	$7,100
8	Gainesville	FL	Correct Mechanical Deficiencies	NRM	$5,500
8	Gainesville	FL	Relocate Chapel and Physical Rehabilitative	NRM	$4,900
8	Gainesville	FL	Construct Safe Passage to Support Units	NRM	$4,400
8	Gainesville	FL	Replace Cable TV and Nurse Call System	NRM	$2,750
8	Gainesville	FL	Rainwater Harvesting for Industrial Water NFSG	NRM	$2,750
8	Gainesville	FL	Correct Electrical Deficiencies	NRM	$2,200
8	Gainesville	FL	Renovate Common Area Restrooms	NRM	$2,184
8	Gainesville	FL	Improve Physical Security at Hospital Entrances	NRM	$1,925
8	Gainesville	FL	INSTALL Continuous Monitoring System on Domestic Water	NRM	$1,650
8	Gainesville	FL	Replace Flanged Valves Hospital Wide	NRM	$1,600
8	Gainesville	FL	Replace Manhole and Vault Covers Lake City & Gainesville	NRM	$1,600
8	Gainesville	FL	Upgrade Natural Gas Redundancy & Security	NRM	$1,300
8	Gainesville	FL	Upgrade Stormwater Management Structures	NRM	$1,210
8	Gainesville	FL	Replace Building 12 Switchgear	NRM	$1,045
8	Lake City	FL	Replacement Hospital	Major	$164,000
8	Lake City	FL	Construct Parking Garage	Minor	$19,900
8	Lake City	FL	Construct New Administration Center	Minor	$19,800
8	Lake City	FL	Construct New Parking Garage	Minor	$19,600
8	Lake City	FL	Construct New Consolidated Logistics Center	Minor	$19,500
8	Lake City	FL	Construct New NFSG Regional Mall	Minor	$19,500
8	Lake City	FL	Construct New VA Hostel Facility Phase 1	Minor	$18,500
8	Lake City	FL	Construct Surgery and Endoscopy Center	Minor	$15,500
8	Lake City	FL	Construct Outpatient Building	Minor	$12,500
8	Lake City	FL	Expand Ambulatory Care Building - 4th Floor	Minor	$9,900
8	Lake City	FL	Construct Ancillary Diagnostic Building	Minor	$9,400
8	Lake City	FL	Expand Building No. 19	Minor	$8,250
8	Lake City	FL	Construct Medical Specialties Building	Minor	$7,750
8	Lake City	FL	Construct New Police Station and Reception Center	Minor	$2,750
8	Lake City	FL	Construct New Transportation Hub & Motor Pool	Minor	$1,375
8	Lake City	FL	Correct Architectural Deficiencies	NRM	$9,100
8	Lake City	FL	Correct Mechanical Deficiencies	NRM	$8,800
8	Lake City	FL	Replace Air Handling Units	NRM	$7,700

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
8	Lake City	FL	Correct Facility Deficiencies	NRM	$6,625
8	Lake City	FL	Construct Safe Passage to Support Units	NRM	$4,125
8	Lake City	FL	Correct Electrical Deficiencies	NRM	$4,000
8	Lake City	FL	Renovate Emergency Department for Radiology	NRM	$2,750
8	Lake City	FL	Install Solar PV Array	NRM	$2,150
8	Miami	FL	NEW Broward County Community Primary Care Lease	Leases	$1,799
8	Miami	FL	Primary Care Lease Clinical for main hospital	Leases	$1,750
8	Miami	FL	Relocate off site in leased space Home based primary care	Leases	$650
8	Miami	FL	Deerfield beach CBOC succeeding lease	Leases	$171
8	Miami	FL	Expand community living center bldg 10 relocate offices CLC 4	Minor	$18,026
8	Miami	FL	Expand and renovate spinal cord injury congregate living area for privacy-FCA-D	Minor	$17,946
8	Miami	FL	Add addition floors to parking garage	Minor	$17,850
8	Miami	FL	design and construct new clinical support and treatment center with parking Phase 1	Minor	$15,500
8	Miami	FL	design and construct expansion to clinical support and treatment center phase 2	Minor	$8,500
8	Miami	FL	Construct new surgical intensive care unit at new location (SICU).	Minor	$7,390
8	Miami	FL	Relocate Human resources to 10th floor building 1	Minor	$1,299
8	Miami	FL	Replace sanitary sewer main Floors 3, 4, and 5 and branches Phase II	NRM	$10,000
8	Miami	FL	Replace sanitary sewer main Floors 6, 7, and 8 and branches Phase III	NRM	$10,000
8	Miami	FL	Install new HVAC and new Boiler to electrical distribution plant Building 44 floors 2 and 3	NRM	$9,500
8	Miami	FL	Replace and relocate Electrical Panelboards/transformers Building 1	NRM	$8,800
8	Miami	FL	Expand front lobby and primary care absorption and reconfiguration	NRM	$8,778
8	Miami	FL	Renovate the Fourth Community living center for spinal cord injury long term care	NRM	$8,400
8	Miami	FL	Abate asbestos containing mastic adhesive and Remove asbestos containing Heating Ventilation and Air Conditioning. FCA-D	NRM	$8,281
8	Miami	FL	Renovate Interior Corridors Building 1 2nd and 3rd Floors phase 2	NRM	$7,700
8	Miami	FL	Renovate interior corridor in building one Phase 3 floors 4-12	NRM	$7,200
8	Miami	FL	Install new solar panels in auxiliary parking area	NRM	$6,270
8	Miami	FL	Relocate research from main hospital to new research building for Mental Health	NRM	$6,262
8	Miami	FL	Replace air handlers in main hospital	NRM	$5,500
8	Miami	FL	Additional Mental Health Ambulatory Care department	NRM	$5,470
8	Miami	FL	Specialty care cluster relocation	NRM	$5,210
8	Miami	FL	Convert remaining non private rooms to private	NRM	$5,000
8	Miami	FL	Relocate Medical Service Administration and reduction Human Resources and prosthetics movements	NRM	$4,641
8	Miami	FL	Renovate Primary Care clinic 1 Red and gold team	NRM	$4,513
8	Miami	FL	Renovate specialty clinics 1, 2 and 3 phased	NRM	$3,969

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
8	Miami	FL	Replace Levers and Handrails Building 1	NRM	$3,479
8	Miami	FL	Construct new facility wide uninterruptable power supply (UPS) for primary and emergency systems	NRM	$2,850
8	Miami	FL	Renovate Cardiology Clinic including catheterization	NRM	$2,635
8	Miami	FL	Relocate logistics and Engineering Services	NRM	$2,487
8	Miami	FL	Pressure wash building 1, building 44 and building 10	NRM	$2,093
8	Miami	FL	Renovate primary care clinic 2 BLUE GREEN TEAM	NRM	$2,065
8	Miami	FL	Relocate telecommunications and Intermediate Distribution Frame closets	NRM	$1,991
8	Miami	FL	Renovate CLC 1st Floor	NRM	$1,805
8	Miami	FL	Upgrade water fixtures for buildings 1	NRM	$1,250
8	Miami	FL	Replace flooring in operating rooms and hallways 3rd Floor Building 1	NRM	$1,035
8	Miami	FL	Correction to Main hospital security project PDSM deficiency	NRM	$1,000
8	Miami	FL	Corrections to Building 7 PSDM security project update	NRM	$1,000
8	Orlando	FL	Expand Building 13 at Lake Nona- 2B	Minor	$18,938
8	Orlando	FL	Replace Lake Baldwin Domiciliary	Minor	$15,055
8	Orlando	FL	Install Solar Photovoltaic (PV) Canopy Systems - Lake Nona	NRM	$8,800
8	Orlando	FL	Improve Electrical Infrastructure at Lake Baldwin	NRM	$5,443
8	Orlando	FL	Remove Asbestos from Lake Baldwin Campus	NRM	$3,248
8	Orlando	FL	Tuck-point Lake Baldwin and Lakemont Brick Facades	NRM	$3,000
8	Orlando	FL	Refinish Lake Nona Common Areas Phase 1	NRM	$2,750
8	Orlando	FL	Upgrade Lighting Fixtures to Light Emitting Diodes	NRM	$2,243
8	Orlando	FL	Address roofs at Orlando Campuses	NRM	$2,000
8	Orlando	FL	Update Lake Nona Elevators	NRM	$1,056
NCA	Sarasota	FL	Gravesite Expansion	Major	$28,000
VBA	St Petersburg	FL	Renew Lease at Jacksonville VR&E Office	Leases	$167
VBA	St Petersburg	FL	Renew Lease at Sarasota VR&E Office	Leases	$30
VBA	St Petersburg	FL	Renovate and Realign St Petersburg RO	Minor	$9,900
VBA	St Petersburg	FL	Upgrade Lighting Control System	Minor	$350
VBA	St Petersburg	FL	Install Reclaimed Waterline System	Minor	$330
8	Tampa	FL	Establish New lease to move the Community Living Short Term Rehabilitation Center off site	Leases	$31,097
8	Tampa	FL	Construct new Emergency Department building	Major	$169,180
8	Tampa	FL	Construct new Primary Care space	Minor	$19,716
8	Tampa	FL	Construct Ambulatory Surgery Center (ASC), 1st & 2nd floors	Minor	$19,500
8	Tampa	FL	Construct 1st Level Parking Garage	Minor	$17,965
8	Tampa	FL	Acquire Land & Construct Physical Therapy Building	Minor	$16,486
8	Tampa	FL	Renovate Building 32, 1st floor - Oncology Diagnostic Services	NRM	$16,709
8	Tampa	FL	Renovate Building 1-Ground Floor N&FS for Logistics	NRM	$14,760
8	Tampa	FL	Renovate Building 1- 6 South and 6 West to single patient rooms	NRM	$14,748
8	Tampa	FL	Upgrade Campus Roads, Sidewalks and Lighting	NRM	$9,900
8	Tampa	FL	Replace sanitary sewage drainage systems Bldg #1	NRM	$9,900
8	Tampa	FL	Renovate Community Living Center Phase II	NRM	$9,900
8	Tampa	FL	Replace stormwater distribution system bldg #1	NRM	$9,045
8	Tampa	FL	Replace Condens Water Sys, Steam distrib, Reheats Bldg1	NRM	$7,150
8	Tampa	FL	Replace Air Handler Units 1,2,3 and 4	NRM	$6,450
8	Tampa	FL	Replace Magnetic Resonance Imaging (MRI) HVAC Building 1, Phase 1	NRM	$5,720

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
8	Tampa	FL	Renovate Building 1-2nd Floor for Support Services	NRM	$5,585
8	Tampa	FL	Construct Waste Water Storage	NRM	$5,500
8	Tampa	FL	Upgrade Medical Gas Distribution in Building 39 CEP	NRM	$5,500
8	Tampa	FL	Upgrade Campus Wide Building Entrance and Exits	NRM	$4,400
8	Tampa	FL	Upgrade Campus Wide Structural Sys. & Facades	NRM	$3,300
8	Tampa	FL	Upgrade Campus Utility Syst & Building Services	NRM	$3,300
8	Tampa	FL	Upgrade Campus Wide Security Systems	NRM	$3,300
8	Tampa	FL	Install Fire Suppression Systems Deficiencies Campus Wide	NRM	$3,160
8	Tampa	FL	Replace Outside Air and Exhaust Systems, Bs 30, 32 and 39	NRM	$2,800
8	Tampa	FL	Replace Second Trans,Panels:Test-Calib Prim Switchgear Bldg#1	NRM	$1,380
8	Tampa	FL	Fabricate & install Campus Wide Interior & Exterior Signage	NRM	$1,000
8	West Palm Beach	FL	Lease Multispecialty Clinic Northern Catchment	Leases	$23,600
8	West Palm Beach	FL	Lease Primary Care Mental Health Integration	Leases	$13,860
8	West Palm Beach	FL	Lease Multi Specialty Clinic Southern Catchment	Leases	$10,480
8	West Palm Beach	FL	Enhance Long Term Care Construct Addition to Community Living Center	Major	$23,460
8	West Palm Beach	FL	Construct Multispecialty Care Clinic Phase 1	Minor	$19,000
8	West Palm Beach	FL	Construct Multispecialty Care Clinic Phase 2	Minor	$19,000
8	West Palm Beach	FL	Construct 350 Space Parking Garage	Minor	$9,900
8	West Palm Beach	FL	Construct Blind Rehabilitation Unit	Minor	$9,830
8	West Palm Beach	FL	Enclose 3rd Floor Terrace for Specialty Care	Minor	$3,320
8	West Palm Beach	FL	Expand Oncology Infusion Center	Minor	$1,683
8	West Palm Beach	FL	Enhance Access in Outpatient Rehab and Pain Management	NRM	$7,007
8	West Palm Beach	FL	Enhance Privacy of 6A by Converting Semi-Private to Private Rooms	NRM	$6,000
8	West Palm Beach	FL	Enhance Privacy of 6B by Converting Semi-Private to Private Rooms	NRM	$6,000
8	West Palm Beach	FL	Enhance Privacy of 7B by Converting Semi-Private to Private Rooms	NRM	$5,500
8	West Palm Beach	FL	Replace and refinish worn flooring and ceiling tile in high traffic areas	NRM	$5,500
8	West Palm Beach	FL	Renovate Ambulatory Care Unit 5A	NRM	$5,036
8	West Palm Beach	FL	Replace Air Handler Units 1,42,47,9,20,36,44 and 46	NRM	$4,500
8	West Palm Beach	FL	Replace Air Handlers 48,49,8,30,50,51,52 and 53	NRM	$4,500
8	West Palm Beach	FL	Replace Air Handlers 7,14,41,23,32,33,18 and 19	NRM	$4,500

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
8	West Palm Beach	FL	Raise Operating Room Ceilings to VA Mandated Height	NRM	$3,600
8	West Palm Beach	FL	Replace Secondary Transformers	NRM	$3,000
8	West Palm Beach	FL	Initiate Combined Heat and Power (CHP) Program	NRM	$2,700
8	West Palm Beach	FL	Install Photovoltaic Panels on the Community Living Center Phase II	NRM	$2,505
8	West Palm Beach	FL	Replace Air Handlers 11,18,19 and 29	NRM	$2,000
8	West Palm Beach	FL	Install BioGas Bloom Box	NRM	$1,800
8	West Palm Beach	FL	Upgrade Electrical Distribution System	NRM	$1,448
8	West Palm Beach	FL	Install Storm Shutters Bldg. #1	NRM	$1,300
7	Atlanta	GA	New Specialty Care and Ancillary/Diagnostic Major Lease	Leases	$36,978
VBA	Atlanta	GA	Renew Lease at Atlanta Storage	Leases	$79
VHA	Atlanta	GA	Replace Atlanta PBM Lease	Leases	$167
7	Atlanta	GA	Purchase Land and Construct Health Care Center in Gwinnett County, GA	Major	$270,250
7	Atlanta	GA	Research Partnership with Emory	Minor	$8,067
7	Atlanta	GA	Off-Site Warehouse Lease	Minor	$7,936
7	Atlanta	GA	Renovate, Relocate and Expand Spinal Cord Injury and Traumatic Brain Injury Services with New Main Lobby on 1st Floor Building 1A	Minor	$4,840
7	Atlanta	GA	Address Fort McPherson VA Site Security and Safety Requirements with Police Building and Land Purchase	Minor	$4,203
7	Atlanta	GA	Expand CLC offsite (Carrollton)	Minor	$3,423
VBA	Atlanta	GA	Renovate and Realign Atlanta RO 3rd Floor to eRO Model	Minor	$5,668
VBA	Atlanta	GA	Renovate and Realign Atlanta 4th Floor RO to eRO Model	Minor	$5,668
7	Atlanta	GA	Repair, Replace, and Upgrade Roadways, Sidewalks and Wayfinding Signage Deficiencies	NRM	$11,573
7	Atlanta	GA	Replace Boilers, Connected Equipment, and Controls, B 1	NRM	$11,410
7	Atlanta	GA	Correct Deficiencies in Campus Fire Alarm Systems	NRM	$9,900
7	Atlanta	GA	Renovate Building 125 at Fort McPherson for Specialty Care Clinical Services - Phase 3	NRM	$9,350
7	Atlanta	GA	Replace Failed Plumbing Fixtures and Legionella Prevention	NRM	$8,250
7	Atlanta	GA	Renovate Building 1 - 6th Floor for Medical Beds	NRM	$7,640
7	Atlanta	GA	Retrofit, Replace, and Improve Lighting for Energy Savings	NRM	$7,200
7	Atlanta	GA	Ensure Safety and Security of VA Buildings with Purchase of FORSCOM Building at Ft. McPherson	NRM	$6,790
7	Atlanta	GA	Replace CATV and Electrical Deficiencies in Building 1	NRM	$5,280
7	Atlanta	GA	Inpatient Med/Surg Expansion on 1C 11th Floor	NRM	$5,192
7	Atlanta	GA	Inpatient Med/Surg Expansion on 1C 12th Floor	NRM	$5,192
7	Atlanta	GA	Expand Specialty Services and Engineering on 1A 1st floor	NRM	$5,031
7	Atlanta	GA	Expand PACU, pre/post op, and OR increase on 1C 2nd Floor	NRM	$4,549
7	Atlanta	GA	Renovate and Expand Sterile Processing Services-Phase II on Ground Floor Building 1C	NRM	$4,180

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
7	Atlanta	GA	Correct Life Safety, Accessibility, and Architectural Deficiencies	NRM	$4,180
7	Atlanta	GA	Renovate Mechanical Space for a Usable Learning Organization Center for Clinical and Support Educational Services on 3rd Floor Building 1C	NRM	$3,960
7	Atlanta	GA	Correct Building 1 and T13 Elec/IT Deficiencies	NRM	$3,960
7	Atlanta	GA	Correct Deficiencies in Specialty Care Clinic and Lab	NRM	$3,850
7	Atlanta	GA	Correct Fixed Equipment, Replace Prism System Model 2000XP	NRM	$3,800
7	Atlanta	GA	Convert Pulmonary space into ICU on 1C 2nd floor	NRM	$3,740
7	Atlanta	GA	Replace Condensing Units and Improve Air Distribution, Building 1	NRM	$3,740
7	Atlanta	GA	Expand Emergency Department in Building 1	NRM	$3,575
7	Atlanta	GA	Correct space Needs, Improve Patient Safety and Access, and Enable Surgical Expansion with Relocation of Surgical Admin to 2nd Floor Bldg. 1B	NRM	$3,572
7	Atlanta	GA	Renovate CLC Kitchen for Cook-To-Order Service	NRM	$3,300
7	Atlanta	GA	Correct Building 1 and Emergency Care Deficiencies	NRM	$3,300
7	Atlanta	GA	Expand Pulmonary/Resp Care and Specialty Care Services on 1C 1st Floor	NRM	$3,168
7	Atlanta	GA	Upgrade Transformers to High Efficiency	NRM	$2,750
7	Atlanta	GA	Correct Building 1 DDC Controls	NRM	$2,750
7	Atlanta	GA	Improve Medical Gases, Building 1	NRM	$1,925
7	Atlanta	GA	Correct Fort McPherson Site Accessibility, Safety, and Security Deficiencies	NRM	$1,870
7	Atlanta	GA	Correct Safety, Compliance, and Condition Deficiencies, Building 1 Kitchen	NRM	$1,863
7	Atlanta	GA	Expand Specialty Services on 1B 1st Floor and 1B 2nd Floor	NRM	$1,730
7	Atlanta	GA	Correct Fixed Equipment, Replace Model MXT Fluoroscopy X-Ray Unit	NRM	$1,650
7	Atlanta	GA	Install Additional Required Security Fencing at Carrollton	NRM	$1,540
7	Atlanta	GA	Correct Deficiencies, Renovate Aged Space, and Improve Chaplaincy Services on 1st Floor Bldg 1C	NRM	$1,484
7	Atlanta	GA	Med/Surg Expansion on 1C Floor 7	NRM	$1,403
7	Atlanta	GA	Med/Surg Expansion on 1C Floor 9	NRM	$1,397
7	Augusta, Downtown	GA	Lease for Specialty Care & Ancillary/Diagnostics	Leases	$48,901
7	Augusta, Downtown	GA	Replace Lease for VISN 7 Central Accounting Office	Leases	$218
7	Augusta, Downtown	GA	Replace Augusta Vet Center Lease	Leases	$76
7	Augusta, Downtown	GA	Expand Downtown Parking Deck	Minor	$18,900
7	Augusta, Downtown	GA	Replace Bldg. 801 Exterior Wall Panels and Windows, Phase 2	NRM	$24,200
7	Augusta, Downtown	GA	Repair Building 801 Exterior Shell, Tuck-Pointing and Skylights	NRM	$21,400
7	Augusta, Downtown	GA	Correct Electrical Deficiencies in Medical Center (main building 801) with Lighting Retrofit	NRM	$13,600

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
7	Augusta, Downtown	GA	Renovate Building 801 Interior Finishes	NRM	$13,130
7	Augusta, Downtown	GA	Renovate Building 802 Energy Plant	NRM	$12,170
7	Augusta, Downtown	GA	Replace Bldg. 801 & 802 Exterior Wall Panels and Windows, Phase 1	NRM	$9,900
7	Augusta, Downtown	GA	Expand Radiology into B801 1st Floor	NRM	$7,741
7	Augusta, Downtown	GA	Upgrade, Expand/Replace, and Improve Direct Digital Controls for Energy Savings, Building 801	NRM	$7,315
7	Augusta, Downtown	GA	Renovate Building 801 Specialty Care Clinics	NRM	$7,202
7	Augusta, Downtown	GA	Improve / Replace Research Lab Items	NRM	$5,600
7	Augusta, Downtown	GA	Renovate Downtown 4A for Specialty Care	NRM	$4,500
7	Augusta, Downtown	GA	Convert vacant/specialty care to Admin on 7A and renovate 7C	NRM	$3,644
7	Augusta, Downtown	GA	New Security Fencing and Replacement of Security Monitoring System	NRM	$3,540
7	Augusta, Downtown	GA	Replace Miscellaneous Nurse Call / Int / TV Equipment	NRM	$3,410
7	Augusta, Downtown	GA	Renovate Palliative Care Rooms	NRM	$3,300
7	Augusta, Downtown	GA	Convert B801 G Wing for SCI Patient Privacy	NRM	$2,750
7	Augusta, Downtown	GA	Correct Plumbing Deficiencies, Building 801	NRM	$2,750
7	Augusta, Downtown	GA	Install New Water Tower	NRM	$2,700
7	Augusta, Downtown	GA	Renovate Building 801 Entrances, Waiting Areas and Lobbies	NRM	$2,200
7	Augusta, Downtown	GA	Relocate the Downtown Audiology/Speech to the Uptown Division.	NRM	$1,998
7	Augusta, Downtown	GA	Replace Gamma Camera, B801	NRM	$1,100
7	Augusta, Uptown	GA	Construct Foundational Services Outpatient Mental Health Building, Uptown Division	Minor	$16,131
7	Augusta, Uptown	GA	Construct Foundational Service Women's Health Clinic and Primary Care Building	Minor	$16,113
7	Augusta, Uptown	GA	Construct Domiciliary to Support Suicide Prevention, Address Privacy Issues, and Enhance Therapeutic Environment of Care	Minor	$16,107
7	Augusta, Uptown	GA	Construct Foundational VA Care Coordination Addition and Health Care Navigation Center, Uptown Division	Minor	$16,070
7	Augusta, Uptown	GA	Correct Space Needs, Patient Safety, and Private Bed Conversion with Building 110 2C, 2D, and 2E Wing CLC Renovation and Expansion	Minor	$16,000
7	Augusta, Uptown	GA	Replace Boiler Plant / CHP	NRM	$9,130
7	Augusta, Uptown	GA	Replace Bldg. 110 Operable Exterior Windows	NRM	$8,900

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
7	Augusta, Uptown	GA	Renovate Building 110, 4th Floor for Administration	NRM	$6,400
7	Augusta, Uptown	GA	Renovate Building 110 Bathroom Facilities	NRM	$6,380
7	Augusta, Uptown	GA	Renovate Building 110 Halls and Walls, Phase 1	NRM	$5,500
7	Augusta, Uptown	GA	Renovate Primary Care Clinics - Ground Floor Building 110	NRM	$5,480
7	Augusta, Uptown	GA	Replace and Upgrade Building Fenstration Deficiencies	NRM	$5,070
7	Augusta, Uptown	GA	Renovate Bldg 110 First Floor - C wing for private beds	NRM	$4,723
7	Augusta, Uptown	GA	Install Lighting Retrofit for Uptown Buildings	NRM	$4,510
7	Augusta, Uptown	GA	Consolidate Outpatient Rehab (PT/OT) from Downtown	NRM	$4,500
7	Augusta, Uptown	GA	Replace / Improve Miscellaneous Interior/Accessibility Items	NRM	$4,424
7	Augusta, Uptown	GA	Renovate PACT Team D	NRM	$4,122
7	Augusta, Uptown	GA	Renovate the Building 110 3F Mental Health Clinic	NRM	$3,700
7	Augusta, Uptown	GA	Renovate Uptown Pool Area	NRM	$3,300
7	Augusta, Uptown	GA	Correct Building 110 Entrances, Waiting Areas, and Lobby Deficiencies	NRM	$2,404
7	Augusta, Uptown	GA	Replace Food Service Equipment and New Casework	NRM	$2,325
7	Augusta, Uptown	GA	Replace / Improve Miscellaneous Mechanical Items	NRM	$2,300
7	Augusta, Uptown	GA	Correct Critical Deficiencies, Renovate Deteriorating/Aged Primary Care Clinic A (PACT Module 1)	NRM	$2,290
7	Augusta, Uptown	GA	Correct Mechanical Deficiencies in Building 110	NRM	$1,830
7	Augusta, Uptown	GA	Expand Dental	NRM	$1,520
7	Augusta, Uptown	GA	Renovate Building 110 Administrative Areas	NRM	$1,400
7	Augusta, Uptown	GA	Consolidate Audiology from Downtown	NRM	$1,200
7	Augusta, Uptown	GA	Replace/Upgrade Information Technology Infrastructure Uptown	NRM	$1,145
7	Dublin	GA	Construct Mental Health Clinic Addition	Minor	$17,100
7	Dublin	GA	Consolidate "Quality of Life Services" by Constructing an Accessible Dental and Eye Clinic Addition	Minor	$16,083
7	Dublin	GA	Construct Primary Care Addition	Minor	$16,000
7	Dublin	GA	Construct Specialty Care Addition - Phase II	Minor	$16,000
7	Dublin	GA	Construct Domiciliary to Correct Patient Privacy Issues, Support Suicide Prevention, and Enhance Therapeutic Environment	Minor	$15,990
7	Dublin	GA	Construct Specialty Care Addition - Phase III	Minor	$11,332

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
7	Dublin	GA	Construct Specialty Care Addition to Increase Capacity/Expand Services	Minor	$9,889
7	Dublin	GA	Repair Utility Deficiencies in Mechanical, Electrical, and Plumbing Systems	NRM	$13,072
7	Dublin	GA	Replace / Improve Miscellaneous Mechanical and Plumbing Items	NRM	$12,320
7	Dublin	GA	Construct PSDM Perimeter Fencing around Campus	NRM	$11,891
7	Dublin	GA	Correct Architectural Deficiencies on Campus	NRM	$10,858
7	Dublin	GA	Repurpose 17B and 19B for swing space	NRM	$10,131
7	Dublin	GA	Correct Sanitary and Storm Water Deficiencies on Site	NRM	$5,819
7	Dublin	GA	Correct Roofs and Exterior Wall Deficiencies Campus-wide	NRM	$5,720
7	Dublin	GA	Renovate 3B for Lab & Pathology Expansion	NRM	$5,552
7	Dublin	GA	Correct Parking and Accessibility Deficiencies on Site	NRM	$4,576
7	Dublin	GA	Renovate 15A for Police and Security	NRM	$4,283
7	Dublin	GA	Replace / Improve Miscellaneous Interior / Accessibility Items	NRM	$4,180
7	Dublin	GA	Replace Building 1 Air Handling Unit	NRM	$2,976
7	Dublin	GA	Renovate Pharmacy Services	NRM	$2,593
7	Dublin	GA	Relocate Homeless Domiciliary from 8B to 12B	NRM	$1,945
7	Dublin	GA	Renovate Non-ADA and Safety Deficient Public and Staff Restrooms	NRM	$1,924
7	Dublin	GA	Replace / Improve Miscellaneous Electrical Items	NRM	$1,815
7	Dublin	GA	Correct Seismic Deficiencies Building 3	NRM	$1,242
7	Dublin	GA	Correct Seismic Deficiencies Building 4	NRM	$1,099
NCA	Marietta	GA	Install Irrigation	Minor	$1,670
NCA	Marietta	GA	Renovate Site/Buildings to Correct Deficiencies	Minor	$1,670
VBA	Honolulu	HI	Renew Lease at Guam-Tamuning VR&E Office	Leases	$150
VBA	Honolulu	HI	Renew Lease at Hilo VR&E Office	Leases	$27
21	Honolulu	HI	Expand and Renovate Center For Aging	Minor	$18,920
21	Honolulu	HI	Construct Kona Replacement CBOC	Minor	$16,500
21	Honolulu	HI	Renovate Ambulatory Care Clinic	NRM	$8,250
VBA	Des Moines	IA	Renew Lease at Cedar Rapids VR&E Office	Leases	$70
23	Des Moines	IA	Phase II Parking Garage	Minor	$15,820
23	Des Moines	IA	Construct Surgery Addition	Minor	$12,192
23	Des Moines	IA	Remodel and Expand Outpatient and Mental Health Domiciliary	Minor	$11,072
23	Des Moines	IA	Phase II OP Mental Health	Minor	$9,910
23	Des Moines	IA	Construct Rehabilitation Center Phase II	Minor	$9,394
23	Des Moines	IA	Remodel and Expand Specialty Clinics and In-Patient MH	Minor	$5,151
VBA	Des Moines	IA	Renovate and Realign Des Moines RO	Minor	$6,000
23	Des Moines	IA	Halls and Walls	NRM	$2,300
23	Des Moines	IA	Reconnect Circle Drive	NRM	$1,040
23	Iowa City	IA	Expand Parking Ramp (Phase 2)	Minor	$17,600
23	Iowa City	IA	Construct Parking Garage (Phase 1)	Minor	$17,220
23	Iowa City	IA	Construction of 2nd Floor of Entrance (B1) for Oncology/ Fusion & Dialysis/Transplant (Front Entrance Phase 3)	Minor	$14,135
23	Iowa City	IA	Expand 3rd Floor of Bldg 1 (Front Entrance Addition Ph 4)	Minor	$13,200
23	Iowa City	IA	Expand front entrance (East) for Patient Services (Front Entrance Phase 2)	Minor	$12,540
23	Iowa City	IA	Construct Research Administrative Building	Minor	$5,280
23	Iowa City	IA	Replace and Upgrade Building 1 Mechanical Systems	NRM	$9,900

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
23	Iowa City	IA	Renovate 1 East for Audiology & ENT	NRM	$7,501
23	Iowa City	IA	Upgrade and Replace Sanitary lines	NRM	$6,600
23	Iowa City	IA	Renovate 6th Floor for Clinical Support Functions	NRM	$6,160
23	Iowa City	IA	Renovate Biomedical and Maintenance Shops Areas	NRM	$5,808
23	Iowa City	IA	Renovate and Expand SPS	NRM	$5,500
23	Iowa City	IA	Renovate Vacated Specialty Care Clinics and Ambulatory Entrance	NRM	$4,029
23	Iowa City	IA	Renovate buildings 7, 8, 16	NRM	$3,300
23	Iowa City	IA	Replace Obsolete Electrical Systems	NRM	$2,750
23	Iowa City	IA	Replace Existing Compressors/Vacuum Systems	NRM	$2,310
23	Iowa City	IA	Upgrade Material Handling in Building 1	NRM	$2,200
23	Iowa City	IA	Update Building 40	NRM	$2,200
23	Iowa City	IA	Upgrade Building 2 Mechanical & Plumbing Systems	NRM	$2,200
23	Iowa City	IA	Update Finishes in Urology Department	NRM	$2,090
23	Iowa City	IA	Renovate Space for Blood Draw and Eligibility	NRM	$1,793
23	Iowa City	IA	Update Building 41 & 42	NRM	$1,650
23	Iowa City	IA	Correct Lightning Protection for Main Campus	NRM	$1,650
23	Iowa City	IA	Upgrade Research Electrical Infrastructure	NRM	$1,650
23	Iowa City	IA	Renovate space for Polytrauma	NRM	$1,601
NCA	Keokuk	IA	Expand Irrigation System to Entire Cemetery	Minor	$1,330
VBA	Boise	ID	Renew Lease at Pocatello VR&E Office	Leases	$6
20	Boise	ID	Construct Ambulatory Care Building	Major	$419,000
VBA	Boise	ID	Renovate and Realign Boise RO to eRO Model	Minor	$3,731
20	Boise	ID	Renovate Sterile Processing Service (SPS) Space	NRM	$2,304
20	Boise	ID	Renovate Dietetics	NRM	$1,370
12	Chicago	IL	Lease Mental Health North Building	Leases	$6,085
12	Chicago	IL	Lease Crown Point (ABJ) CBOC	Leases	$1,920
12	Chicago	IL	Lease Lakeside CBOC	Leases	$1,730
12	Chicago	IL	Lease Auburn Gresham CBOC 1st + 2nd FL	Leases	$950
12	Chicago	IL	Lease Chicago Administrative (JB Swing Space)	Leases	$660
12	Chicago	IL	Lease Auburn Gresham 2nd FL Office	Leases	$468
12	Chicago	IL	Lease Parking Lakeside	Leases	$450
12	Chicago	IL	Lease Chicago Heights CBOC	Leases	$449
12	Chicago	IL	Lease Chicago Veteran Resource Center	Leases	$446
12	Chicago	IL	Lease Community Resource and Referral Center (CRRC)	Leases	$365
12	Chicago	IL	Expand Damen Bldg for Diagnostic Services	Major	$72,201
12	Chicago	IL	Add 7th + 8th FL Building 1D	Minor	$15,062
12	Chicago	IL	Add 3rd +4th FL Building 1D	Minor	$14,947
12	Chicago	IL	Add 5th + 6th FL Building 1D	Minor	$14,937
VBA	Chicago	IL	Renovate and Realign Chicago RO to eRO Model	Minor	$8,197
12	Chicago	IL	Relocate/Expand Physical Medicine & Rehab Service Area	NRM	$9,015
12	Chicago	IL	Expand Outpatient Dialysis -Taylor Bldg 1st floor	NRM	$5,533
12	Chicago	IL	Replace Obsolete Air Handlers Group E	NRM	$5,051
12	Chicago	IL	Replace Obsolete Air Handlers Group F	NRM	$5,051
12	Chicago	IL	Relocate Mental Health (SRRTP) Substance Abuse Residential Rehabilitation Treatment Program	NRM	$4,463
12	Chicago	IL	Remodel for CLC Nursing, Bldg 40 6W	NRM	$1,908
12	Chicago	IL	Masonry Repairs Areas #13, 14, 21 & 23	NRM	$1,573
12	Chicago	IL	Replace Inadequate/Obsolete Electric Panels in Bldg. #1, 11A, 11B- Group D	NRM	$1,564

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
12	Chicago	IL	Relocate Mental Health	NRM	$1,346
12	Chicago	IL	Masonry Repairs Areas #4, 16, 18, 19	NRM	$1,272
12	Danville	IL	Construct New Community Center for LTSS Neighborhood	Minor	$15,244
12	Danville	IL	Construct New 20 Bed Psychosocial Residential Rehabilitation Treatment Program Facility	Minor	$13,262
12	Danville	IL	Construct New Engineering Storage Facility	Minor	$5,092
12	Danville	IL	Renovate Space Building 104 for Consolidation of Rehab Therapy	NRM	$2,831
12	Danville	IL	Remediate Legionella Stationwide Phase II	NRM	$2,300
12	Hines	IL	Oak Lawn CBOC	Leases	$480
12	Hines	IL	Kankakee CBOC	Leases	$358
12	Hines	IL	Office of Emergency Management, Region 5, Westchester, IL	Leases	$65
12	Hines	IL	Hines VAH Research, Rehabilitation Institute of Chicago	Leases	$12
12	Hines	IL	Construct Ambulatory Surgery Center	Major	$36,008
12	Hines	IL	Construct Multi-level Parking Garage	Minor	$6,882
12	Hines	IL	Expand Sterile Processing Department for Building 200 Second Floor Surgery	Minor	$3,850
Staff	Hines	IL	Renovate Distribution Operations Space, Phase 2	Minor	$499
OIT	Hines	IL	Data Center Electrical Service Upgrade	Minor	$9,614
OIT	Hines	IL	Add UPS and distribution system	Minor	$4,999
OIT	Hines	IL	Data Center Electrical System Upgrades (PDUs)	Minor	$3,960
OIT	Hines	IL	Data Center Dedicated HVAC System and Building Water Condenser Water System Upgrades	Minor	$3,000
OIT	Hines	IL	Parking lot expansion and complete repaving	Minor	$2,750
OIT	Hines	IL	Replace existing transformers	Minor	$2,000
OIT	Hines	IL	General construction to room 161	Minor	$1,200
OIT	Hines	IL	Replace and modernize existing paralleling gear system	Minor	$499
12	Hines	IL	Renovate 15th Floor of Building 200 for Lab	NRM	$7,270
12	Hines	IL	Renovate Building 9	NRM	$3,930
12	Hines	IL	Upgrade Fire Protection, Domestic and Sanitary Water Lines, Building 200	NRM	$3,300
12	Hines	IL	Remodel Radiotherapy Rooms, Building 200	NRM	$1,980
12	Hines	IL	Renovate FMS Shops, Building 8	NRM	$1,770
15	Marion	IL	Replacement Lease for Carbondale	Leases	$1,225
15	Marion	IL	Replacement Lease for Harrisburg Illinois	Leases	$1,200
15	Marion	IL	Expand Building 42 to Provide Service Delivery and Logistics	Minor	$15,675
15	Marion	IL	Expand Building 42 Vertically for Med Specialties	Minor	$14,900
15	Marion	IL	Construct Primary Care and Women's Health Building	Minor	$14,500
15	Marion	IL	Construct Community Living Center Addition to Provide Supportive Services	Minor	$12,100
15	Marion	IL	Construct Community Living Center Addition to Provide Patient Privacy	Minor	$10,450
15	Marion	IL	Relocate Sterile Processing Service	Minor	$10,200
15	Marion	IL	Expand and Renovate Canteen	Minor	$7,000
15	Marion	IL	Expand Building 37 for Education	Minor	$3,800
15	Marion	IL	Expand and Upgrade Engineering Pole Barn	Minor	$1,980
15	Marion	IL	Construct New Morgue	Minor	$1,650
15	Marion	IL	Renovate 3A for Inpatient Medicine and Surgery to Provide Patient Privacy	NRM	$4,900
12	North Chicago	IL	Rockford Vet Center Lease Continuation	Leases	$100

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
12	North Chicago	IL	Renovate Building 1	NRM	$9,950
12	North Chicago	IL	Building 48 Renovation	NRM	$8,800
12	North Chicago	IL	Replace Fire Alarm System	NRM	$8,400
12	North Chicago	IL	Renovate ICU/CCU	NRM	$6,000
12	North Chicago	IL	Renovate 133-2B	NRM	$5,500
12	North Chicago	IL	Replace Chiller #1	NRM	$1,400
12	North Chicago	IL	Renovate Audiology	NRM	$1,000
12	North Chicago	IL	Tuckpointing	NRM	$1,000
NCA	Rock Island	IL	Expand Irrigation System to Entire Cemetery	Minor	$2,730
10	Ft. Wayne	IN	Expand East Tower for Lab and Radiology	Minor	$11,224
10	Ft. Wayne	IN	Build Loading Dock, Fort Wayne	Minor	$2,805
10	Ft. Wayne	IN	Renovate 5th Floor	NRM	$8,500
10	Ft. Wayne	IN	Remodel 1st Floor, Building 1	NRM	$4,678
10	Ft. Wayne	IN	Upgrade Building 2, FCA	NRM	$4,400
10	Ft. Wayne	IN	Install Combined Heating and Power Plant (CHP Plant)	NRM	$1,925
10	Indianapolis	IN	Establish New Lease - Shelbyville - Integrative Planning	Leases	$3,924
10	Indianapolis	IN	New Lease - Lease Research Space	Leases	$522
10	Indianapolis	IN	Establish New Lease - Indianapolis Hoptel	Leases	$286
10	Indianapolis	IN	Expand Surgery Suite	Minor	$18,700
10	Indianapolis	IN	Expand Clinical Space South Wing 3rd Floor	Minor	$16,146
10	Indianapolis	IN	Redesign and Improve South Entrance	Minor	$6,650
10	Indianapolis	IN	Repair and Replace HVAC Systems	NRM	$8,250
10	Indianapolis	IN	Upgrade Information Technology Infrastructure	NRM	$6,600
10	Indianapolis	IN	Renovate Dental	NRM	$2,750
10	Indianapolis	IN	Renovate Specialty Care	NRM	$2,750
10	Indianapolis	IN	Install Energy Savings System - Solar Array	NRM	$1,811
10	Indianapolis	IN	Upgrade Elevators in A-Wing	NRM	$1,650
10	Marion	IN	Build CLC Building	Major	$58,720
NCA	Marion	IN	Gravesite Expansion (Columbarium)	Minor	$1,000
10	Marion	IN	Expand CLC	Minor	$16,600
NCA	New Albany	IN	Correct Deficiencies	Minor	$1,390
VHA	Leavenworth	KS	Replace NCO 15 CMOP Lease	Leases	$400
15	Leavenworth	KS	New Inpatient Medical Facility	Leases	$20,000
15	Leavenworth	KS	St. Joseph CBOC Renewal	Leases	$289
15	Leavenworth	KS	Platte City CBOC Renewal	Leases	$192
15	Leavenworth	KS	Renovate CLC Bldg. 122 - 1st Floor	Minor	$17,109
15	Leavenworth	KS	Construct Outpatient MH Addition-Bldg 160	Minor	$14,725
NCA	Leavenworth	KS	Replace Maintenance Facility	Minor	$4,490
15	Leavenworth	KS	Replace Sanitary Risers in Buildings 88, 89, and 91	NRM	$2,640
15	Leavenworth	KS	Renovate Building 66	NRM	$2,200
15	Leavenworth	KS	Install New HVAC System Building 71 South	NRM	$1,550
15	Topeka	KS	Renew Garnett, Kansas Lease	Leases	$21
15	Topeka	KS	Renew Chaute, Kansas Lease	Leases	$16
15	Topeka	KS	Renovate Bldg 24 for Extended Care, Rehab, and Audiology	Minor	$17,076
15	Topeka	KS	Addition for Long Term Care and Hospice	Minor	$16,531
15	Topeka	KS	Correct Lifesafety Deficiencies in Primary Care Buildings	Minor	$6,545
15	Topeka	KS	Construct Day Treatment Center	Minor	$3,764
15	Topeka	KS	Replace Boilers	NRM	$4,233
15	Topeka	KS	Construct Physical Security Fence	NRM	$3,512
15	Topeka	KS	Upgrade HVAC and Electrical	NRM	$2,102

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
15	Topeka	KS	Repair Parking lots and Curb and Gutters	NRM	$1,364
15	Topeka	KS	Repair Exterior wall	NRM	$1,270
15	Wichita	KS	Convert License to Lease Liberal Clinic	Leases	$137
15	Wichita	KS	Land Deal for Construction and Sharing of Medical Facilities	Major	$65,081
15	Wichita	KS	Construct Addition to Bldg 19 for Relocating Radiology and Co-locating with Nuclear Medicine	Minor	$14,850
15	Wichita	KS	Construct Addition to Building 60 for Outpatient Spinal Cord Injury, Polytrauma and TBI	Minor	$14,300
15	Wichita	KS	Construct Audiology, Speech and Eye Clinic Addition, B61	Minor	$13,000
15	Wichita	KS	Construct Mental Health Addition for Homeless, Suicide Prevention, Tele-health and HBPC Programs	Minor	$5,468
15	Wichita	KS	Construct Combined Nutrition and Canteen Services	Minor	$4,774
15	Wichita	KS	Install and Correct Perimeter Fencing, Electrical Distribution Building, Physical Security and Life safety	NRM	$10,883
15	Wichita	KS	Renovate ICU and Surgery for Patient Privacy	NRM	$4,980
15	Wichita	KS	Renovate 2nd Floors building 19 and 2 for Cath Lab Expansion	NRM	$4,510
NCA	Lebanon	KY	Correct Deficiencies	Minor	$2,600
NCA	Lebanon	KY	Gravesite Expansion (PPC)	Minor	$1,800
9	Lexington, Leestown	KY	Construct New Radiology/Pharmacy Building	Minor	$14,800
9	Lexington, Leestown	KY	Renovate Building 27 for Ancillary-Diagnostics and Specialty Care	NRM	$15,000
9	Lexington, Leestown	KY	Renovate 3rd Floor for Specialty & Surgical Clinics.	NRM	$9,900
9	Lexington, Leestown	KY	Renovate Building 1 for Administration and Support Functions	NRM	$9,800
9	Lexington, Leestown	KY	Renovate Building 1 3rd Floor for Patient Privacy and Surgical Specialty Clinics, Cooper Division	NRM	$9,770
9	Lexington, Leestown	KY	Renovate B27-2 for Domiciliary	NRM	$9,600
9	Lexington, Leestown	KY	Renovate Building 17 for Administration and Support Functions	NRM	$9,350
9	Lexington, Leestown	KY	Renovate Building 29 1st and Ground Floors for Primary Care and Pharmacy	NRM	$9,300
9	Lexington, Leestown	KY	Renovate 1N for Ancillary/Diagnostics (Lab/OP/PT) - CD	NRM	$9,300
9	Lexington, Leestown	KY	Renovate 1Ground for Sterile Processing Service	NRM	$9,300
9	Lexington, Leestown	KY	Renovate and Repair Building 28 Ground	NRM	$8,200
9	Lexington, Leestown	KY	Renovate Building 16 for Primary Care	NRM	$8,200
9	Lexington, Leestown	KY	Replace Main Electrical Distribution Equipment, Cooper Division	NRM	$6,000
9	Lexington, Leestown	KY	Activate Hybrid OR 7 & 8	NRM	$5,500
9	Lexington, Leestown	KY	Correct Emergency Electrical and Fire Alarm System, Bowling Division	NRM	$4,400
9	Lexington, Leestown	KY	Install Ground Based Photovoltaic System	NRM	$3,250

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
9	Lexington, Leestown	KY	Demolish Buildings 20, 22, 41,46 & 112	NRM	$1,650
9	Louisville	KY	Whole Health Clinic	Minor	$19,800
9	Louisville	KY	Renovate Pathology, 3rd Floor Lab	NRM	$6,600
9	Louisville	KY	Replace Drain, Waste & Vent Phase 2	NRM	$6,050
9	Louisville	KY	Renovate 7 North Inpatient Mental Health	NRM	$5,005
9	Louisville	KY	Replace Electrical Main Feeders and Switchgear	NRM	$4,950
9	Louisville	KY	Correct Emergency Electric and Distribution Deficiencies Building 1	NRM	$4,950
9	Louisville	KY	Renovate 1 North for PT/OT	NRM	$4,400
9	Louisville	KY	Replace Air Handler Units Phase 8	NRM	$3,300
9	Louisville	KY	Inspect & Repair Ductwork	NRM	$3,250
9	Louisville	KY	Install Combined Heat and Power Unit (Cogeneration)	NRM	$3,190
9	Louisville	KY	Correct Site Access	NRM	$2,750
9	Louisville	KY	Replace Climate Controls Building 1 Phase 2	NRM	$2,750
9	Louisville	KY	Replace Roofs Phase 3	NRM	$2,600
9	Louisville	KY	Correct Physical Security Deficiencies	NRM	$2,200
9	Louisville	KY	Correct Architectural Access and Safety Deficiencies	NRM	$2,200
9	Louisville	KY	Replace Nurse Call and Patient Televisions	NRM	$2,200
NCA	Zachary Taylor	KY	Correct Condition Deficiencies	Minor	$2,210
NCA	Alexandria	LA	Renovate Maintenance Facility, Repair Roads/Storm Drainage	Minor	$1,160
16	Alexandria	LA	Renovate Acute Psych Unit (9A) & Convert Intermediate Psych Unit (9B) to a Residential Rehabilitation Treatment Program	NRM	$9,947
16	Alexandria	LA	Replace Roof on Building 6	NRM	$1,420
VHA	Baton Rouge	LA	Replacement Lease - VC725 Baton Rouge, LA Vet Center	Leases	$275
VBA	New Orleans	LA	Renovate and Realign New Orleans RO to eRO Model	Minor	$7,707
16	New Orleans	LA	Expand Staff and Patient Parking Garages	Minor	$18,127
16	New Orleans	LA	Replace Fluorescent Light Fixtures and Lamps throughout Health Care system	NRM	$2,500
1	Bedford	MA	Replace Non-Compliant Community Living Center Phase 2	Minor	$18,229
1	Bedford	MA	Replace Non-Compliant Community Living Center Phase 3	Minor	$18,229
1	Bedford	MA	Replace Non-Compliant Community Living Center Phase 4	Minor	$18,229
1	Bedford	MA	Replace Non-Compliant Community Living Center Phase 5	Minor	$18,229
1	Bedford	MA	Construct CLC Community Center	Minor	$8,800
1	Bedford	MA	Demo/Replace Quonset Hut Storage Buildings 18T, 19T & 20T	Minor	$3,980
1	Bedford	MA	Corrections for Food & Delivery and IRM, Building 3	NRM	$13,200
1	Bedford	MA	Update Interior Finishes	NRM	$6,000
1	Bedford	MA	Correct Control Systems Deficiencies Campus Wide	NRM	$5,720
1	Bedford	MA	Historical Restoration and Hazardous Materials Remediation - Phase 1	NRM	$5,500
1	Bedford	MA	Roadway and Curb Repairs Campus Wide	NRM	$3,300
1	Bedford	MA	Demolish Community Living Center, Bldg 62	NRM	$3,156
1	Bedford	MA	Replace Potable Water Heating Systems in Patient Care Buildings	NRM	$1,250
1	Boston (JP)	MA	Addition for Specialty Clinics	Minor	$16,500
1	Boston (JP)	MA	Replace Bldg. 4 Substance Abuse Residential Rehabilitation Treatment Program Expansion JP	Minor	$12,100
1	Boston (JP)	MA	JP Parking Garage Two Additional Decks Expansion	Minor	$11,000
1	Boston (WR)	MA	Emergency Department / Lab Addition	Minor	$8,000

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
1	Boston (WR)	MA	Emergency Department / Lab Addition	NRM	$13,200
1	Boston (WR)	MA	Upgrade Building Automation Systems B1,2,3	NRM	$4,950
1	Boston (WR)	MA	Install Sprinkler System Building 88	NRM	$1,320
1	Brockton	MA	Renovate building 8 Long Term Spinal Cord Injury	Minor	$14,300
1	Brockton	MA	Expand Inpatient Pharmacy BK	Minor	$11,000
1	Brockton	MA	Telehealth Addition Building 32	Minor	$9,350
1	Northampton	MA	Build Hamden County Super CBOC	Leases	$5,402
1	Northampton	MA	Build New Small Homes for Long Term Care	Minor	$18,300
VHA	Northeast CMOP	MA	Replace Chelmsford CMOP Lease	Leases	$16,990
NCA	Annapolis	MD	Historic Site Renovation	Minor	$3,000
5	Baltimore	MD	Lease and Buildout Animal and Wet Lab Research Space	Leases	$21,250
NCA	Baltimore	MD	Replace Fence and Improve Property Border	Minor	$5,500
NCA	Baltimore	MD	Repave Roads, Replace Curbs & Site Drainage	Minor	$2,340
5	Baltimore	MD	Hot Water Circulation Improvements for Legionella Control for Baltimore and Loch Raven	NRM	$7,636
5	Baltimore	MD	Renovate and Expand Surgical ICU	NRM	$5,105
5	Baltimore	MD	Redesign Condensate Receiver, Upgrade Cooling Towers, and Replace Variable Frequency Drives	NRM	$4,400
5	Baltimore	MD	Replace Air Handler Units at Baltimore	NRM	$4,400
5	Baltimore	MD	Replace Hot Water Heating System and Repair Cross Connects, Replace Potable Water Pumps, and Improve Steam Trap Monitoring	NRM	$4,330
5	Baltimore	MD	Replace Roof Sections and Exterior Glass	NRM	$3,751
5	Baltimore	MD	Modernize and Correct Deficiencies in Clinical Lab	NRM	$3,630
5	Baltimore	MD	Chiller Plant Redesign and Replacement, and Installation of Heat Exchanger	NRM	$3,630
5	Baltimore	MD	Retrofit Medical Center Lighting with T8, T5, and LED fixtures and Improve Electrical Distribution System	NRM	$3,349
5	Baltimore	MD	Replace Electrical Switches and Emergency Distribution Control Panels	NRM	$2,420
5	Baltimore	MD	Improve VAMHCS Physical Security	NRM	$1,732
5	Baltimore	MD	Repair Architectural Deficiencies at Baltimore	NRM	$1,732
5	Baltimore, Loch Raven	MD	Improve Roads and Sidewalks, and Address Building Access Deficiencies	NRM	$3,850
5	Baltimore, Loch Raven	MD	Upgrade and Expand Emergency Power System	NRM	$2,266
5	Baltimore, Loch Raven	MD	Loch Raven Replace Building 1 and 4 Boilers	NRM	$2,200
5	Baltimore, Loch Raven	MD	Halls and Walls at Loch Raven	NRM	$2,060
5	Baltimore, Loch Raven	MD	Upgrade Stairwell Lighting, Repair Pneumatic Air Leaks, and Replace Boilers in Building 1	NRM	$1,419
5	Baltimore, Loch Raven	MD	Replace Roof of Loch Raven Building 1	NRM	$1,290
5	Baltimore, Loch Raven	MD	Upgrade Air Handler Units at Loch Raven Campus	NRM	$1,100
5	Baltimore, Loch Raven	MD	Upgrade Restrooms to prevent Legionella	NRM	$1,000
NCA	Loudon Park	MD	Renovate Historic Lodge and Site	Minor	$4,850

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
5	Perry Point	MD	Construct Replacement Dietetics Building to Correct Seismic and Structural Deficiencies	Major	$26,878
5	Perry Point	MD	Replace Building 3H with Mental Health	Minor	$9,838
5	Perry Point	MD	Repair Sanitary Lines at Perry Point	NRM	$11,605
5	Perry Point	MD	Upgrade Connecting Corridor Mechanical Units	NRM	$10,738
5	Perry Point	MD	Renovate Building 314 Complex as Wellness Facility	NRM	$10,493
5	Perry Point	MD	Identify and Remove Water System Dead-legs for Legionella Prevention - Patient Bldgs	NRM	$10,197
5	Perry Point	MD	Upgrade Restrooms and Legionella Prevention in Patient Buildings	NRM	$10,072
5	Perry Point	MD	Improve Physical Security	NRM	$9,727
5	Perry Point	MD	Install LED Lights in Parking Lots	NRM	$9,206
5	Perry Point	MD	Construct Security Plaza at Main Entrance	NRM	$6,276
5	Perry Point	MD	Upgrade Public and Staff Restrooms	NRM	$5,297
5	Perry Point	MD	Upgrade Electrical Distribution at Perry Point	NRM	$5,058
5	Perry Point	MD	Identify and Remove Water System Dead-legs for Legionella Prevention - Staff Bldgs	NRM	$4,989
5	Perry Point	MD	Replace Elevators Buildings 1H, 2H, 19H & 22H	NRM	$4,620
5	Perry Point	MD	Replace Elevators Buildings 4H, 5H & 11H	NRM	$4,620
5	Perry Point	MD	Install Perimeter Fencing	NRM	$3,459
5	Perry Point	MD	Replace Windows	NRM	$3,372
5	Perry Point	MD	Replace Bridge at Truck Entrance	NRM	$3,291
5	Perry Point	MD	Replace Transformers	NRM	$2,509
5	Perry Point	MD	Replace Plumbing in Buildings 13H, 14H & 23H	NRM	$2,098
5	Perry Point	MD	Upgrade Fire Alarm System Campus Wide - Phase II Support Buildings	NRM	$2,045
5	Perry Point	MD	Upgrade HVAC Controls	NRM	$1,936
1	Togus	ME	Construct Community Living Center West Addition	Minor	$10,694
1	Togus	ME	Renovate Operating Suite	NRM	$9,772
1	Togus	ME	Renovate Sterile Processing	NRM	$5,750
1	Togus	ME	Renovate Patient Dining Room and Kitchen	NRM	$4,792
1	Togus	ME	Renovate Pharmacy	NRM	$4,657
1	Togus	ME	Renovate Specialty Care Unit	NRM	$4,400
1	Togus	ME	Modernize Campus Corridors	NRM	$2,388
1	Togus	ME	Relocate Same Day Surgery to B200-3East (Dialysis)	NRM	$2,368
1	Togus	ME	Renovate Prosthetics Clinic	NRM	$1,313
1	Togus	ME	Renovate Chapel	NRM	$1,243
10	Ann Arbor	MI	Ann Arbor Warehouse	Leases	$2,040
10	Ann Arbor	MI	Ann Arbor Health Care Research and Development	Leases	$875
10	Ann Arbor	MI	Construct Primary Care and Mental Health Clinic in North Parking Lot	Minor	$16,000
10	Ann Arbor	MI	Modernize, update and right size clinical lab services	Minor	$15,350
10	Ann Arbor	MI	Expand West Parking Structure	Minor	$13,916
10	Ann Arbor	MI	Procure the Existing Modular Building	Minor	$251
10	Ann Arbor	MI	Modernize the 5th Floor Inpatient Med/Surg Unit (Privacy/Infection Control)	NRM	$9,900
10	Battle Creek	MI	Expand Community Living Center, Building 83	Minor	$9,900
10	Battle Creek	MI	Repair Covered Walkways	NRM	$3,360
10	Battle Creek	MI	Correct Water Distribution Deficiencies, Phase II	NRM	$3,360
10	Detroit	MI	New Lease Sterling Heights CBOC	Leases	$17,488

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
10	Detroit	MI	Replacement Lease for Off-Site Parking	Leases	$480
10	Detroit	MI	Upgrade Building Management System Cabling	NRM	$9,800
10	Detroit	MI	Replace Pozlock Sprinkler System Piping Phase III	NRM	$9,185
10	Detroit	MI	Replace Ceiling Tile Grid and Ceiling Tiles Throughout Medical Center	NRM	$5,500
10	Detroit	MI	Replace Wall Bumper Building 100	NRM	$2,860
10	Detroit	MI	Replace Flooring Throughout Atrium and Circulation Area	NRM	$1,220
NCA	Ft. Custer	MI	Expand Irrigation System to Entire Cemetery	Minor	$3,580
NCA	Ft. Custer	MI	Gravesite Expansion (Columbarium)	Minor	$3,000
NCA	Ft. Custer	MI	Replace Equipment Storage Building	Minor	$1,445
12	Iron Mountain	MI	Upgrade Building No. 2 (Boiler Plant)	NRM	$3,300
12	Iron Mountain	MI	Install Absorption Chiller	NRM	$2,750
12	Iron Mountain	MI	Upgrade Building No. 5	NRM	$2,750
12	Iron Mountain	MI	Install Summer Boiler	NRM	$1,650
12	Iron Mountain	MI	Upgrade Building 4	NRM	$1,650
12	Iron Mountain	MI	Upgrade Chillers 5 and 6	NRM	$1,010
10	Saginaw	MI	Construct Sensory Service Building	Minor	$12,200
10	Saginaw	MI	Domestic Water and Restroom Renovation Floors 3,4 and 5	NRM	$5,600
10	Saginaw	MI	AHU Mechanical Deficiencies Campus	NRM	$4,480
10	Saginaw	MI	Renovate Building 22 Basement	NRM	$3,450
10	Saginaw	MI	Electrical Corrections	NRM	$3,450
10	Saginaw	MI	Buildings 2,3,4, 19 and 21 Roof Replacement	NRM	$2,000
10	Saginaw	MI	Renovate Chapel	NRM	$1,650
NCA	Ft. Snelling	MN	Expand Irrigation System to Entire Cemetery	Minor	$5,190
23	Minneapolis	MN	Renovate to Upgrade Existing Substandard OR's and Construct a Surgery Support Center	Minor	$10,400
23	Minneapolis	MN	Construct Parking Ramp for Patient Access	Minor	$9,665
23	Minneapolis	MN	Expand Parking Ramp	Minor	$7,550
23	Minneapolis	MN	Renovate Ward 2J for Private Patient ICU beds	NRM	$7,000
23	Minneapolis	MN	Renovate Hospital Space for a Private Patient Medical Bed Ward (3K)	NRM	$6,800
23	Minneapolis	MN	Renovate Hospital Space for a Private Patient Medical Bed Ward (3D)	NRM	$6,300
23	Minneapolis	MN	Renovate Primary Care Clinic 1U, (Create First Impressions Phase 2)	NRM	$5,800
23	Minneapolis	MN	Renovate Building 222 for Call Center	NRM	$5,362
23	Minneapolis	MN	Upgrade IT Infrastructure	NRM	$5,000
23	Minneapolis	MN	Upgrade IT Infrastructure	NRM	$5,000
23	Minneapolis	MN	Modernize Building 49 for Research	NRM	$4,217
23	Minneapolis	MN	Renovate Dialysis	NRM	$3,825
23	Minneapolis	MN	Correct Electrical Deficiencies	NRM	$3,250
23	Minneapolis	MN	Renovate for Additional Sleep Labs	NRM	$3,180
23	Minneapolis	MN	Renovate 1P for Ultrasound	NRM	$3,173
23	Minneapolis	MN	Correct Mechanical Deficiencies	NRM	$2,180
23	Minneapolis	MN	Renovate for Primary Care Clinics Centralized Check-in	NRM	$2,178
23	Minneapolis	MN	Correct Exterior Deficiencies	NRM	$2,000
23	Minneapolis	MN	Renovate for New Flooring, Wall and Ceiling Finishes	NRM	$1,950
23	Minneapolis	MN	Renovate Ambulance Garage for Modern Larger Ambulance Vehicles	NRM	$1,290

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
23	St. Cloud	MN	Renovate/Expand Building 51, First Floor Community Living Center	Minor	$16,481
23	St. Cloud	MN	Renovate/Expand Building 50, First Floor Community Living Center	Minor	$16,280
23	St. Cloud	MN	Construct CLC East Building	Minor	$15,800
23	St. Cloud	MN	Renovate Building 2, First Floor for Residential Rehabilitation Therapy Program	Minor	$15,137
23	St. Cloud	MN	Expand Surgical and Specialty Services, Building 1	Minor	$13,560
23	St. Cloud	MN	Renovate Building 51, Second Floor	Minor	$13,530
23	St. Cloud	MN	Renovate/Expand Building 50, Second Floor Community Living Center	Minor	$13,200
23	St. Cloud	MN	Construct Second Floor for Mental Health on Existing Psych Building	Minor	$12,409
23	St. Cloud	MN	Construct Clinical Training Center	Minor	$11,007
23	St. Cloud	MN	Construct Multidisciplinary Specialty Clinic	Minor	$9,986
23	St. Cloud	MN	Construct Parking Structures for Staff Access	Minor	$9,900
23	St. Cloud	MN	Create PACT Clinic Second Floor B29 and Relocate Police	Minor	$9,900
23	St. Cloud	MN	Create PACT Clinic Building 29, First Floor	Minor	$9,900
23	St. Cloud	MN	Construct Fourth Community Living Center Cottage	Minor	$9,900
23	St. Cloud	MN	Construct Third Community Living Center Cottage	Minor	$9,649
23	St. Cloud	MN	Construct Second PACT Clinic B4 First Floor	Minor	$9,400
23	St. Cloud	MN	Construct Therapeutic Rehabilitation Pool	Minor	$3,800
23	St. Cloud	MN	Replace/Upgrade Building 50 HVAC	NRM	$7,700
23	St. Cloud	MN	Remodel Building 48, First Floor for Swing Space	NRM	$7,220
23	St. Cloud	MN	Repair Building 9	NRM	$6,132
23	St. Cloud	MN	Install Ground Source Heat Pumps, Building 29	NRM	$6,050
23	St. Cloud	MN	Renovate Bldg 28, 1st Flr West Side For Mental Health RRTP	NRM	$6,000
23	St. Cloud	MN	Improve Public Rest Areas	NRM	$5,500
23	St. Cloud	MN	Renovate Bldg 29, 2nd Flr for Primary Care Clinical Space	NRM	$4,730
23	St. Cloud	MN	Remodel Building 48, Second Floor	NRM	$4,578
23	St. Cloud	MN	Repair B50 Basement Kitchen	NRM	$3,897
23	St. Cloud	MN	Repair Campus Electrical	NRM	$3,750
23	St. Cloud	MN	Replace/Add Steam Mains West Side Campus	NRM	$3,650
23	St. Cloud	MN	Reconstruct Roads West Campus	NRM	$3,225
23	St. Cloud	MN	Install Sprinkler Backflow Protection	NRM	$3,175
23	St. Cloud	MN	Repair Replace Roads	NRM	$3,150
23	St. Cloud	MN	Construct Guard Shacks	NRM	$3,074
23	St. Cloud	MN	Correct Bldg 59	NRM	$2,950
23	St. Cloud	MN	Replace B59 Elevator	NRM	$2,650
23	St. Cloud	MN	Install HVAC - Basement Building 49	NRM	$2,200
23	St. Cloud	MN	Update Chapel	NRM	$2,200
23	St. Cloud	MN	Construct Generator Building for CLC Cottages	NRM	$2,200
23	St. Cloud	MN	Upgrade Storm Water Mains	NRM	$1,650
23	St. Cloud	MN	Upgrade Heating and Ventilation System for Building 59	NRM	$1,320
23	St. Cloud	MN	Replace Finish Assemblies	NRM	$1,250
23	St. Cloud	MN	Repair/Replace Exterior Wall Assemblies	NRM	$1,200
23	St. Cloud	MN	Repair/Replace Historic Front Entries	NRM	$1,025
15	Columbia	MO	Lease Rolla Community Based Outpatient Clinic	Leases	$2,100
15	Columbia	MO	Succeeding Mexico CBOC Lease	Leases	$330
15	Columbia	MO	Succeeding MH Transitional Residence Lease	Leases	$34

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
15	Columbia	MO	Construct Primary/Specialty Care Annex	Minor	$13,100
15	Columbia	MO	Construct RRTP Building	Minor	$12,546
15	Columbia	MO	Construct Clinical/Support Space	Minor	$8,918
15	Columbia	MO	Construct Parking Garage	Minor	$8,900
15	Columbia	MO	Expand Mental Health Clinic	Minor	$8,019
15	Columbia	MO	Correct Structural Deficiencies	NRM	$4,063
15	Columbia	MO	Renovate Basement	NRM	$2,000
15	Columbia	MO	Renovate Main Kitchen	NRM	$1,300
NCA	Jefferson Barracks	MO	Gravesite Expansion	Major	$60,000
NCA	Jefferson Barracks	MO	Expand Irrigation System to Entire Cemetery	Minor	$9,020
15	Kansas City	MO	Renew KC Warehouse Lease	Leases	$195
15	Kansas City	MO	Construct Warehouse Addition and Reduce Warehouse Footprint	Minor	$19,097
15	Kansas City	MO	Construct Parking Garage Addition	Minor	$16,214
15	Kansas City	MO	Construct Inpatient Medicine Bed Addition for Patient Privacy and Right-sizing	Minor	$14,080
15	Kansas City	MO	Construct Cancer Center Addition	Minor	$12,970
15	Kansas City	MO	Expand Radiology and Right-Size Laboratory Services	Minor	$9,056
15	Kansas City	MO	Construct Pharmacy and Outpatient Clinic Addition	Minor	$9,011
15	Kansas City	MO	Expand Sterilization Processing Service and Eye Clinic	Minor	$8,628
15	Kansas City	MO	Replace Energy Management System for HVAC to be Compliant with Special Air Room Requirements	NRM	$4,950
15	Kansas City	MO	Create stand by generation for main power for the main medical facility	NRM	$3,300
15	Kansas City	MO	Expand Physical Medicine and Rehabilitation Services	NRM	$2,950
15	Kansas City	MO	Correct Physical Security Deficiencies	NRM	$2,700
15	Poplar Bluff	MO	Construct Stand-Alone Community Living Center (CLC)	Minor	$16,000
15	Poplar Bluff	MO	Replace Building 5: Collocate Administration and Support Services	Minor	$13,500
15	Poplar Bluff	MO	Construct Parking Structure and Photovoltaic Energy System	Minor	$13,000
15	Poplar Bluff	MO	Construct New Laboratory Service Facility	Minor	$11,050
15	Poplar Bluff	MO	Renovate Building 8 for Seismic and Infrastructure Deficiencies	Minor	$3,400
15	Poplar Bluff	MO	Replace Air Handling Unit 9	NRM	$3,700
15	Poplar Bluff	MO	Renovate and Co-Locate Audiology Clinic	NRM	$2,750
15	Poplar Bluff	MO	Renovate SPS and Replace Electric Steam Generators	NRM	$2,500
15	Poplar Bluff	MO	Replace Fire Main and Water Storage	NRM	$2,400
15	Poplar Bluff	MO	Replace Steam Header and Distribution to Building 1	NRM	$2,250
15	Poplar Bluff	MO	Upgrade IT Infrastructure for Record Management	NRM	$1,625
15	St Louis (JB)	MO	Replacement of Inpatient Mental Health, Building 51	Major	$141,932
15	St Louis (JB)	MO	Create Hospice House	Minor	$12,916
15	St Louis (JB)	MO	Construct Computed Tomography Scanner Building Addition	Minor	$9,000
15	St Louis (JB)	MO	Construct Water Treatment Facility	Minor	$6,601
15	St Louis (JB)	MO	Renovate Space for VCS Store	NRM	$4,720
15	St Louis (JB)	MO	Renovate Second Floor, Building 18	NRM	$4,598
15	St Louis (JB)	MO	Perform Renewable Energy Study and Implementation	NRM	$4,400
15	St Louis (JB)	MO	Renovate Second Floor North, B52	NRM	$4,158
15	St Louis (JB)	MO	Replace Mechanical Systems, Buildings 52	NRM	$3,264

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
15	St Louis (JC)	MO	Lease Space for New Montgomery County VA Clinic	Leases	$554
15	St Louis (JC)	MO	Expand Clinical Addition and Removal of Building 1	Major	$349,309
15	St Louis (JC)	MO	Relocation of Pathology, Laboratory, & Radiology, Building 1	Major	$38,562
15	St Louis (JC)	MO	Storage Building	Minor	$11,652
15	St Louis (JC)	MO	Expand Dialysis and Radiology	Minor	$8,229
15	St Louis (JC)	MO	Construct Water Treatment Facility	Minor	$6,601
15	St Louis (JC)	MO	Convert Emergency Department to Different Services	NRM	$3,987
15	St Louis (JC)	MO	Expand Ambulatory Dental, 9 South, Building 1	NRM	$2,950
VBA	St. Louis	MO	Renew Lease at Lees Summit VR&E Office	Leases	$72
VBA	St. Louis	MO	Renovate and Realign RMC Office Space	Minor	$6,600
15	VISN 15	MO	Replacement VISN-15 HQ Lease	Leases	$850
16	Biloxi	MS	Install Photovoltaic Array at the Pensacola Clinic	NRM	$2,200
VBA	Jackson	MS	Renovate and Realign Jackson to eRO Format	Minor	$9,130
16	Jackson	MS	Renovate Primary Care Green and Silver Clinics for PACT	NRM	$5,940
19	Fort Harrison	MT	Replace Billings CBOC Lease Spring Creek	Leases	$7,112
VBA	Fort Harrison	MT	Renew Lease at Missoula VR&E Office	Leases	$80
VBA	Fort Harrison	MT	Renovate and Realign Ft Harrison to eRO Format	Minor	$4,900
VBA	Fort Harrison	MT	Brace Non-structural Components at Ft Harrison	Minor	$750
19	Fort Harrison	MT	LED Lighting Phase 2	NRM	$1,220
19	Fort Harrison	MT	Irrigation and Xeriscaping Improvements Fort Harrison	NRM	$1,188
6	Asheville	NC	Lease Space for Ancillary/Diagnostic Services	Leases	$6,450
6	Asheville	NC	Expand Outpatient Services	Major	$124,230
6	Asheville	NC	Construct Surgical Clinics Adjacent to Operating Suite	Minor	$16,000
6	Asheville	NC	Construct New SPS Addition Adjacent to OR Suite	Minor	$16,000
6	Asheville	NC	Construct Specialty Care Clinic	Minor	$15,950
6	Asheville	NC	Expand Imaging Department	Minor	$15,950
6	Asheville	NC	Expand Building 47 for Primary Care	Minor	$15,950
6	Asheville	NC	Construct Primary Care Clinic	Minor	$15,785
6	Asheville	NC	Construct Space for Education and Admin Support Space	Minor	$12,120
6	Asheville	NC	Expand Community Living Center Bldg 62	Minor	$11,430
6	Asheville	NC	Construct Building for Specialty Clinic	Minor	$10,945
6	Asheville	NC	Renovate Ward 3-East/West	NRM	$9,900
6	Asheville	NC	Correct Condition Deficiencies Bldg 47 and 62	NRM	$8,250
6	Asheville	NC	Renovate Buildings 2/3/4/5/6/7 for Facilities Conditions	NRM	$6,820
6	Asheville	NC	Correct Electrical/Energy Deficiencies, Bldgs 47 and 62	NRM	$5,500
6	Asheville	NC	Renovate Bldgs 11/12/14	NRM	$5,220
6	Asheville	NC	Develop New Energy Innovations	NRM	$4,400
6	Asheville	NC	Correct Deficiencies - Access/Storm Water/Site	NRM	$3,850
6	Asheville	NC	Install Ground Source Heat Pump B-14	NRM	$1,650
6	Durham	NC	Renew HS&RD, Fiscal, and HR Office Lease at Legacy Tower	Leases	$1,750
6	Durham	NC	Renew National Teleradiology Offices Lease at Croasdaile.	Leases	$410
6	Durham	NC	Renew Lease Durham Teleradiology Office II	Leases	$290
6	Durham	NC	Renew Office of Quality and Production Lease	Leases	$270
6	Durham	NC	Construct New Patient Experience Structure and Entrance	Minor	$6,800
6	Durham	NC	Replace/Repair Windows Bldg 1,7,9,23	NRM	$8,300
6	Durham	NC	Install Generator, Cooling Tower, and Chiller, B1, F-Wing	NRM	$5,000
6	Durham	NC	Correct Legionella deficiencies	NRM	$3,350
6	Fayetteville	NC	Renew Wilmington Lease	Leases	$20,200
6	Fayetteville	NC	Renew Sanford CBOC	Leases	$1,200
6	Fayetteville	NC	Renew the Brunswick CBOC	Leases	$1,150

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
6	Fayetteville	NC	Construct Parking Garage	Minor	$14,336
6	Fayetteville	NC	Construct an Information Technology Building	Minor	$4,016
6	Fayetteville	NC	Replace T40 with a Pre-engineered Building	Minor	$1,837
6	Fayetteville	NC	Halls and Walls for First Floor	NRM	$8,007
6	Fayetteville	NC	Renovate Radiology	NRM	$7,510
6	Fayetteville	NC	Renovate Old CLC space for Support Services	NRM	$6,738
6	Fayetteville	NC	Repair Water and Sanitary Mains and Outflows	NRM	$5,450
6	Fayetteville	NC	Renovation of 1B for Clinical Space	NRM	$5,340
6	Fayetteville	NC	Correct Electrical Deficiencies	NRM	$4,250
6	Fayetteville	NC	Renovate 3B for Nursing Education and Support Staff	NRM	$4,111
6	Fayetteville	NC	Renovate 3A for Medical Center Support Space	NRM	$3,757
6	Fayetteville	NC	Renovate Basement A-wing for Welcome Center and Patient Support	NRM	$3,410
6	Fayetteville	NC	Renovate 3C for Education	NRM	$3,227
6	Fayetteville	NC	Correct Condition Deficiencies for Cardiology in Basement	NRM	$2,795
6	Fayetteville	NC	Replace Fancoils on Basement 1st Floor of Building 1	NRM	$2,752
6	Fayetteville	NC	Upgrade Auditorium	NRM	$2,335
6	Fayetteville	NC	Replace Fancoils on Third Floor of Building 1	NRM	$2,200
6	Fayetteville	NC	Renovate Bathrooms Ph 2	NRM	$2,110
6	Fayetteville	NC	Correct IT Closet Deficiencies	NRM	$1,330
6	Fayetteville	NC	Repair roof for the Main Building of the Medical Center	NRM	$1,100
6	Salisbury	NC	Increase Intensive Care Unit and Long Term Acute Care Bed Capacity	Minor	$12,891
6	Salisbury	NC	Construct Diagnostic and Interventional Center including Cath Lab and Interventional Radiology	Minor	$12,129
6	Salisbury	NC	Construct Radiation Oncology Clinic	Minor	$9,900
6	Salisbury	NC	Conduct Site Prep for Linear Accelerator	Minor	$8,580
6	Salisbury	NC	Expand Rehab and Whole Health Clinic Building 6	Minor	$6,054
NCA	Salisbury	NC	Construct Covered Storage and Materials Bins	Minor	$1,530
6	Salisbury	NC	Correct Condition Deficiencies and Renovate Building 5	NRM	$9,992
6	Salisbury	NC	Correct Condition Deficiencies Building 4	NRM	$9,753
6	Salisbury	NC	Correct Condition Deficiencies Building 3	NRM	$9,620
6	Salisbury	NC	Correct Condition Deficiencies Building 42	NRM	$8,976
6	Salisbury	NC	Upgrade Building 2 Mechanical Distribution and equipment	NRM	$8,850
6	Salisbury	NC	Correct Building 2 Architectural Deficiencies	NRM	$7,700
6	Salisbury	NC	Install PV panels	NRM	$7,150
6	Salisbury	NC	Building 5 Seismic Restraint	NRM	$7,023
6	Salisbury	NC	Renovate Building 4-4 for Prosthetics	NRM	$6,900
6	Salisbury	NC	Upgrade Building 2 Mechanical System and Controls	NRM	$6,900
6	Salisbury	NC	Correct Condition Deficiencies and Renovate Bldgs 16 and 18	NRM	$6,875
6	Salisbury	NC	Correct Condition Deficiencies and Renovate Building 6	NRM	$6,790
6	Salisbury	NC	Install Campus Energy Management System	NRM	$6,200
6	Salisbury	NC	Correct Electrical Deficiencies	NRM	$5,720
6	Salisbury	NC	Correct Legionella Management Deficiencies - Buildings 8, 13, 21, and 43	NRM	$5,500
6	Salisbury	NC	Replace Air Handling Units in Buildings 1, 7, 16 and 19	NRM	$5,450
6	Salisbury	NC	Correct Generators/Switchgear Deficiencies, Bs 34, 35, 36, 37	NRM	$5,005
6	Salisbury	NC	Correct Seismic Restraint Deficiencies Building 2	NRM	$4,828
6	Salisbury	NC	Correct Seismic Restraint Deficiencies Building 7	NRM	$4,826
6	Salisbury	NC	Install Rainwater for Boiler and Cooling Tower Makeup	NRM	$4,290

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
6	Salisbury	NC	Construct Women's Clinic	NRM	$4,023
6	Salisbury	NC	Replace Fancoil Units Building 2	NRM	$3,960
6	Salisbury	NC	Resurface Roadways Station Wide/Sidewalk Repairs	NRM	$3,850
6	Salisbury	NC	Replace Parking and Site Lighting	NRM	$3,200
6	Salisbury	NC	Abate Asbestos, Various Areas	NRM	$3,100
6	Salisbury	NC	Replace Underground Steam Lines and Steam Stations North Campus	NRM	$3,055
6	Salisbury	NC	Correct Site Security Issues	NRM	$2,998
6	Salisbury	NC	Correct Condition Deficiencies and Renovate Building 15	NRM	$2,925
6	Salisbury	NC	Correct Seismic Restraint Deficiencies Building 42	NRM	$2,800
6	Salisbury	NC	Correct Condition Deficiencies Building 1	NRM	$2,750
6	Salisbury	NC	Correct Condition Deficiencies and Renovate Connecting Corridors and Tunnels	NRM	$2,750
6	Salisbury	NC	Correct Seismic Restraint Deficiencies Building 21	NRM	$2,544
6	Salisbury	NC	Correct Condition Deficiencies and Renovate Bs 11, 17 & 17A	NRM	$2,235
6	Salisbury	NC	Upgrade Nurse Call and Cable Television Systems	NRM	$2,210
6	Salisbury	NC	Building 4 Seismic Restraint	NRM	$2,173
6	Salisbury	NC	Install Additional Elevators Building 2	NRM	$2,145
6	Salisbury	NC	Building 3 Seismic Restraint	NRM	$2,072
6	Salisbury	NC	Correct Condition Deficiencies Building 12 Police Service	NRM	$1,700
6	Salisbury	NC	Replace Entry Doors with Vestibules in Multiple Buildings	NRM	$1,690
6	Salisbury	NC	Install New Steam Control Valves at Existing Convectors Buildings 2, 3, and 4	NRM	$1,665
6	Salisbury	NC	Correct Seismic Restraint Deficiencies Building 8	NRM	$1,657
6	Salisbury	NC	Replace Fan Coil Units Building 4	NRM	$1,650
6	Salisbury	NC	Correct Seismic Restraint Deficiencies Building 6	NRM	$1,481
6	Salisbury	NC	Perform Retro Commissioning of all Existing HVAC Systems	NRM	$1,375
6	Salisbury	NC	Extend Chilled Water to Hospice and Audiology	NRM	$1,320
6	Salisbury	NC	Install plate and frame heat exchanger for central chiller plant for winter operation	NRM	$1,050
VBA	Winston-Salem	NC	Renew Lease at Winston Salem Wacovia Center	Leases	$2,108
VBA	Winston-Salem	NC	Renew Lease at Winston Salem RO	Leases	$1,723
VBA	Fargo	ND	Renovate and Realign Fargo RO to eRO Format	Minor	$2,085
23	Fargo	ND	Expand Prosthetics and Whole Health	Minor	$14,992
23	Fargo	ND	Construct Mental Health Outpatient and RRTP - Building 52 Addition	Minor	$12,512
23	Fargo	ND	Expand Building 1 for Primary Care	Minor	$11,806
23	Fargo	ND	Expand Building 1 for CLC Memory Care Unit	Minor	$5,799
23	Fargo	ND	Install Geothermal Wells and Convert HVAC Systems	NRM	$9,900
23	Fargo	ND	Modify Clinic Areas for PACT and Female Veteran Privacy	NRM	$8,609
23	Fargo	ND	Replace Selected Roofs	NRM	$6,626
23	Fargo	ND	Improve Site Security	NRM	$5,650
23	Fargo	ND	Refurbish Elevators and Replace Controls	NRM	$5,099
23	Fargo	ND	Remodel 2nd Floor for Whole Health and Anticoagulation Clinic	NRM	$4,442
23	Fargo	ND	Renovate 3rd Floor for Cardiology-Pulmonary	NRM	$4,365
23	Fargo	ND	Renovate 4th Floor for Mental Health	NRM	$3,863
23	Fargo	ND	Replace Pneumatic Controls with DDC	NRM	$3,390

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
23	Fargo	ND	Install Solar Panels	NRM	$2,200
23	Fargo	ND	Replace Interior Utility Mains	NRM	$1,977
23	Fargo	ND	Renovate 1st Floor for PT/OT Expansion	NRM	$1,776
23	Fargo	ND	Replace Perimeter Fence	NRM	$1,389
23	Fargo	ND	Commissioning/Repair/Adjust HVAC Equipment	NRM	$1,250
23	Fargo	ND	Replace Selected Sprinkler Mains	NRM	$1,243
23	Fargo	ND	Renovate 3rd Floor for Chapel	NRM	$1,177
23	Fargo	ND	Renovate 3rd Floor for Centralized Nurse Station	NRM	$1,115
VBA	Lincoln	NE	Renovate and Realign Lincoln RO to eRO Model	Minor	$7,743
23	Omaha	NE	Construct New Emergency Room and Urgent Care	Minor	$18,140
23	Omaha	NE	Construct Inpatient Surgical Suite	Minor	$18,038
23	Omaha	NE	Correct Mechanical Deficiencies Phase 2	NRM	$8,800
23	Omaha	NE	Correct Domestic Water Piping Building 1	NRM	$5,000
23	Omaha	NE	Renovate 5th Floor	NRM	$4,675
23	Omaha	NE	Renovate 6th Floor	NRM	$4,675
23	Omaha	NE	Renovate 7th Floor	NRM	$4,675
23	Omaha	NE	Replace Elevators Grand Island	NRM	$4,400
23	Omaha	NE	Replace Omaha Elevators Phase 1	NRM	$3,300
23	Omaha	NE	Replace Omaha Elevators Phase 2	NRM	$3,300
23	Omaha	NE	Correct Domestic Water Deficiencies GI Phase 2	NRM	$1,100
1	Manchester	NH	Combine Portsmouth and Somersworth CBOCs	Leases	$3,755
1	Manchester	NH	Construct Community Living Center	Major	$113,950
1	Manchester	NH	Provide Seismic Bracing for Building 1.	Major	$75,173
1	Manchester	NH	Construct Residential Rehabilitation Treatment Prog. Building	Minor	$9,018
1	Manchester	NH	Replace Campus Water Distribution, Sanitary, and Storm Water Systems	NRM	$4,600
1	Manchester	NH	Upgrade Campus Electrical Distribution System	NRM	$3,450
1	Manchester	NH	Maintain Building 15 Exterior	NRM	$3,450
1	Manchester	NH	Correct Security Deficiencies	NRM	$2,300
1	Manchester	NH	Install New Automatic Transfer Switches	NRM	$2,300
1	Manchester	NH	Repair and Restore Building Envelope for Boiler and Generator Plant	NRM	$2,300
1	Manchester	NH	Provide New Electrical Source from Distribution Grid	NRM	$2,300
1	Manchester	NH	Maintain Building 1 Sub-Basement and Basement Utilities	NRM	$2,300
1	Manchester	NH	Replace Underground Steam Distribution	NRM	$1,725
1	Manchester	NH	Maintain Building 1 Elevators and Elevator Equipment Room	NRM	$1,725
1	Manchester	NH	Replace and Maintain Steam Traps and Valves	NRM	$1,725
1	Manchester	NH	Maintain and Improve HVAC, Phase 2	NRM	$1,150
NCA	Beverly	NJ	Restore Iron Fences and Gates	Minor	$1,360
2	East Orange	NJ	Hackensack-Bergen CO CBOC	Leases	$400
2	East Orange	NJ	Jersey City CBOC	Leases	$135
2	East Orange	NJ	Piscataway CBOC	Leases	$130
2	East Orange	NJ	Hamilton CBOC	Leases	$105
2	East Orange	NJ	Correct Seismic Deficiencies, Bldg 1	Major	$219,000
2	East Orange	NJ	Renovate Building 7 Animal lab and Research	Minor	$9,760
2	East Orange	NJ	Renovate Bldg 18 - Mental Health	Minor	$8,250
2	East Orange	NJ	Improve and upgrade electrical system	NRM	$5,500
2	East Orange	NJ	Correct Seismic Deficiencies, Bldg 7	NRM	$5,280
2	East Orange	NJ	Improve and Upgrade Plumbing system, Legionella Phase II	NRM	$4,940
2	East Orange	NJ	Correct Seismic Deficiencies, Bldg 18	NRM	$4,400

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
2	East Orange	NJ	Upgrade heating system, Ph1	NRM	$4,400
2	East Orange	NJ	Upgrade heating system, Ph2	NRM	$4,400
2	East Orange	NJ	Upgrade HVAC & Pl systems	NRM	$4,180
2	East Orange	NJ	Correct inpatient wards deficiencies	NRM	$4,180
2	East Orange	NJ	Upgrade Security system at EO Campus	NRM	$3,850
2	East Orange	NJ	Renovate Eye Clinic	NRM	$3,740
2	East Orange	NJ	Renovate outpatient specialty Clinic	NRM	$3,520
2	East Orange	NJ	Renovate outpatient Dental Clinic	NRM	$3,385
2	East Orange	NJ	Correct Seismic Deficiencies, Bldg 15	NRM	$3,250
2	East Orange	NJ	Correct Seismic Deficiencies, Bldg 16	NRM	$2,880
2	East Orange	NJ	Replace light fixtures/Lamps with LED Lamps and automatic occupancy sensors through the facility	NRM	$2,530
2	East Orange	NJ	Renovate bathrooms	NRM	$2,520
2	East Orange	NJ	Renewable Energy Systems	NRM	$2,200
2	East Orange	NJ	Convert 5C swing space to inpatient units	NRM	$1,760
NCA	Finn's Point	NJ	Renovate Lodge and Repairs	Minor	$4,000
NCA	Finn's Point	NJ	Historic Wall Restoration	Minor	$2,120
2	Lyons	NJ	Correct Seismic Deficiencies, Bldg 53	Major	$34,100
2	Lyons	NJ	Correct Seismic Deficiencies, Bldg 7	NRM	$8,800
2	Lyons	NJ	Upgrade Bldg Piping, Bldg 2, 5, 6, 8, & 9	NRM	$6,160
2	Lyons	NJ	Correct Seismic Deficiencies, Bldg 57	NRM	$5,900
2	Lyons	NJ	CLC Ward Modernization P1	NRM	$4,950
2	Lyons	NJ	Upgrade Security Project P2	NRM	$4,480
2	Lyons	NJ	Correct Seismic Deficiencies, Bldgs. 2 and 4	NRM	$4,400
2	Lyons	NJ	upgrade and renovate Kitchen, Bldg. 54	NRM	$4,400
2	Lyons	NJ	Correct Seismic Deficiencies, Bldg 1	NRM	$3,850
2	Lyons	NJ	Correct Seismic Deficiencies, Bldgs. 8 and 9	NRM	$3,300
2	Lyons	NJ	Upgrade Computer and Telephone Switch Rooms	NRM	$3,300
2	Lyons	NJ	Replace Central Chillers	NRM	$2,750
2	Lyons	NJ	Repair Foundation Drains	NRM	$2,620
2	Lyons	NJ	Construct Solar Energy Field	NRM	$2,200
2	Lyons	NJ	Modernize Elevator Equipment	NRM	$2,129
2	Lyons	NJ	Modernization of Water Systems	NRM	$1,980
2	Lyons	NJ	Rehab. Storm Water System	NRM	$1,870
2	Lyons	NJ	Replace Site lighting - Phase 2	NRM	$1,650
2	Lyons	NJ	Upgrade Secondary Distribution Gear B 5, 8, 10	NRM	$1,650
2	Lyons	NJ	Replace HVAC Dental - Bldg 6	NRM	$1,320
2	Lyons	NJ	Relamping with LED Lamps and automatic sensors	NRM	$1,210
VBA	Newark	NJ	Realign Newark RO	Minor	$8,900
22	Albuquerque	NM	Renew Santa Fe CBOC	Leases	$3,595
22	Albuquerque	NM	Renew and Expand Gallup CBOC	Leases	$3,275
22	Albuquerque	NM	Renew and Expand Silver City CBOC	Leases	$3,150
22	Albuquerque	NM	Renew and Expand Farmington CBOC	Leases	$3,150
22	Albuquerque	NM	Renew and Expand NW Metro Clinic	Leases	$1,975
VBA	Albuquerque	NM	Renew Lease at Las Cruces VR&E Office	Leases	$23
22	Albuquerque	NM	Seismically Retrofit Building 10	Minor	$17,500
22	Albuquerque	NM	Construct Medical Support Complex	Minor	$17,500
22	Albuquerque	NM	Expand the Emergency Department	Minor	$17,000
22	Albuquerque	NM	Seismically Retrofit Building 4	Minor	$17,000
22	Albuquerque	NM	Upgrade Operating Rooms (B-41)	Minor	$16,950

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
22	Albuquerque	NM	Expand Research Program Space	Minor	$15,900
22	Albuquerque	NM	Seismically Retrofit Building 2	Minor	$14,500
22	Albuquerque	NM	Consolidate Medical and Surgical Intensive Care Unit	Minor	$14,000
22	Albuquerque	NM	Seismically Retrofit Building 11	Minor	$14,000
22	Albuquerque	NM	Renovate and Expand SPS/Distribution	Minor	$13,650
22	Albuquerque	NM	Renovate Spinal Cord Injury Building	Minor	$12,650
22	Albuquerque	NM	Expand/Renovate B41 2A & B for Surgical Specialty Clinics	Minor	$11,750
22	Albuquerque	NM	Renovate & Expand Radiology	Minor	$11,750
22	Albuquerque	NM	Renovate 5B/C for Infusion-Pulmonary Functions	Minor	$10,550
22	Albuquerque	NM	Expand Canteen Service Space	Minor	$9,600
22	Albuquerque	NM	Seismically Retrofit Building 15	Minor	$7,500
22	Albuquerque	NM	Seismically Retrofit Building 12	Minor	$6,250
22	Albuquerque	NM	Expand B-77 for Ancillary-Diagnostic Services	Minor	$4,200
22	Albuquerque	NM	Repair/Replace Water Storage and Connections	NRM	$8,000
22	Albuquerque	NM	Correct Architectural, Mechanical, Electrical and Water Deficiencies, B41, Phase 1	NRM	$7,500
22	Albuquerque	NM	Correct Architectural, Electrical, Mechanical, Plumbing, Deficiencies, B1	NRM	$5,250
22	Albuquerque	NM	Correct Architectural, Electrical, Mechanical, Plumbing, Deficiencies and Renovate B-3, Ph. 1	NRM	$4,925
22	Albuquerque	NM	Replace Main Emergency Power Generators (B-42)	NRM	$4,900
22	Albuquerque	NM	Restore Exteriors Building 2 & 3	NRM	$4,250
22	Albuquerque	NM	Replace Roofs Building 1, 2,3 and 4	NRM	$3,850
22	Albuquerque	NM	Replace HVAC Equipment on Campus	NRM	$3,350
22	Albuquerque	NM	Perform Recommissioning Phase II	NRM	$2,900
22	Albuquerque	NM	Construct New Surface Parking Spaces	NRM	$2,800
22	Albuquerque	NM	Perform Recommissioning Phase I	NRM	$2,400
22	Albuquerque	NM	Upgrade Women's Healthcare Areas	NRM	$2,200
22	Albuquerque	NM	Replace Roofs B12, B15 and B18	NRM	$1,900
22	Albuquerque	NM	Improve Bariatric Access	NRM	$1,750
22	Albuquerque	NM	Renovate B-41 Floor 2C/D for Surgery Support	NRM	$1,700
22	Albuquerque	NM	Correct Site Storm Drainage	NRM	$1,350
22	Albuquerque	NM	Correct Safety Deficiencies on Campus	NRM	$1,350
22	Albuquerque	NM	Upgrade Parking Access Areas	NRM	$1,245
NCA	Santa Fe	NM	Santa Fe Replacement (Albuquerque)	Major	$55,000
21	Las Vegas	NV	Execute Replacement Lease for the Laughlin Outreach Clinic	Leases	$1,200
21	Las Vegas	NV	Construct Physical Rehabilitation and Gym	Minor	$15,400
21	Las Vegas	NV	Expand and Renovate the Dental Clinic in Building 1	Minor	$9,900
21	Las Vegas	NV	Construct Pain Medicine Building	Minor	$9,700
21	Las Vegas	NV	Construct Physical Medicine Building	Minor	$9,700
21	Las Vegas	NV	Construct a New Audiology Building	Minor	$9,650
21	Las Vegas	NV	Construct Ambulatory Surgery Wing	Minor	$9,600
21	Las Vegas	NV	Construct Eye Clinic Wing	Minor	$9,560
21	Las Vegas	NV	Radiology Expansion	Minor	$9,560
21	Las Vegas	NV	Construct Magnetic Resonance Imaging Building	Minor	$9,500
21	Las Vegas	NV	Construct Mental Health Building	Minor	$9,400
21	Las Vegas	NV	Renovate Dialysis Unit to Improve Line of Sight	NRM	$6,600
21	Las Vegas	NV	Upgrade Heating System	NRM	$4,580
21	Las Vegas	NV	Renovate Central Utility Plant to Accommodate Engineering Maintenance Shop	NRM	$3,300

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
21	Las Vegas	NV	Enhance Campus Chiller Loop Operational Efficiency	NRM	$3,300
21	Las Vegas	NV	Laboratory Expansion	NRM	$3,300
21	Las Vegas	NV	Correct Mechanical Electrical and Plumbing Deficiency, B 6	NRM	$3,240
21	Las Vegas	NV	Provide sidewalk	NRM	$2,700
21	Las Vegas	NV	Upgrade Central Utility Plant	NRM	$2,300
21	Las Vegas	NV	Repair Storm Drainage System North Side of Campus	NRM	$1,540
21	Las Vegas	NV	Repair Storm Drainage System South Side of Campus	NRM	$1,540
21	Las Vegas	NV	Upgrade Kitchen	NRM	$1,320
21	Las Vegas	NV	Correct Architectural Deficiencies in Building 1	NRM	$1,210
21	Las Vegas	NV	Improve Secondary Electrical Distribution	NRM	$1,000
VBA	Reno	NV	Renew Lease at Reno RO	Leases	$979
21	Reno	NV	Construct Replacement Medical Center	Major	$999,250
21	Reno	NV	Building 10 Seismic Mitigation	Major	$77,000
21	Reno	NV	Construct New Wellness Center	Minor	$19,999
21	Reno	NV	Construct Third Parking Garage	Minor	$19,775
21	Reno	NV	Build New Homeless Clinic	Minor	$17,380
21	Reno	NV	Expand and Renovate Magnetic Resonance Imaging Program	Minor	$15,900
21	Reno	NV	Construct Inpatient Mental Health and Memory Care Facility	Minor	$15,730
21	Reno	NV	Renovate Vacated Space and Expand First Floor of Building 12	Minor	$12,925
21	Reno	NV	Procure Land for Campus and Parking Expansion to Increase Security Setbacks	Minor	$11,300
21	Reno	NV	Upgrade for Compliance with Physical Security Standards Campus-Wide	Minor	$4,816
21	Reno	NV	Renovate Fourth Floor of Building 12 for Single Patient Rooms	NRM	$8,640
21	Reno	NV	Convert Sixth Floor Wing on Building 12 to Support Ambulatory Specialty Care Services	NRM	$5,000
21	Reno	NV	Provide Emergency Water Supply Tank	NRM	$2,875
21	Reno	NV	Construct Solar Panel Array on Second New Facility Parking Garage	NRM	$2,200
21	Reno	NV	Provide Sewer Storage Tank for Emergency Management	NRM	$1,860
21	Reno	NV	Improve Renewable Energy by constructing Solar Photovoltaics system.	NRM	$1,650
21	Reno	NV	Renovate Space in Wing B3 of Building 12	NRM	$1,400
2	Albany	NY	Lease CBOC Columbia-Greene	Leases	$180
2	Albany	NY	Lease CBOC Clifton Park	Leases	$170
2	Albany	NY	Renovate for Inpatient Ward phase 2	NRM	$5,516
2	Albany	NY	Renovate for CLC Phase 4	NRM	$4,485
2	Albany	NY	Install Sprinklers in Utility Buildings	NRM	$2,700
2	Albany	NY	Renovate Radiology phase II	NRM	$2,455
2	Albany	NY	Replace Window Air Conditioning Units	NRM	$2,300
2	Batavia	NY	Inpatient Geropsych Unit	NRM	$14,492
2	Batavia	NY	Modernized Community Living Center	NRM	$6,236
2	Batavia	NY	Upgrade Outpatient Clinical Space	NRM	$4,450
2	Batavia	NY	Repair Site Utilities	NRM	$3,800
2	Batavia	NY	Modernize Bldg. #4	NRM	$3,300
2	Batavia	NY	Replace Windows Campus Wide	NRM	$2,750
2	Batavia	NY	Stabilize, Repair and Tuck-Point Masonry Campus Wide	NRM	$1,750
2	Batavia	NY	Upgrade Cooling in Server Room & IT Spaces Campus Wide	NRM	$1,650
2	Batavia	NY	Modernize Electrical Distribution	NRM	$1,350
2	Batavia	NY	Replace Sewer Mains Campus Wide	NRM	$1,320

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
2	Batavia	NY	Remodel Bldgs. 7 & 8	NRM	$1,250
2	Batavia	NY	Upgrade Essential Electric System Batavia	NRM	$1,170
2	Batavia	NY	Batavia Accessibility Enhancements	NRM	$1,100
2	Batavia	NY	Modernize Warehouse and Laundry Batavia -Bldg.10	NRM	$1,000
NCA	Bath	NY	Gravesite Expansion (PPC, IGC)	Minor	$5,000
2	Bath	NY	FCA Upgrade Electrical, B76	NRM	$7,700
2	Bath	NY	FCA Upgrade Ventilation, B76	NRM	$4,950
2	Bath	NY	FCA Upgrade Fire Alarm System, B78	NRM	$1,430
2	Bath	NY	ArcFlash Survey - Site Wide Upgrades - Phase 1	NRM	$1,400
2	Bath	NY	ArcFlash Survey - Site Wide Upgrades - Phase 2	NRM	$1,400
2	Bath	NY	FCA upgrade Finishes, B92	NRM	$1,320
2	Bath	NY	FCA Upgrade Sprinkler and Steam Piping, B41	NRM	$1,210
2	Bath	NY	FCA upgrade Fixtures/Piping, B92	NRM	$1,210
2	Bronx	NY	New Eye Clinic	Minor	$9,500
2	Bronx	NY	Create Parking Garage	Minor	$8,750
2	Bronx	NY	Patient Care Environment Courtyard Atrium	Minor	$8,634
2	Brooklyn	NY	Correct Seismic Deficiencies	Major	$166,000
2	Brooklyn	NY	Correct Building 4 Seismic Deficiencies	Minor	$9,900
2	Brooklyn	NY	Patient Improvement Rehab/Audiology	Minor	$9,398
2	Brooklyn	NY	Abate Asbestos Building 1 Phase 1	NRM	$9,350
2	Brooklyn	NY	Abate Asbestos Building 1 Phase 4	NRM	$9,350
2	Brooklyn	NY	Replace Induction Units Phase 1	NRM	$9,350
2	Brooklyn	NY	Replace Induction Units Phase 2	NRM	$9,350
2	Brooklyn	NY	Construct Parking Garage Phase 1	NRM	$8,800
2	Brooklyn	NY	Correct Research Space Deficiencies	NRM	$8,800
2	Brooklyn	NY	Abate Asbestos Building 1 Phase 2	NRM	$8,800
2	Brooklyn	NY	Upgrade Air Handling Unit Recirculation	NRM	$8,250
2	Brooklyn	NY	Replace Windows Phase 1	NRM	$8,250
2	Brooklyn	NY	Upgrade Site Water Lines	NRM	$8,250
2	Brooklyn	NY	Abate Asbestos Building 1 Phase 3	NRM	$8,250
2	Brooklyn	NY	Replace Windows Phase 4	NRM	$7,920
2	Brooklyn	NY	Upgrade Electrical Distribution Phase 1	NRM	$7,700
2	Brooklyn	NY	Consolidate Administrative Space	NRM	$7,700
2	Brooklyn	NY	Separate Electrical System into Three Branches	NRM	$7,700
2	Brooklyn	NY	Replace Windows Phase 3	NRM	$7,480
2	Brooklyn	NY	Replace Windows Phase 2	NRM	$7,150
2	Brooklyn	NY	Repair Parapet Walls and Exterior Walls	NRM	$7,150
2	Brooklyn	NY	Replace Boiler #2	NRM	$6,600
2	Brooklyn	NY	Replace Boiler #3	NRM	$6,600
2	Brooklyn	NY	Replace Boiler #1	NRM	$6,600
2	Brooklyn	NY	Upgrade Architectural Finishes Phase 1	NRM	$6,600
2	Brooklyn	NY	Upgrade Architectural Finishes Phase 2	NRM	$6,600
2	Brooklyn	NY	Upgrade Architectural Finishes Phase 3	NRM	$6,600
2	Brooklyn	NY	Renovate SPD	NRM	$6,380
2	Brooklyn	NY	Upgrade Architectural Finishes Phase 4	NRM	$6,050
2	Brooklyn	NY	Consolidate Mental Health Services Building 1	NRM	$6,050
2	Brooklyn	NY	Replace Pneumatic Controls Building #1	NRM	$5,830
2	Brooklyn	NY	Renovate Inpatient Ward	NRM	$5,500
2	Brooklyn	NY	Repair Accessibility Deficiencies	NRM	$5,500
2	Brooklyn	NY	Upgrade Elevators	NRM	$4,950

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
2	Brooklyn	NY	Correct Building 4 Condition Deficiencies	NRM	$4,400
2	Brooklyn	NY	Construct On-Site Cogeneration Plant	NRM	$4,400
2	Brooklyn	NY	Install Thermal Energy Storage	NRM	$4,400
2	Brooklyn	NY	Replace Steam Lines	NRM	$4,400
2	Brooklyn	NY	Replace Building 15 Generator	NRM	$4,400
2	Brooklyn	NY	Renovate Inpatient Mental Health	NRM	$4,389
2	Brooklyn	NY	Renovate Audiology and Speech	NRM	$4,348
2	Brooklyn	NY	Renovate Rehab Medicine	NRM	$4,305
2	Brooklyn	NY	Upgrade Chiller Controls	NRM	$3,850
2	Brooklyn	NY	Upgrade Fixed Equipment	NRM	$3,850
2	Brooklyn	NY	Consolidate Primary Care Clinic	NRM	$3,815
2	Brooklyn	NY	Renovate Dental Clinic	NRM	$3,300
2	Brooklyn	NY	Conduct Retro-Commissioning Buildings 1, 4, 14 and 15	NRM	$3,180
2	Brooklyn	NY	Create Alternate Site for Emergency Operations	NRM	$2,893
2	Brooklyn	NY	Renovate Neurology Space	NRM	$2,833
2	Brooklyn	NY	Upgrade Site Security	NRM	$2,750
2	Brooklyn	NY	Replace Walk in Box Compressors	NRM	$2,750
2	Brooklyn	NY	Replace Exhaust Fans	NRM	$2,750
2	Brooklyn	NY	Replace Fire Alarm System Building 15 and Building 4	NRM	$2,750
2	Brooklyn	NY	Install Fire Safety Improvements	NRM	$2,750
2	Brooklyn	NY	Replace Radiator Steam Control Valves	NRM	$2,750
2	Brooklyn	NY	Replace Motor Control Centers	NRM	$2,200
2	Brooklyn	NY	Repair Facility Metering Systems	NRM	$2,200
2	Brooklyn	NY	Renovate Specialty Care Clinic	NRM	$2,155
2	Brooklyn	NY	Reduce Air Flow with Variable Frequency Drive	NRM	$1,980
2	Brooklyn	NY	Install Wireless Nurse Call System	NRM	$1,980
2	Brooklyn	NY	Install Heat Exchanger for Chiller Plant	NRM	$1,650
2	Brooklyn	NY	Replace Steam Traps	NRM	$1,650
2	Brooklyn	NY	Install Boiler Blowdown Heat Recovery	NRM	$1,430
2	Brooklyn	NY	Install Kitchen Hood With Variable Air Vent(VAV)	NRM	$1,430
2	Brooklyn	NY	Conduct Water Conservation Project	NRM	$1,430
2	Brooklyn	NY	Install Variable Ventilation With CO2 Control	NRM	$1,320
2	Brooklyn	NY	Install Solar Panels	NRM	$1,320
2	Brooklyn	NY	Replace Heat Recovery Pumps	NRM	$1,320
2	Brooklyn	NY	Replace Pipe Insulation	NRM	$1,100
2	Brooklyn	NY	Upgrade Boiler Controls	NRM	$1,100
2	Buffalo	NY	Expand Patient Parking Ramp	Minor	$19,901
2	Buffalo	NY	Modernize Surgery	Minor	$17,373
2	Buffalo	NY	Modernize Emergency Department	Minor	$17,294
2	Buffalo	NY	Modernize Intensive Care Unit (ICU)	Minor	$16,576
2	Buffalo	NY	Implement PACT Primary Care Group I (D-Wing)	Minor	$13,113
2	Buffalo	NY	Modernize Sterile Processing Service (SPS) and Urology Procedure Areas	Minor	$12,814
VBA	Buffalo	NY	Build out at Buffalo RO lease	Minor	$9,903
2	Buffalo	NY	Renovate for Surgery Procedure Areas	NRM	$8,800
2	Buffalo	NY	Renovate for Sterile Processing Service (SPS)	NRM	$7,100
2	Buffalo	NY	Replace Roofs Building 1	NRM	$6,600
2	Buffalo	NY	Renovate 6th floor D Wing	NRM	$5,450
2	Buffalo	NY	Modernize Outpatient Mental Health Clinics	NRM	$5,450
2	Buffalo	NY	Second Primary Electrical Feed	NRM	$4,400

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
2	Buffalo	NY	Modernize Dialysis Clinic	NRM	$4,350
2	Buffalo	NY	Renovate Ward for Inpatient Medical Unit	NRM	$4,200
2	Buffalo	NY	Modernize Inpatient Pharmacy	NRM	$3,300
2	Buffalo	NY	Upgrade Electrical Systems; TV Trunk Line, Overhead Paging, Nurse Call and Code Blue	NRM	$2,970
2	Buffalo	NY	Renovate for Phase Two Prep and Recovery	NRM	$2,700
2	Buffalo	NY	Correct Mechanical Deficiencies - 2	NRM	$2,475
2	Buffalo	NY	Environmental Improvements	NRM	$2,200
2	Buffalo	NY	Renovate Specialty Clinics, Bldg. #1 5th Floor	NRM	$2,200
2	Buffalo	NY	Improve Potable Water Distribution System	NRM	$2,200
2	Buffalo	NY	Modernize Nuclear Medicine	NRM	$2,200
2	Buffalo	NY	Upgrade IT Infrastructure, Bldg. #1	NRM	$2,175
2	Buffalo	NY	Renovate Nutrition and Food	NRM	$2,150
2	Buffalo	NY	Upgrade Essential Electric System	NRM	$1,950
2	Buffalo	NY	Update Surgical Clinics	NRM	$1,950
2	Buffalo	NY	Modernize Research Building	NRM	$1,900
2	Buffalo	NY	Renovate Cardiology Offices	NRM	$1,540
2	Buffalo	NY	Upgrade HVAC- SPD	NRM	$1,100
2	Canandaigua	NY	Renovate B36 A&B for Gerosych	NRM	$13,400
2	Canandaigua	NY	FCA Replace Primary service equipment	NRM	$5,100
2	Canandaigua	NY	FCA Upgrade HVAC B7	NRM	$2,540
2	Canandaigua	NY	Upgrade HVAC, Station Wide	NRM	$1,500
2	Canandaigua	NY	Repair Failing Masonry	NRM	$1,500
2	Canandaigua	NY	Provide Renovations Station Wide	NRM	$1,500
2	Canandaigua	NY	Upgrade Plumbing, Station Wide	NRM	$1,485
2	Canandaigua	NY	Repair Failing Masonry	NRM	$1,485
2	Canandaigua	NY	FCA Install/Upgrade HVAC Bldg 37	NRM	$1,210
2	Canandaigua	NY	Enhanced Use Lease Golf Course (30 acres) and Buildings	Other	$1
2	Canandaigua	NY	Enhanced Use Lease B18,73,94 and 40 acres	Other	$1
2	Castle Point	NY	Upgrade Outpatient Clinic H	Minor	$8,573
2	Castle Point	NY	Enlarge Building 15H Community Living Center	Minor	$6,270
2	Castle Point	NY	New Prosthetics suite	Minor	$4,615
2	Castle Point	NY	Install New Main Electrical Switch Gear, Distribution and Transformer throughout the Campus	NRM	$6,480
2	Castle Point	NY	Primary Care Enhancement	NRM	$4,000
2	Castle Point	NY	Replace Hot Water Heat Exchangers	NRM	$3,235
2	Castle Point	NY	Install Energy Saving Plumbing Fixtures and Appurtenances	NRM	$3,080
2	Castle Point	NY	Relocate N&FS storage, refrigerator and freezer in Building 16	NRM	$2,887
2	Castle Point	NY	Replace Building 16 AHU	NRM	$2,870
2	Castle Point	NY	Replacement of Windows Ph I	NRM	$2,750
2	Castle Point	NY	Install FCA-Water Main CP Phase 2 (Tunnel Main & Tower)	NRM	$2,600
2	Castle Point	NY	Replace Radiator &Fan Coil Controls, FPU Panel and BAS/ BMS System	NRM	$2,500
2	Castle Point	NY	Install new Temperature, pH, and Flow measuring devices on Domestic Water Systems	NRM	$2,456
2	Castle Point	NY	Replace elevator shaft, cars, controls and roofs 15H, and 21A and misc. roofs	NRM	$2,135
2	Castle Point	NY	Replace Shingle Roofs on Building 19, 20 and 21	NRM	$2,000
2	Castle Point	NY	Upgrade Emergency Power distribution system for Buildings 19, 20, and 21	NRM	$1,950

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
2	Castle Point	NY	Renovating and establishing centralized "registry" area with centralized services in building 17	NRM	$1,880
2	Castle Point	NY	Replace Building 18D's Built up Roof	NRM	$1,760
2	Castle Point	NY	Correct Handicap Accessibility Deficiencies in Public Bathrooms	NRM	$1,670
2	Castle Point	NY	Correct Water Intrusion in Connecting Corridor Exterior Walls Ph1	NRM	$1,585
2	Castle Point	NY	Replace High Pressure Steam Lines and Pumps in Tunnel & Trench	NRM	$1,490
2	Castle Point	NY	Water Tower Rehabilitation	NRM	$1,410
2	Castle Point	NY	Replace Steam Traps Campus Wide	NRM	$1,300
2	Castle Point	NY	Renovate all public bathrooms	NRM	$1,200
2	Castle Point	NY	Replace Fan Coils - Bldg 18	NRM	$1,088
NCA	Long Island	NY	Renovate Historic Site	Minor	$9,990
NCA	Long Island	NY	Irrigation Project, Phase 1	Minor	$2,630
2	Montrose	NY	Renewal of the Carmel CBOC lease	Leases	$208
2	Montrose	NY	Modernize Community Living Center Facility	Major	$62,500
2	Montrose	NY	Build community living centers of excellence	Minor	$17,160
2	Montrose	NY	Create Mental Health Domiciliary Annex for Building 13 & 14	Minor	$7,810
2	Montrose	NY	Replace Roofs on Mission Critical Buildings	NRM	$7,450
2	Montrose	NY	Replace Locking System	NRM	$5,680
2	Montrose	NY	Replace high voltage transformers throughout the campus	NRM	$5,170
2	Montrose	NY	Replace steam lines and appurtenances to improve energy efficiency and address site deficiencies of aged steam lines in 1 and 2- Phase 2 Part B	NRM	$4,937
2	Montrose	NY	Replace steam lines - Phase 2 Part C	NRM	$4,410
2	Montrose	NY	Replace 15 AHU and Roof	NRM	$4,345
2	Montrose	NY	Install Air Conditioning Systems, Building 29	NRM	$4,125
2	Montrose	NY	Relocate IRM Server Room to Building 2	NRM	$4,045
2	Montrose	NY	Renovate for new PM&R suite	NRM	$3,909
2	Montrose	NY	Improve energy efficiency and address site deficiencies through replacement of aged steam distribution equipment for buildings 3, 4, and 12 - Phase 6	NRM	$3,795
2	Montrose	NY	Construct a new Cogeneration Plant	NRM	$3,500
2	Montrose	NY	Creating a Specialty Suite Building 5	NRM	$3,487
2	Montrose	NY	Install New Windows, Buildings 1,2,3,4, and 5	NRM	$3,300
2	Montrose	NY	Improve site infrastructure by providing backup generator power to service buildings 17,18,and 28 elevator	NRM	$3,295
2	Montrose	NY	Improve energy efficiency and address site deficiencies through replacement of aged steam distribution equipment for buildings 1 and 2 - Phase 7	NRM	$3,235
2	Montrose	NY	Replace Water Fixtures	NRM	$2,870
2	Montrose	NY	Improve usefulness of outlying buildings by installing fiber optic network along steam trenches	NRM	$2,860
2	Montrose	NY	Replace aged steam regulators	NRM	$2,750
2	Montrose	NY	Montrose Police Department Office Renovations	NRM	$2,750
2	Montrose	NY	Repair/Replace Buildings Gutter and Down Spouts, Campus-wide	NRM	$2,565
2	Montrose	NY	Construct New Podiatry Suite in Building 3	NRM	$2,508
2	Montrose	NY	Install Solar PV and Solar Thermal	NRM	$2,500

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
2	Montrose	NY	Replace steam lines and appurtenances to improve energy efficiency and address site deficiencies of aged steam lines in 16,17 and 19 - Phase 2 Part E	NRM	$2,460
2	Montrose	NY	Replace High Voltage Feeders and Sectional Switch for Buildings 27, 29, 30 and 31	NRM	$2,450
2	Montrose	NY	Repair Montrose WWTP Digester Walls & Roof	NRM	$2,420
2	Montrose	NY	Replace Refrigeration Units	NRM	$2,300
2	Montrose	NY	Replace roof and tuckpoint & seal attic & parapet, B29	NRM	$2,177
2	Montrose	NY	Replace street lighting	NRM	$2,167
2	Montrose	NY	Replace roof and Correct water intrusion rehabilitate building 16 exterior walls Tuckpoint and Sealcoat	NRM	$2,145
2	Montrose	NY	Replace failing pneumatic control network with new, more efficient digital controls	NRM	$2,057
2	Montrose	NY	Install new HVAC for SPS Storage locations throughout Patient Care areas	NRM	$1,890
2	Montrose	NY	Enhance physical therapy	NRM	$1,815
2	Montrose	NY	Replace Roof and Correct Water Intrusion and Rehabilitate Building 19 Exterior Walls and Parapet, Tuckpoint and Sealcoat, Install Solar PV	NRM	$1,765
2	Montrose	NY	Replace Electrical Panels Campus-wide Ph 3	NRM	$1,595
2	Montrose	NY	Replace Building 12 Roof	NRM	$1,585
2	Montrose	NY	Replace utility tunnel overhead lighting system	NRM	$1,580
2	Montrose	NY	Replace Roads and Drainage	NRM	$1,480
2	Montrose	NY	Correct deteriorating site sewage treatment trickling filter	NRM	$1,441
2	Montrose	NY	Campus Water Distribution Deficiency Correction	NRM	$1,375
2	Montrose	NY	Replace Building 2 Roof and Correct Water Intrusion Rehabilitate 2 Exterior Walls Tuckpoint and Sealcoat	NRM	$1,350
2	Montrose	NY	Repair aged brick exterior of buildings 12,13,14	NRM	$1,345
2	Montrose	NY	Correct accessibility deficiencies in campus bathrooms	NRM	$1,270
2	Montrose	NY	Install Ground Source Heat Pumps	NRM	$1,200
2	Montrose	NY	Install Radiator Controls, Buildings 2 and 3	NRM	$1,070
2	Montrose	NY	Building 15 Generator Replacement	NRM	$1,050
2	Montrose	NY	Install Radiator Controls, Buildings 13 and 14	NRM	$1,035
2	New York	NY	Correct Nonstructural Seismic Deficiencies	Major	$49,500
2	New York	NY	Conduct Energy Savings Performance Contract	NRM	$9,900
2	New York	NY	Renovate Patient Ward 17N and 17S	NRM	$9,900
2	New York	NY	Upgrade Operating Rooms	NRM	$9,100
2	New York	NY	Construct Emergency Generator Structure/Emergency Electrical Upgrades	NRM	$8,900
2	New York	NY	Renovate Inpatient Wards PH 3	NRM	$8,890
2	New York	NY	Renovate Research Ph 3	NRM	$8,800
2	New York	NY	Implement Legionella Prevention Measures	NRM	$8,800
2	New York	NY	Replace Perimeter Heating Radiators	NRM	$8,800
2	New York	NY	Modernize Radiology Space	NRM	$8,540
2	New York	NY	Replace Windows Phase I	NRM	$8,500
2	New York	NY	Replace Windows Phase III	NRM	$8,400
2	New York	NY	Renovate Patient Ward	NRM	$8,250
2	New York	NY	Correct Architectural Deficiencies	NRM	$8,000
2	New York	NY	Upgrade HVAC Controls Ph2	NRM	$7,700
2	New York	NY	Install Chiller Plant Upgrades	NRM	$7,150

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
2	New York	NY	Abate Asbestos Ph 1	NRM	$7,100
2	New York	NY	Abate Asbestos Phase 2	NRM	$7,050
2	New York	NY	Install High Tech /High Cost Site Prep Hybrid OR	NRM	$6,950
2	New York	NY	Improve Accessibility	NRM	$6,800
2	New York	NY	Replace HVAC Controls Ph 3	NRM	$6,737
2	New York	NY	Renovate Patient Ward Mental Health 17W	NRM	$6,600
2	New York	NY	Expand Emergency Room/Ambulatory Entrance Ph 2	NRM	$6,500
2	New York	NY	Repair Accessibility Deficiencies PH 2	NRM	$6,450
2	New York	NY	Replace Operating Room Suite Air Handling Unit	NRM	$6,050
2	New York	NY	Renovate Ground Floor, New SIM Center	NRM	$6,000
2	New York	NY	Install AHU Air Recovery	NRM	$5,500
2	New York	NY	Replace Windows Phase II	NRM	$5,500
2	New York	NY	Upgrade Steam Distribution	NRM	$5,500
2	New York	NY	Renovate VISN Prosthetics on 14S and 14W	NRM	$5,210
2	New York	NY	Renovate 3E/3N Kitchen and Admin Offices	NRM	$5,060
2	New York	NY	Consolidate Research Space	NRM	$4,950
2	New York	NY	Relocate Primary Care and Ambulatory Care	NRM	$4,850
2	New York	NY	Upgrade Architectural Doors and Hardware	NRM	$4,800
2	New York	NY	Upgrade Architectural Finishes-flooring, ceiling, light fixtures	NRM	$4,675
2	New York	NY	Install Thermal Energy Storage	NRM	$4,400
2	New York	NY	Replace Induction Units	NRM	$4,400
2	New York	NY	Replace Steam Condensate Pumps	NRM	$4,400
2	New York	NY	Mental Health Ward Improvements	NRM	$4,180
2	New York	NY	Renovate Space For Patient Aligned Care Team - Primary Care	NRM	$4,070
2	New York	NY	Renovate Ground Floor, Conference center	NRM	$3,900
2	New York	NY	Upgrade Elevators	NRM	$3,800
2	New York	NY	Install Cogeneration Plant	NRM	$3,630
2	New York	NY	Install Chiller Control Optimization	NRM	$3,300
2	New York	NY	Accomplish Retro Commissioning Manhattan	NRM	$3,300
2	New York	NY	Expand Mental Health	NRM	$3,300
2	New York	NY	Renovate 7N Rehab space	NRM	$3,190
2	New York	NY	Renovate Hoptel 10 South	NRM	$2,750
2	New York	NY	Replace Chiller Phase 3	NRM	$2,750
2	New York	NY	Replace Chiller Phase 4	NRM	$2,750
2	New York	NY	Replace Exhaust Fans	NRM	$2,750
2	New York	NY	Install Fire Stopping /Address Life Safety Deficiencies	NRM	$2,500
2	New York	NY	Install HVAC for Dietetics	NRM	$2,200
2	New York	NY	Install Water Conservation Devices	NRM	$1,980
2	New York	NY	Install and Upgrade Architectural Signage	NRM	$1,690
2	New York	NY	Install Condensate Water Heat Recovery	NRM	$1,650
2	New York	NY	Replace AH-8 and AH-9	NRM	$1,650
2	New York	NY	Upgrade/Improve Site Security	NRM	$1,485
2	New York	NY	Renovate Oncology Pharmacy	NRM	$1,450
2	New York	NY	Install Water Side Economizer	NRM	$1,320
2	New York	NY	Replace Pipe Insulation NY	NRM	$1,320
2	New York	NY	Lease Admin Space	Other	$4,500
2	Northport	NY	Renew Patchogue CBOC Lease	Leases	$290
2	Northport	NY	Replace Windows in Building 200 - Project 2	NRM	$14,300
2	Northport	NY	Replace Secondary Electrical Distribution, Phase 1	NRM	$9,900
2	Northport	NY	Replace Secondary Electrical Distribution to Outer Buildings	NRM	$8,600

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
2	Northport	NY	Renovate Medical/Surgical Inpatients Units, Phase 1	NRM	$7,700
2	Northport	NY	Renovate Research	NRM	$7,700
2	Northport	NY	Renovate Unit for Sub-Acute Rehabilitation	NRM	$6,600
2	Northport	NY	Tuckpoint Exterior Walls of Buildings 203, 36, 5, 6, 17, 20	NRM	$5,500
2	Northport	NY	Renovate Building 7 for Substance Abuse Residential Treatment Program	NRM	$3,850
2	Northport	NY	Renovate Patient Unit for Outpatient Mental Health, Bldg 200	NRM	$3,300
2	Northport	NY	Replace Roofs Building 6, 7, 11, 12	NRM	$1,760
2	Northport	NY	Tuckpoint Exterior Walls of Buildings 10 and 11	NRM	$1,650
2	Northport	NY	Tuckpoint Exterior Walls of Building 7, 8, 9	NRM	$1,650
2	Northport	NY	Replace Roofs of Buildings 13, 14, 203	NRM	$1,650
2	Northport	NY	Replace Air Ducts Buildings 7, 11, 89	NRM	$1,550
2	Northport	NY	Replace Roofs Buildings 8, 15	NRM	$1,320
NCA	Soloman-Saratoga	NY	Repave Roads and Various Site Improvements	Minor	$1,280
2	St. Albans	NY	Construct Wing Expansion B, C, D, E Building	Major	$168,000
2	St. Albans	NY	Address Seismic Deficiencies	Major	$64,100
2	St. Albans	NY	Expand and Renovate Existing Primary Care for CBOC Ancillary Diagnostic Services Module	Minor	$15,620
2	St. Albans	NY	Replace Architectural Finishes	NRM	$12,100
2	St. Albans	NY	Upgrade Facility Envelope	NRM	$12,100
2	St. Albans	NY	Repair Accessibility Deficiencies	NRM	$8,800
2	St. Albans	NY	Renovate Wards B2 and B3	NRM	$8,800
2	St. Albans	NY	Implement Legionella Prevention Measures (SA)	NRM	$8,800
2	St. Albans	NY	Renovate Wards A4 and A5	NRM	$8,800
2	St. Albans	NY	Replace Building 88 Condensate Lines	NRM	$7,700
2	St. Albans	NY	Install Fire Safety Improvements (SA)	NRM	$7,700
2	St. Albans	NY	Install Summer Boiler	NRM	$6,600
2	St. Albans	NY	Replace Boiler #1	NRM	$6,600
2	St. Albans	NY	Replace Boiler #2	NRM	$6,600
2	St. Albans	NY	Replace Boiler #3	NRM	$6,600
2	St. Albans	NY	Replace Building 91, 92 and 93 Condensate Lines	NRM	$6,600
2	St. Albans	NY	Upgrade Steam Condensate Lines Building 89	NRM	$6,050
2	St. Albans	NY	Replace Building 88 Electrical Switchgear	NRM	$6,050
2	St. Albans	NY	Replace Electrical Switchgear 167 and 168	NRM	$6,050
2	St. Albans	NY	Replace HVAC Control System	NRM	$5,500
2	St. Albans	NY	Replace Building 85 and 86 Condensate Lines	NRM	$5,500
2	St. Albans	NY	Upgrade Water Mains	NRM	$5,500
2	St. Albans	NY	Abate Asbestos	NRM	$4,400
2	St. Albans	NY	Renovate Dental Clinic	NRM	$4,400
2	St. Albans	NY	Replace Windows	NRM	$4,400
2	St. Albans	NY	Replace Building 87 Condensate Lines	NRM	$4,400
2	St. Albans	NY	Upgrade Elevators Buildings 85, 87 and 91	NRM	$3,850
2	St. Albans	NY	Replace Roofs Buildings 87 and 88	NRM	$3,850
2	St. Albans	NY	Replace Plumbing Fixtures	NRM	$3,850
2	St. Albans	NY	Replace Radiator Control Valves	NRM	$3,300
2	St. Albans	NY	Replace Main Electrical Switch Gear	NRM	$3,300
2	St. Albans	NY	Install Boiler Blow Down Heat Recovery	NRM	$2,750
2	St. Albans	NY	Replace Pump Station & Control Pumps (SA)	NRM	$2,750
2	St. Albans	NY	Upgrade Site Security	NRM	$2,750

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
2	St. Albans	NY	Replace Auditorium and Commissary Air Handling Units	NRM	$2,750
2	St. Albans	NY	Conduct Retro Commissioning	NRM	$2,200
2	St. Albans	NY	Install Locks, Doors, & Key Systems	NRM	$2,200
2	St. Albans	NY	Replace Walk in Boxes	NRM	$2,200
2	St. Albans	NY	Construct On-Site Cogeneration Plant	NRM	$1,980
2	St. Albans	NY	Consolidate Mental Health Services	NRM	$1,650
2	St. Albans	NY	Install Water Conservation Devices	NRM	$1,650
2	St. Albans	NY	Install Solar Panels	NRM	$1,650
2	St. Albans	NY	Replace Emergency Lighting	NRM	$1,650
2	St. Albans	NY	Replace Pipe Insulation	NRM	$1,320
2	St. Albans	NY	Install Variable Ventilation with CO2 Sensors	NRM	$1,320
2	St. Albans	NY	Replace Steam Traps	NRM	$1,320
2	St. Albans	NY	Install Window Air Condition Controls	NRM	$1,320
2	St. Albans	NY	Replace Chilled Water Pumps	NRM	$1,320
2	St. Albans	NY	Upgrade Exhaust Systems	NRM	$1,320
2	Syracuse	NY	Jefferson CBOC	Leases	$3,236
2	Syracuse	NY	Syracuse Admin Lease	Leases	$1,179
2	Syracuse	NY	Expand parking Lease	Leases	$250
2	Syracuse	NY	Expand Specialty care	Minor	$19,800
2	Syracuse	NY	Expand Diagnostics	Minor	$17,600
2	Syracuse	NY	Upgrade Research Wing Mechanicals and renovate 3rd floor for BSL3 Labs	NRM	$5,500
2	Syracuse	NY	Replace Air Handlers units #4, #6, #22, #34, and #36	NRM	$4,950
2	Syracuse	NY	Seismic Bracing of Mechanical Electrical and Plumbing Systems	NRM	$2,750
2	Syracuse	NY	Renovate 2nd Floor D Wing	NRM	$1,210
VHA	Canton	OH	Replacement Lease - VC241 Stark County, OH Vet Center	Leases	$438
10	Chillicothe	OH	Relocate Acute Medicine Inpatient Beds to Increase Privacy and Address Safety/Environmental Concerns	Minor	$12,000
10	Chillicothe	OH	Relocate Surgery Specialties and Outpatient Pharmacy	Minor	$11,000
10	Chillicothe	OH	Relocate Digestive/GI Clinic to Building 31	Minor	$10,100
10	Chillicothe	OH	Renovate Space for Psychosocial Residential Rehab Therapy Program, Building 26	Minor	$6,400
10	Chillicothe	OH	Renovate 1st & 2nd Floor B31 for Medical Admin Space	NRM	$10,000
10	Chillicothe	OH	Upgrade Electrical System to Address Remaining Deficiencies	NRM	$9,900
10	Chillicothe	OH	Initiate Compliance with the Physical Design Manual Assessment Report Dated October 2016	NRM	$9,900
10	Chillicothe	OH	Correct Energy Deficiencies and Increase Energy Conservation	NRM	$9,350
10	Chillicothe	OH	Renovate Space for Fully Integrated PACT and Primary Care Mental Health Program, Building 31	NRM	$9,000
10	Chillicothe	OH	Remove Remaining Accessible Hazardous Materials.	NRM	$2,200
10	Chillicothe	OH	Renovate Tank Room Project for Buildings 31, 30, 27, 26, 24	NRM	$1,650
10	Chillicothe	OH	Renovate Radiology to add Second CT Machine	NRM	$1,650
10	Cincinnati	OH	Consolidate & Expand Parking Leases	Leases	$1,525
10	Cincinnati	OH	Expand Community Outreach Lease	Leases	$1,054
10	Cincinnati	OH	Renew National Infectious Disease Lease	Leases	$806
10	Cincinnati	OH	Construct Inpatient Mental Health Clinic - 7th Floor	Minor	$9,400
10	Cincinnati	OH	Construct Research Addition Phase V	Minor	$9,278
10	Cincinnati	OH	Install Boilers at Cincinnati Campus	NRM	$19,600
10	Cincinnati	OH	Install Natural Gas Generator	NRM	$6,905

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
10	Cincinnati	OH	Upgrade Domiciliary Beds, Fort Thomas	NRM	$6,800
10	Cincinnati	OH	Expand Emergency Department	NRM	$6,475
10	Cincinnati	OH	Install New Radiator Control Valves	NRM	$4,800
10	Cincinnati	OH	Renovate 4th Floor for Specialty Care Services	NRM	$4,200
10	Cincinnati	OH	Correct Electrical Deficiencies Phase II	NRM	$4,092
10	Cincinnati	OH	Enhance Building Management System	NRM	$3,900
10	Cincinnati	OH	Correct FTD Deficiencies - FTD Interior Deficiencies	NRM	$3,900
10	Cincinnati	OH	Replace Site Sanitary and Storm Sewers	NRM	$3,667
10	Cincinnati	OH	Convert 4 East to Specialty Clinics	NRM	$3,630
10	Cincinnati	OH	Upgrades to Windows Fort Thomas	NRM	$3,360
10	Cincinnati	OH	Install Electronic Security Access System, Building 1	NRM	$3,000
10	Cincinnati	OH	Renovate Mental Health 7E	NRM	$2,760
10	Cincinnati	OH	Expand Logistics in the Basement and 2nd Floor	NRM	$2,500
10	Cincinnati	OH	Upgrades to Building 15	NRM	$2,220
10	Cincinnati	OH	Correct Parking Lot Issues	NRM	$2,150
10	Cincinnati	OH	Correct Deficiencies BLDG 3	NRM	$1,310
VBA	Cleveland	OH	Renew Lease at Cleveland RO3	Leases	$15
VBA	Cleveland	OH	Build out at Lease Renewal for Cincinnati VR&E Office	Minor	$283
10	Cleveland, Wade Park	OH	Create Health Care Center in Greater Akron-Canton Market	Major	$245,000
10	Cleveland, Wade Park	OH	Upgrade Secondary Electrical Distribution and Site Security	NRM	$4,900
10	Cleveland, Wade Park	OH	Improve Sub-basement Plumbing and Air Quality	NRM	$2,250
10	Cleveland, Wade Park	OH	Replace Perimeter Heating	NRM	$1,650
10	Cleveland, Wade Park	OH	Upgrade Lighting	NRM	$1,590
10	Cleveland, Wade Park	OH	Construct Drop Off Canopy	NRM	$1,430
10	Columbus ACC	OH	Construct Inpatient Addition	Major	$445,291
10	Columbus ACC	OH	Construct Second Parking Garage	Minor	$16,007
10	Columbus ACC	OH	Construct UCC and Clinic Space	Minor	$16,000
10	Columbus ACC	OH	Construct Behavioral Health and Endocrinology Addition	Minor	$14,500
10	Columbus ACC	OH	Install CHP Machine	NRM	$9,990
10	Columbus ACC	OH	Provide Redundant Power	NRM	$7,800
10	Columbus ACC	OH	Correct Mechanical Deficiencies	NRM	$5,050
10	Columbus ACC	OH	Construct Perimeter Fencing	NRM	$4,000
10	Columbus ACC	OH	Install Solar Panels	NRM	$3,330
10	Columbus ACC	OH	Correct Electrical Deficiencies.	NRM	$2,900

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
10	Columbus ACC	OH	Provide Uninterrupted Power to Surgery	NRM	$2,800
10	Columbus ACC	OH	Reconfigure 3rd Floor Engineering Area	NRM	$2,300
10	Columbus ACC	OH	Improve Site Stormwater System	NRM	$2,000
10	Columbus ACC	OH	Correct Sanitary Deficiencies	NRM	$1,150
10	Dayton	OH	Construct Medical Learning Center	Minor	$8,741
NCA	Dayton	OH	Expand Administration/Maintenance Building	Minor	$2,670
NCA	Dayton	OH	Mill and Pave Roads	Minor	$1,260
NCA	Ft. Gibson	OK	Gravesite Expansion (Columbarium)	Minor	$2,000
19	Oklahoma City	OK	Expand Ground Floor East for Clinics	Minor	$8,810
20	Portland	OR	Construct Parking Garage Vancouver Campus to Increase Patient Parking	Minor	$14,400
20	Portland	OR	Add Parking Decks to Existing Bldg 108 Parking Structure	Minor	$8,600
20	Portland	OR	Upgrade Vancouver Fire Alarm to Voice	NRM	$1,800
20	Roseburg	OR	Install Campus Perimeter Fence	NRM	$4,000
20	Roseburg	OR	Upgrade Information Technology Infrastructure	NRM	$3,300
20	Roseburg	OR	Abate Lead paint and Paint Building Exteriors Campus Wide	NRM	$2,800
20	Roseburg	OR	Upgrade Steam Generation	NRM	$1,950
20	White City	OR	Replace Expiring VA Clinic Lease in Grants Pass, OR	Leases	$500
20	White City	OR	Replace Seismically Deficient Clinical and Support Buildings with New Building, Bldg 301, White City, OR	Major	$98,800
20	White City	OR	Replace Seismically Deficient Clinical Support Buildings with New Building, Bldg 300, White City, OR	Major	$75,240
20	White City	OR	Replace Seismically Deficient Clinical and Support Buildings with New Building, Bldg 302, White City, OR	Major	$42,000
20	White City	OR	Corridor Enhancement, Beautification, and Accessibility Retrofit	NRM	$5,500
20	White City	OR	Replace Aged and deficient Steam Lines	NRM	$3,900
20	White City	OR	Upgrade Information Technology Infrastructure	NRM	$3,300
20	White City	OR	Replace Various Electrical Distribution Lines	NRM	$2,750
4	Altoona	PA	Correct PSDM Deficiencies	Major	$467,157
4	Altoona	PA	Correct Site Deficiencies	NRM	$10,736
4	Altoona	PA	Correct Safety Deficiencies	NRM	$4,657
4	Altoona	PA	Renovate Library, Classroom, Auditoriums, and Kitchen	NRM	$2,229
4	Altoona	PA	Renovate All of Sterile Processing Department	NRM	$1,886
4	Altoona	PA	Provide Security Upgrades, Phase 4	NRM	$1,546
4	Altoona	PA	Provide Security Upgrades, Phase 3	NRM	$1,357
4	Altoona	PA	Replace Non Fire and Non Smoke Doors	NRM	$1,283
4	Altoona	PA	Replace Above Ground Storage Tanks	NRM	$1,264
4	Butler	PA	Repurpose B-6 for Engineering and Other Functions	NRM	$5,500
4	Butler	PA	Disposition Building 46	NRM	$1,650
4	Coatesville	PA	Upgrade Physical Security	Major	$158,400
4	Coatesville	PA	Construct Addition to Community Living Center	Minor	$16,200
4	Coatesville	PA	Right Size Ancillary and Diagnostic Services	Minor	$16,000
4	Coatesville	PA	Right Size Primary Care	Minor	$16,000
4	Coatesville	PA	Right Size Specialty Care	Minor	$16,000

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
4	Coatesville	PA	Construct Geriatric Psychiatry Building	Minor	$15,400
4	Coatesville	PA	Install Physical Access Control System	NRM	$12,000
4	Coatesville	PA	Repair water penetration for buildings 1, 2, 3, 4, 5, 6, 38, 39	NRM	$8,500
4	Coatesville	PA	Repair Deficiency - Building 16	NRM	$6,000
4	Coatesville	PA	Replace Finishes Buildings 6, 7, 8, and 57	NRM	$5,450
4	Coatesville	PA	Repair Deficiency - Building 7	NRM	$5,000
4	Coatesville	PA	Upgrade Telecommunications Infrastructure	NRM	$3,850
4	Coatesville	PA	Replace Fan Coil Units - Buildings 4, 6, 7, 8 & 39	NRM	$3,300
4	Coatesville	PA	Renovate Bathrooms Oval 1	NRM	$3,000
4	Coatesville	PA	Replace HVAC System - Building 39	NRM	$2,900
4	Coatesville	PA	Repair Deficiency - Building 5	NRM	$2,800
4	Coatesville	PA	Renovate Bathrooms Oval 2	NRM	$2,500
4	Coatesville	PA	Repair and Paint Water Tower	NRM	$1,900
4	Coatesville	PA	Correct Deficiency - Fire Service Valves	NRM	$1,850
4	Coatesville	PA	Replace Outdated Underground Natural Gas Lines	NRM	$1,760
4	Coatesville	PA	Demolish Building 18	NRM	$1,210
4	Coatesville	PA	Door Retrofit	NRM	$1,200
4	Erie	PA	Crawford CBOC Lease	Leases	$1,000
4	Erie	PA	Construct Community Living Center Phase 2	Minor	$16,000
4	Erie	PA	Pharmacy Lab Expansion	Minor	$6,600
4	Erie	PA	Build Domiciliary Residence Building	Minor	$6,500
4	Erie	PA	Care in the Community and Consolidated Support Building	Minor	$6,270
4	Erie	PA	Renovate Second Floor for Specialty Care Services	Minor	$5,500
4	Erie	PA	Floor 1 West Expansion off UCC/Police	Minor	$5,500
4	Erie	PA	Renovate Legacy Mechanical Systems	NRM	$4,950
4	Erie	PA	Upgrade Plumbing, Replace hot water tanks	NRM	$4,400
4	Erie	PA	Upgrade Campus Storm Water System	NRM	$4,400
4	Erie	PA	Floor One Primary Care PACT Renovation	NRM	$4,400
4	Erie	PA	Repair and Replace Halls and Walls	NRM	$3,850
4	Erie	PA	Correct Electrical Deficiencies - New 480V Distribution Rooms	NRM	$3,850
4	Erie	PA	Renovate Physical Therapy	NRM	$3,190
4	Erie	PA	Renovate South Exterior Building	NRM	$2,200
4	Erie	PA	Cleanroom Storage Distribution Center Renovation	NRM	$2,200
4	Erie	PA	Replace Roofs Building 1	NRM	$1,650
4	Erie	PA	Upgrade Medical Gas and Comm Systems	NRM	$1,375
NCA	Indiantown Gap	PA	Gravesite Expansion	Major	$32,000
4	Lebanon	PA	South Central Pennsylvania Health Care Center	Leases	$31,000
4	Lebanon	PA	Physical Security Upgrades Phase 2	Major	$29,500
4	Lebanon	PA	Construct Dementia Community Living Center	Minor	$15,891
4	Lebanon	PA	Relocate Warehouse	Minor	$15,861
4	Lebanon	PA	Construct Hospice Unit	Minor	$15,537
4	Lebanon	PA	Construct CLC Step Down Unit	Minor	$15,489
4	Lebanon	PA	Primary Care Expansion Building 17	Minor	$12,562
4	Lebanon	PA	Relocate Public Entry to Emergency Department	Minor	$8,253
4	Lebanon	PA	Expand Pharmacy	Minor	$6,117
4	Lebanon	PA	Replace Chilled Water Lines Phase 1	NRM	$7,700
4	Lebanon	PA	Install Central Generator System	NRM	$6,700
4	Lebanon	PA	Replace Windows Phase 2	NRM	$3,550
VBA	Philadelphia	PA	Harrisburg VR&E Office	Leases	$45

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
4	Philadelphia	PA	Outpatient Dialysis Clinic Lease	Leases	$180
4	Philadelphia	PA	Community Resource and Referral Center	Leases	$115
VBA	Philadelphia	PA	Realign Philadelphia RO	Minor	$9,800
4	Philadelphia	PA	Construct Behavioral Health Outpatient Facility Ph I	Minor	$16,240
4	Philadelphia	PA	Administrative Wing Addition	Minor	$16,000
4	Philadelphia	PA	Modify Front Entrance Bldg 1	Minor	$13,800
NCA	Philadelphia	PA	Mini-minor Projects, Phase I	Minor	$1,000
NCA	Philadelphia	PA	Mini-minor Projects, Phase II	Minor	$1,000
OIT	Philadelphia	PA	Expand and Renew Data Center Electrical Support Systems	Minor	$9,600
OIT	Philadelphia	PA	Relocate Main Utility Power Feed	Minor	$7,000
OIT	Philadelphia	PA	Renew and Upgrade Data Center Mechanical Support Systems	Minor	$7,000
OIT	Philadelphia	PA	Renew Mechanical Infrastructure Support Systems	Minor	$1,600
OIT	Philadelphia	PA	Mechanical Infrastructure gap corrections	Minor	$975
OIT	Philadelphia	PA	Data Center Monitoring System Connectivity	Minor	$700
4	Philadelphia	PA	Convert 5&6 E/W to Single Patient Rooms	NRM	$8,840
4	Philadelphia	PA	Replace HVAC, Building 2 Phase 3	NRM	$4,400
4	Philadelphia	PA	Replace HVAC, Building 1 PhII	NRM	$2,999
4	Philadelphia	PA	Repave Roads and Sidewalks	NRM	$2,970
4	Philadelphia	PA	Replace HVAC, Building 1 Phase 1	NRM	$2,750
4	Philadelphia	PA	Upgrade Toilet & Locker Rooms PhII	NRM	$1,578
4	Philadelphia	PA	Renovate Bldg. 1 Second Floor	NRM	$1,078
VBA	Pittsburgh	PA	Pittsburgh RO Parking	Leases	$11
VBA	Pittsburgh	PA	Build out at new lease	Minor	$8,000
4	Pittsburgh (HZ)	PA	Upgrade Chillers and Chilled Water Distribution System	NRM	$4,400
4	Pittsburgh (HZ)	PA	Replace Roof and Repair Exterior on Building 52	NRM	$4,400
4	Pittsburgh (UD)	PA	Renew HERL Lease	Leases	$996
4	Pittsburgh (UD)	PA	Construct Service Building Annex and Ambulance Ramp	Minor	$15,900
4	Pittsburgh (UD)	PA	Modernize Inpatient Wards	NRM	$9,900
4	Pittsburgh (UD)	PA	Renovate Building One - 9 West and 10 West for Architectural, Mechanical and Electrical Deficiencies	NRM	$7,700
4	Pittsburgh (UD)	PA	Renovate Nutrition and Food Service Area	NRM	$4,950
4	Pittsburgh (UD)	PA	Renovate Emergency Department Access	NRM	$4,400
NCA	Washington Crossing	PA	Gravesite Expansion	Major	$50,000
4	Wilkes Barre	PA	Upgrade Physical Security	Major	$330,000
4	Wilkes Barre	PA	CLC Addition for Modernization	Minor	$16,000
4	Wilkes Barre	PA	Renovate for Hospice Unit	Minor	$14,300
4	Wilkes Barre	PA	Upgrade Information Technology Facilities	NRM	$11,000
4	Wilkes Barre	PA	Upgrade Operating Rooms	NRM	$6,600
4	Wilkes Barre	PA	Renovate 2 - South Nuclear Medicine	NRM	$5,500
4	Wilkes Barre	PA	Upgrade Exterior Facade	NRM	$5,500
4	Wilkes Barre	PA	Replace Exterior Windows, Phase 2	NRM	$5,500
4	Wilkes Barre	PA	Replace Building 1 Main Electrical Distribution Risers	NRM	$5,500

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
4	Wilkes Barre	PA	Renovate Pharmacy	NRM	$4,950
4	Wilkes Barre	PA	Perform Exterior Tuck Pointing, Phase 1	NRM	$4,400
4	Wilkes Barre	PA	Renovate 2 North Radiology	NRM	$3,850
4	Wilkes Barre	PA	Upgrade Parking Lot - Paving and Restoration	NRM	$3,300
4	Wilkes Barre	PA	Upgrade Storm Water System	NRM	$3,300
4	Wilkes Barre	PA	Renovate 3 East- Cardiology and Pulm	NRM	$3,300
4	Wilkes Barre	PA	Upgrade Halls and Walls Building 1	NRM	$3,300
4	Wilkes Barre	PA	Renovate Supply Processing Service	NRM	$3,300
4	Wilkes Barre	PA	Replace Asphalt Pavement	NRM	$3,080
4	Wilkes Barre	PA	Upgrade Sanitary Piping	NRM	$2,750
4	Wilkes Barre	PA	Renovate Dental	NRM	$2,750
4	Wilkes Barre	PA	Construct Combined Heat Power	NRM	$2,750
4	Wilkes Barre	PA	Improve Building Energy Consumption Management System	NRM	$2,640
4	Wilkes Barre	PA	Conduct Study for Life Safety	NRM	$1,870
4	Wilkes Barre	PA	Replace Concrete Walkways	NRM	$1,650
8	San Juan	PR	Relocate the Community Living Center	Leases	$30,747
8	San Juan	PR	Lease Space for the San Juan Rehabilitation Center	Leases	$17,142
8	San Juan	PR	Correct Seismic Deficiencies at Building 19	Major	$36,059
8	San Juan	PR	Renovate and Expand Emergency Department Ancillary Support Functions	Minor	$6,493
8	San Juan	PR	Construct Energy Center	NRM	$20,000
8	San Juan	PR	Renovate Primary Care and Collocate Mental Health Clinics	NRM	$10,300
8	San Juan	PR	Consolidate Pharmacy at Building 19 Basement	NRM	$7,986
8	San Juan	PR	Separate Life Safety and Critical Branches at Main Hospital	NRM	$4,085
8	San Juan	PR	Repair Concrete Encasement at Structural Steel Columns	NRM	$3,600
8	San Juan	PR	Replace Secondary Electrical Power Distribution at Main Bldg	NRM	$3,385
8	San Juan	PR	Relocate Psychiatric Intensive Care to Building 19	NRM	$3,035
8	San Juan	PR	Construct AMA Bridge	NRM	$2,700
8	San Juan	PR	Improve Roads and Sidewalks at Main Campus	NRM	$2,420
8	San Juan	PR	Replace HVAC Insulation at main Building's Basement and Second Floor Roof	NRM	$2,100
8	San Juan	PR	Install New PV System at Old Parking Garage	NRM	$2,000
8	San Juan	PR	Install Photovoltaic Panels System at Phase V Parking Garage	NRM	$2,000
8	San Juan	PR	Install Wind Turbines at Admin Building Roof	NRM	$2,000
8	San Juan	PR	Upgrade Fire Alarm System at South Bed Tower	NRM	$1,500
1	Providence	RI	Relocate and Expand SPS and Distribution	Minor	$12,020
1	Providence	RI	Extend Central Chiller Plant Water to Roof Top Units Phase 2	NRM	$4,000
1	Providence	RI	Replace Underground Telecommunications Network Cabling Campus-wide	NRM	$2,400
1	Providence	RI	Upgrade Cooling System in Wing 1D of Building 1	NRM	$2,200
NCA	Beaufort	SC	Gravesite Expansion (PPC, IGC, Columbarium)	Minor	$6,000
NCA	Beaufort	SC	Renovate Lodge, Maintenance Building, and Restroom	Minor	$3,840
NCA	Beaufort	SC	Replace Irrigation System	Minor	$2,000
7	Charleston	SC	Primary Care CBOC Georgetown Lease	Leases	$1,800
7	Charleston	SC	Dental & Specialty Clinic - Savannah	Leases	$850
7	Charleston	SC	Replace Trident CBOC	Leases	$720
7	Charleston	SC	Replacement lease for Charleston Parking Lease 3	Leases	$355
7	Charleston	SC	Construct Second Parking Deck	Minor	$19,000
7	Charleston	SC	Demolish Myrtle Beach Site for Seismic Compliant Dental Clinic	Minor	$17,693

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
7	Charleston	SC	Correct Seismic Deficiencies by Replacing 2nd Floor Modular 'Buildings' for Clinical Support Services, Phase I	Minor	$13,014
7	Charleston	SC	Charlie/Delta Street & Elevated Road Deck Replacement	NRM	$9,997
7	Charleston	SC	Mitigate 5th Floor HVAC Deficiencies	NRM	$9,901
7	Charleston	SC	Lighting Energy Project	NRM	$9,900
7	Charleston	SC	Renovate Common and Support Areas Phase 3	NRM	$9,900
7	Charleston	SC	Backfill 2nd Floor DD building with Cancer Center	NRM	$9,900
7	Charleston	SC	Backfill 3BB area with Dialysis Center	NRM	$9,900
7	Charleston	SC	Backfill 2nd Floor Specialty Clinic with Radiology Expansion	NRM	$9,500
7	Charleston	SC	Backfill 3BS with Women's Center	NRM	$9,500
7	Charleston	SC	Renovate Electrical/Telephone Closets Phase 2	NRM	$9,005
7	Charleston	SC	Replace Roofs Phase 2	NRM	$9,000
7	Charleston	SC	Correct Architectural Accessibility Deficiencies, Phase 1	NRM	$9,000
7	Charleston	SC	Correct Electrical Deficiencies Phase 4	NRM	$8,806
7	Charleston	SC	Delta to Bravo Street & Elevated Road Deck Replacement	NRM	$8,800
7	Charleston	SC	Update Mechanical Systems Phase 2	NRM	$8,800
7	Charleston	SC	Renovate Common and Support Areas Phase 4	NRM	$8,800
7	Charleston	SC	Roof Replacement Phase 3	NRM	$8,300
7	Charleston	SC	Improve Accessibility, Replace Finishes and Sprinkler Components	NRM	$7,700
7	Charleston	SC	Backfill Dialysis with ACC	NRM	$7,700
7	Charleston	SC	Backfill Primary Care and Dental Areas for Administration	NRM	$6,820
7	Charleston	SC	Replace HVAC Systems 20 and 21	NRM	$6,600
7	Charleston	SC	Consolidate Sterile/Clean Supply Storage Closets and Procedure Rooms	NRM	$6,034
7	Charleston	SC	Renovate Vacated 3rd Floor for Specialty Clinic	NRM	$5,500
7	Charleston	SC	Renovate Vacated 4th Floor for Specialty Clinic	NRM	$5,500
7	Charleston	SC	Move Prosthetics & Rehab Medicine to first floor DD Building	NRM	$5,500
7	Charleston	SC	Correct GU HVAC System Deficiencies	NRM	$5,086
7	Charleston	SC	Backfill 1A Specialty Space with Administrative Services	NRM	$5,000
7	Charleston	SC	Correct Security Issues Phase 2	NRM	$4,950
7	Charleston	SC	Backfill Travel, Cashier's Cage and Specialty Exam Rooms with expanded Emergency Department	NRM	$4,400
7	Charleston	SC	Backfill GU with SPS Addition	NRM	$4,400
7	Charleston	SC	Implement Water Conservation Measures	NRM	$2,200
7	Charleston	SC	Air Emissions Retrofit/Study	NRM	$2,150
7	Charleston	SC	Implement Retro-commisioning-2	NRM	$1,200
7	Columbia	SC	Home Based Health Care Clinic	Leases	$97
VBA	Columbia	SC	Renew Lease at Greenville VR&E Office	Leases	$40
7	Columbia	SC	Construct Diagnostic, Treatment, and Clinic	Major	$113,000
7	Columbia	SC	Construct West Campus Parking Garage to Enhance Access to Foundational Service Buildings, Improve Patient Safety, and Correct Parking Deficiencies	Minor	$16,201
7	Columbia	SC	Construct Right-sized Dental Building to Address Space Needs and Access Issues	Minor	$16,099
7	Columbia	SC	New CLC Addition	Minor	$16,000
7	Columbia	SC	Swing Space to Improve Clinical Space	Minor	$7,700
7	Columbia	SC	Linear Accelerator	NRM	$9,900
7	Columbia	SC	Renovate OR Suite Phase II	NRM	$9,200
7	Columbia	SC	Renovate Ambulatory Surgery Suite in Building 100	NRM	$8,800

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
7	Columbia	SC	Correct Patient Privacy Issues on Inpatient Mental Health Ward, Building 106	NRM	$6,246
7	Columbia	SC	Renovate Canteen in Building 100	NRM	$5,960
7	Columbia	SC	Renovate Research Laboratories Phase III	NRM	$5,802
7	Columbia	SC	Renovate 4W Medical Beds to all privates	NRM	$5,546
7	Columbia	SC	Repair and Resurface Parking Lots	NRM	$5,500
7	Columbia	SC	Repair and Renovation of Roads	NRM	$4,400
7	Columbia	SC	Correct Failing Water Infiltration from Building Exteriors	NRM	$4,400
7	Columbia	SC	Replace Interior Finishes in Building 100 and 100A	NRM	$4,400
7	Columbia	SC	Expansion of Pathology - Phase II	NRM	$4,211
7	Columbia	SC	Correct Building 9 Seismic Deficiencies	NRM	$4,077
7	Columbia	SC	Renovate Research Laboratories Phase II	NRM	$3,630
7	Columbia	SC	Correct ADA Violations in Multiple Locations	NRM	$3,520
7	Columbia	SC	Renovate Building 103 2nd floor for CLC	NRM	$3,479
7	Columbia	SC	Correct Building 100 VAV Box Deficiencies	NRM	$3,025
7	Columbia	SC	Correct Building 5 HVAC and Control Deficiencies	NRM	$2,800
7	Columbia	SC	Expansion of Pathology - Phase I	NRM	$2,444
7	Columbia	SC	Waterproof and Renovate Building 22 Basement	NRM	$2,073
7	Columbia	SC	Correct Secondary Distribution Electrical Issues	NRM	$1,760
7	Columbia	SC	Address Legionella Issues on Potable Water Systems	NRM	$1,760
7	Columbia	SC	Correct Asbestos Effected Areas on Campus	NRM	$1,650
7	Columbia	SC	Replace Chiller and Chilled Water Risers	NRM	$1,650
7	Columbia	SC	Renovate Vacated Eye Clinic for Specialty Care in Building 100A - 2nd Floor	NRM	$1,542
7	Columbia	SC	Correct Air Handling Equipment and Controls in Building 6 and 22	NRM	$1,320
7	Columbia	SC	Provide Site Prep for Fisher House Donation on Campus	NRM	$1,115
7	Columbia	SC	Expand Imaging	NRM	$1,086
7	Columbia	SC	Replace Hot Water Piping, Building 100 and 103	NRM	$1,000
NCA	Florence	SC	Gravesite Expansion (PPC)	Minor	$3,000
NCA	Florence	SC	Demolish/Replace Admin/Maint. Building	Minor	$2,390
VHA	Greenville	SC	VC316 Greenville, SC Vet Center	Leases	$130
NCA	Black Hills	SD	Renovate/Repair Roadways	Minor	$1,588
23	Fort Meade	SD	Renovate Community Living Center E-Ward and Support Functions	Minor	$17,600
23	Fort Meade	SD	Renovate Primary Care for PACT Model	Minor	$9,110
23	Fort Meade	SD	Relocate for Ancillary Services & Improve Front Entrance	Minor	$7,250
23	Fort Meade	SD	Upgrade Fire Alarm System	NRM	$3,300
23	Fort Meade	SD	Install Wind Turbine Generator	NRM	$2,000
23	Hot Springs	SD	Lease Residential Rehabilitation Treatment Program	Leases	$6,730
23	Hot Springs	SD	Renovate Bldg 12 for CBOC in Hot Springs	NRM	$9,871
23	Hot Springs	SD	Install Biomass Boiler	NRM	$8,736
23	Hot Springs	SD	Renovate Building 5 to Modernize the Domiciliary	NRM	$5,390
23	Hot Springs	SD	Upgrade Building Systems in Building 8	NRM	$2,750
23	Hot Springs	SD	Upgrade Hot Springs Dom and Bldg 53 Generators	NRM	$1,650
23	Hot Springs	SD	Install New Building Management System	NRM	$1,232
23	Hot Springs	SD	Retrofit Hot Springs Exterior Bldgs and Site Lighting to LED	NRM	$1,000
VBA	Sioux Falls	SD	Renovate and Realign Sioux Falls RO	Minor	$2,406
23	Sioux Falls	SD	Buyout of Integrative Health Modular Building	Minor	$377

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
23	Sioux Falls	SD	Renovate Building 1 for Inpatient Mental Health and Administrative Services	NRM	$8,831
23	Sioux Falls	SD	Expand Chiller Plant	NRM	$5,410
23	Sioux Falls	SD	Upgrade Electrical Systems Campus Wide	NRM	$3,300
23	Sioux Falls	SD	Improve Outdoor Patient Areas	NRM	$1,650
NCA	Chattanooga	TN	Gravesite Expansion (Chattanooga Replacement)	Major	$60,000
NCA	Chattanooga	TN	Install Irrigation System	Minor	$8,930
NCA	Chattanooga	TN	Replace Roads & Storm Drainage	Minor	$1,200
9	Memphis	TN	Construct Building 7 SCI/D 2nd Floor Addition Ward 2E	Minor	$18,370
9	Memphis	TN	Construct Parking Garage on East Lot	Minor	$17,939
9	Memphis	TN	Construct Building 7 SCI/D Outpatient Addition South	Minor	$11,536
9	Memphis	TN	Construct Building 5 Addition for Dialysis and OEF/OIF/OND	Minor	$11,312
9	Memphis	TN	Construct Building 7 SCI/D 2nd Floor Addition Ward 2W	Minor	$11,275
9	Memphis	TN	Expand and Renovate Building 10 Engineering	Minor	$4,000
9	Memphis	TN	Renovate Building 7 SCI/D 1st Floor Ward 1E	NRM	$12,100
9	Memphis	TN	Replace Building 1 HVAC Induction Units and Piping	NRM	$9,350
9	Memphis	TN	Renovate Building 1A 3rd Floor to Relocate SPS	NRM	$7,172
9	Memphis	TN	Install Facility Emergency Water Supply System	NRM	$7,000
9	Memphis	TN	Renovate Building 1A 2nd Floor Cardio/Pulmonary	NRM	$6,600
9	Memphis	TN	Renovate Building 1A 5th Floor Ward 5G Medical Beds for Patient Privacy	NRM	$5,429
9	Memphis	TN	Renovate Building 1A 3rd Floor to Relocate ICU	NRM	$5,381
9	Memphis	TN	Renovate Building 1A 4th Floor Ward 4E Surgical Beds for Patient Privacy	NRM	$5,339
9	Memphis	TN	Renovate Building 1A 5th Floor Ward 5E Medical Beds for Patient Privacy	NRM	$5,170
9	Memphis	TN	Correct Building 1 Inpatient Mental Health and RRTP Deficiencies	NRM	$5,041
9	Memphis	TN	Repave and Correct Parking Lot and Drive Deficiencies	NRM	$4,274
9	Memphis	TN	Correct Building Automated Controls	NRM	$4,043
9	Memphis	TN	Refinish Building 1A Bed Tower Halls and Walls	NRM	$3,960
9	Memphis	TN	Clean, Repair, and Protect Building Exteriors	NRM	$3,300
9	Memphis	TN	Renovate Building 1A 3rd Floor to Relocate GI Lab	NRM	$3,275
9	Memphis	TN	Renovate Building 1A Ground Floor Logistics Supply	NRM	$2,860
9	Memphis	TN	Renovate Building 1 2nd Floor for Medical Center Director	NRM	$2,728
9	Memphis	TN	Install Solar Panels on Roof	NRM	$2,310
9	Memphis	TN	Install Solar Panel Canopies	NRM	$1,760
9	Memphis	TN	Install Energy Efficient Motors and Equipment	NRM	$1,661
9	Memphis	TN	Install Energy Saving Lighting Controls and Fixtures	NRM	$1,540
9	Mountain Home	TN	Expansion Lease Knoxville Health Care Center	Leases	$35,000
9	Mountain Home	TN	Campbell County CBOC	Leases	$75
9	Mountain Home	TN	Dannie Carr Veterans Outpatient Clinic	Leases	$45
NCA	Mountain Home	TN	Irrigate Approx. 40 Acres	Minor	$3,360
9	Mountain Home	TN	Correct Historic Admin Building 34 Environment & Condition Deficiencies	NRM	$9,350

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
9	Mountain Home	TN	Renovate and Expand Acute Inpatient Mental Health Ward Wing E2 Building 200	NRM	$8,175
9	Mountain Home	TN	Renovate Building 200 Atrium	NRM	$3,762
9	Mountain Home	TN	Correct Telecommunication Data Room Security Issues	NRM	$3,350
9	Murfreesboro	TN	Renew Chattanooga CBOC Annex Lease 626GO	Leases	$300
9	Murfreesboro	TN	Renew McMinn County CBOC Lease	Leases	$200
9	Murfreesboro	TN	Construct Outpatient Mental Health Center	Minor	$17,894
9	Murfreesboro	TN	Construct Community Living Centers North	Minor	$17,650
9	Murfreesboro	TN	Construct Community Living Centers (Small House Concept)	Minor	$17,599
9	Murfreesboro	TN	Upgrade Critical Environments	NRM	$9,117
9	Murfreesboro	TN	Replace Chilled Water Loop	NRM	$8,371
9	Murfreesboro	TN	Renovate Building 6	NRM	$6,776
9	Murfreesboro	TN	Upgrade Building 6	NRM	$6,776
9	Murfreesboro	TN	Upgrade Electrical Distribution	NRM	$6,165
9	Murfreesboro	TN	Upgrade Mechanical Room Systems	NRM	$5,645
9	Murfreesboro	TN	Upgrade Steam Distribution System	NRM	$5,152
9	Murfreesboro	TN	Upgrade Elevators	NRM	$4,031
9	Murfreesboro	TN	Upgrade Chilled Water System and Air Handling Units	NRM	$2,175
9	Murfreesboro	TN	Repair Retainage Walls and Dredge Lake	NRM	$2,156
9	Murfreesboro	TN	Repair Structural Damage	NRM	$2,103
9	Murfreesboro	TN	Upgrade Lighting and HVAC Controls	NRM	$1,500
9	Murfreesboro	TN	Upgrade Electric Motors	NRM	$1,232
9	Nashville	TN	Construct Clarksville VA Clinic Major Lease	Leases	$37,456
9	Nashville	TN	Renew Compensation & Pension Clinic Lease in Nashville	Leases	$202
9	Nashville	TN	Renew Clarksville Dental Lease	Leases	$160
VBA	Nashville	TN	Renew Lease at Suite 760 Highwood	Leases	$330
VBA	Nashville	TN	Renew Lease at Nashville VR&E Office	Leases	$96
VBA	Nashville	TN	Renew Lease at Nashville RO 5	Leases	$16
9	Nashville	TN	Renovate Specialty Clinics and Infusion Center	Minor	$12,497
NCA	Nashville	TN	Install Irrigation System	Minor	$5,580
NCA	Nashville	TN	Replace Roads, Curbs and Repair Storm Drainage	Minor	$3,500
NCA	Nashville	TN	Correct Cemetery Condition Deficiencies	Minor	$1,400
VBA	Nashville	TN	Build out a Nashville RO FB lease	Minor	$9,924
9	Nashville	TN	Install Solar Photovoltaic System, Combined Heat and Power Plant (CHP) and Ground Source Heat Pump (GSHP) systems	NRM	$13,300
9	Nashville	TN	Renovate Ward 2 North	NRM	$11,760
9	Nashville	TN	Renovate Ward 2G	NRM	$11,760
9	Nashville	TN	Renovate Ward 3 North	NRM	$10,981
9	Nashville	TN	Renovate Transplant Center of Excellence	NRM	$9,800
9	Nashville	TN	Renovate Imaging Center	NRM	$9,363
9	Nashville	TN	Upgrade Critical Environments	NRM	$9,072
9	Nashville	TN	Renovate Cardiology	NRM	$8,960
9	Nashville	TN	Upgrade Mechanical Room Systems I	NRM	$5,520
9	Nashville	TN	Upgrade Mech Room Systems III	NRM	$4,970
9	Nashville	TN	Upgrade Mech Room Systems II	NRM	$4,196
9	Nashville	TN	Upgrade ACRE Chiller and Cooling Tower	NRM	$3,980
9	Nashville	TN	Upgrade Chilled Water System and Air Handling Units	NRM	$2,016
9	Nashville	TN	Upgrade Electric Motors	NRM	$1,232

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
17	Amarillo	TX	Replace Dalhart Clinic Lease	Leases	$230
17	Amarillo	TX	Replace Childress Clinic Lease	Leases	$125
17	Amarillo	TX	Reduce Building Foot Prints for Building 8, 9, 10 & 45	Minor	$17,963
17	Amarillo	TX	Expand Community Living Center for Patient Privacy	Minor	$8,900
17	Amarillo	TX	Construct CLC Cottages for Patient Privacy	Minor	$8,800
17	Amarillo	TX	Construct CLC Cottages for Patient Privacy III	Minor	$8,800
17	Amarillo	TX	Construct Radiology Clinic	Minor	$2,200
17	Amarillo	TX	Construct HVAC Tower Bldg. 1	NRM	$5,550
17	Amarillo	TX	Correct Non Structural Components & Equipment-Seismic Building 28	NRM	$3,300
17	Amarillo	TX	Repair Heating Systems Building 1	NRM	$2,400
17	Amarillo	TX	Replace Plumbing Fixtures	NRM	$2,200
17	Amarillo	TX	Study and Correct Electrical Distribution	NRM	$2,060
17	Amarillo	TX	Correct Non Structural Components & Equipment-Seismic Building 1	NRM	$1,980
17	Amarillo	TX	Renovate Campus IDF Closets	NRM	$1,550
17	Amarillo	TX	Improve Patient Wayfinding - Veteran Centered Care	NRM	$1,530
17	Amarillo	TX	Upgrade Electrical Services	NRM	$1,500
17	Amarillo	TX	Correct Exterior Facade and Foundations	NRM	$1,122
OIT	Austin	TX	Remodel Entire Building Office Space	Minor	$8,000
OIT	Austin	TX	Install Roof Top energy efficient cooling system for AITC Computer Room	Minor	$2,300
OIT	Austin	TX	Electrical Infrastructure gap corrections	Minor	$2,200
OIT	Austin	TX	Replace end of life Circuit Breaker Panel in Room 160E	Minor	$2,000
OIT	Austin	TX	Hot/Cold Isle Containment in Computer Room	Minor	$2,000
OIT	Austin	TX	Mechanical Infrastructure gap corrections	Minor	$1,900
OIT	Austin	TX	Safety Infrastructure gap corrections	Minor	$1,700
OIT	Austin	TX	Replace Data Center Wet Sprinkler System	Minor	$1,500
OIT	Austin	TX	Replace end of life Generator switchgear for power system A	Minor	$1,000
OIT	Austin	TX	Install redundant A/C units in Telecom Rooms (12 Rooms)	Minor	$1,000
OIT	Austin	TX	Install transfer switches for each computer room air conditioning unit	Minor	$625
OIT	Austin	TX	Reconfigure Office Space for teleworking, desk sharing, hoteling, etc.	Minor	$495
OIT	Austin	TX	Command Center Remodel	Minor	$450
OIT	Austin	TX	Replace Cafeteria Flooring	Minor	$250
17	Big Spring	TX	Upgrade Security Systems	NRM	$4,500
17	Big Spring	TX	Renovate Radiology and Cardiopulmonary	NRM	$4,100
17	Big Spring	TX	Correct ADA Deficiencies in Parking lot	NRM	$3,250
17	Big Spring	TX	Correct Ventilation Deficiencies	NRM	$1,250
17	Bonham	TX	Correct Bonham Community Living Center Patient Privacy	Major	$49,500
17	Bonham	TX	Build new Outpatient Mental Health facility and parking.	Minor	$16,500
17	Bonham	TX	Construct New Diagnostic/Ancillary Care Center	Minor	$9,900
17	Bonham	TX	Construct Pharmacy	Minor	$8,850
17	Bonham	TX	Install Solar Cell System	NRM	$9,700
17	Bonham	TX	Install CoGeneration System	NRM	$9,400
17	Bonham	TX	Replace HVAC discrepancies Bldg.2, 3 and Connecting Corridors	NRM	$4,400
17	Bonham	TX	Pave Gravel lot	NRM	$2,750
17	Bonham	TX	Upgrade Bonham Information Technologies Systems	NRM	$2,420

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
17	Bonham	TX	Renovate East Wing of 3rd Floor of Building 2	NRM	$2,321
17	Bonham	TX	Renovate West Wing Bldg. 2 4th Floor	NRM	$2,321
17	Bonham	TX	Renovate East Wing 4th floor Bldg. 2	NRM	$2,321
17	Bonham	TX	Correct Bonham Structural Deficiencies in Building 4	NRM	$2,200
17	Bonham	TX	Complete Continuous Commissioning Ph 2	NRM	$2,000
17	Bonham	TX	Complete Energy Efficiency Project	NRM	$1,909
17	Bonham	TX	Replace Mechanical Systems in Building 1,2, & 11	NRM	$1,650
17	Bonham	TX	Correct Bonham Electrical Deficiencies on the entire campus (Site & Buildings 1-29)	NRM	$1,380
17	Bonham	TX	Establish Bonham Site Perimeter Security	NRM	$1,350
17	Bonham	TX	Complete Repairs Ph 1 Continuous Commissioning	NRM	$1,260
17	Bonham	TX	Bonham Equipment Site Prep	NRM	$1,100
17	Dallas	TX	Construct Clinical Expansion for Mental Health	Major	$157,243
17	Dallas	TX	Build Space for Ambulatory Specialty Care and Women's Clinic	Minor	$15,671
17	Dallas	TX	Construct SCI/D Activities of Daily Living Space and Renovate SCI/D PM&R and Chapel Area	Minor	$14,300
17	Dallas	TX	Renovate IT Equipment Serving Outlying Campus Buildings and Relocate IT Personnel	Minor	$12,308
17	Dallas	TX	Improve Dallas Community Living Center Bed Room Compliance	Minor	$9,999
17	Dallas	TX	Expand Dallas Ambulatory Care and Relocate Existing Clinics	Minor	$9,773
17	Dallas	TX	Relocate Admin Svcs Off Campus (Fiscal, Business Office, Human Resources) Decompress Clinics	Minor	$9,500
17	Dallas	TX	Construct Cancer Center	Minor	$9,409
17	Dallas	TX	Renovate Space for Ancillary/Diagnostic	NRM	$8,800
17	Dallas	TX	Renovate for Acute special program	NRM	$7,062
17	Dallas	TX	Renovate Dallas Research Buildings 3 & 43	NRM	$6,423
17	Dallas	TX	Renovate Building 1 for Support Space	NRM	$4,950
17	Dallas	TX	Provide Continuous Commissioning Phase 2, IT and Security Work	NRM	$4,700
17	Dallas	TX	Renovate Clinics 1 thru 4 on 1st floor of 2J (Halls and Walls)	NRM	$4,400
17	Dallas	TX	Renovate Dallas Medical Inpatient Nursing Unit for Privacy 5B	NRM	$3,850
17	Dallas	TX	Renovate Orthopedics	NRM	$3,850
17	Dallas	TX	Provide Repairs for Continuous Commissioning	NRM	$3,336
17	Dallas	TX	Renovate Dental Building 2	NRM	$3,300
17	Dallas	TX	Retrofit Light Fixtures	NRM	$2,884
17	Dallas	TX	Renovate Pain Clinic	NRM	$2,750
17	Dallas	TX	Upgrade Finishes for Bldg. 60 and 74	NRM	$2,700
17	Dallas	TX	Improve Water Efficiency - 2	NRM	$2,500
17	Dallas	TX	Renovate Dallas Pharmacy	NRM	$2,400
17	Dallas	TX	Correct Electrical Deficiencies	NRM	$2,200
17	Dallas	TX	Replace Windows in 2J	NRM	$2,200
17	Dallas	TX	Improve VAMC Campus Site Security	NRM	$2,000
17	Dallas	TX	Construct SCI/D Activities Daily Living Space	NRM	$1,870
17	Dallas	TX	Site Preparation Dallas Equipment	NRM	$1,500
17	Dallas	TX	Provide Economizer Controls for Continuous Ventilation Air Handling Units	NRM	$1,350
17	Dallas	TX	Install Solar Heating for Swimming Pool	NRM	$1,328
17	Dallas	TX	Retrofit Street Lights	NRM	$1,200

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
17	Dallas	TX	Renovate Dallas Employee Staff Areas	NRM	$1,200
17	Dallas	TX	Renovate Primary Care Clinics 5 thru 9 to Support Expanding Specialty Care	NRM	$1,100
17	Dallas	TX	Cleburne Contract	Other	$1,100
17	El Paso	TX	Construct New Health Care Center	Major	$405,230
17	Harlingen	TX	Water Conservation for Interior and Exterior	NRM	$1,650
16	Houston	TX	Construct Ambulatory Care Center	Major	$295,000
16	Houston	TX	Vertical Expansion for Expansion of Private Patient Beds	Minor	$19,548
16	Houston	TX	Expand Parking Garage A	Minor	$18,881
NCA	Houston	TX	Pond Dredging and Storm Drainage Maintenance	Minor	$4,280
VBA	Houston	TX	Complete the Realignment and Renovation of the Houston RO	Minor	$8,393
VBA	Houston	TX	Replace Sagging Ceiling Tile at Houston RO	Minor	$2,365
VBA	Houston	TX	Replace Worn Carpet in Houston RO	Minor	$1,700
16	Houston	TX	Renovate Nursing Unit 4C to Private Beds	NRM	$7,364
17	Kerrville	TX	Install CoGeneration System for Electricity and Heating - Renewable Technology	NRM	$6,300
17	Kerrville	TX	Remodel Building 96 for Short Stay Unit	NRM	$5,291
17	Kerrville	TX	Remodel Building 11 Basement, 5th, and 7th Floor Clinics, Halls and Walls	NRM	$4,620
17	Kerrville	TX	Expand Solar Photovoltaic System	NRM	$3,500
17	Kerrville	TX	Repair/Waterproof Exterior Facade and Replace Windows on Buildings 1, 2, 11,18, 20, 22, 29, 47, and 96	NRM	$2,970
17	Kerrville	TX	Replace Sprinkler Piping Buildings 11 and 96	NRM	$2,600
17	Kerrville	TX	Remodel CLC/Dementia Unit:1st Floor Building 96 – Kerrville	NRM	$2,530
17	Kerrville	TX	Replace Air Handling Unit Hot and Chilled Water Piping	NRM	$2,200
17	Kerrville	TX	Replace Building 11 Plumbing Infrastructure and Repair Site Sanitary Sewer Distribution System	NRM	$1,981
17	Kerrville	TX	Repair Building 11 Facade and Replace Windows	NRM	$1,980
17	Kerrville	TX	Replace Boilers	NRM	$1,689
17	Kerrville	TX	Remodel 3rd Floor Clinics, Offices, Halls and Walls	NRM	$1,540
VHA	Lancaster	TX	Construct Dallas CMOP	Minor	$19,575
17	San Antonio	TX	Lease Research Space	Leases	$3,840
17	San Antonio	TX	Lease Primary Care/Mental Health Space	Leases	$900
17	San Antonio	TX	Lease Primary Care/Mental Health Space North	Leases	$900
17	San Antonio	TX	Lease Space for new C&P Clinic	Leases	$900
17	San Antonio	TX	Replace San Antonio Hospital	Major	$1,034,101
17	San Antonio	TX	Construct 6G: Cardiac Center of Excellence	Major	$29,219
17	San Antonio	TX	Replacement Domiciliary and SARRTP Facility	Minor	$18,611
17	San Antonio	TX	Construct 3rd Level for GEC Expansion	Minor	$14,400
17	San Antonio	TX	Construct 5G: Construct Administration/Professional Services Addition	Minor	$9,900
17	San Antonio	TX	Renovate Spinal Cord Injury Unit	Minor	$8,870
17	San Antonio	TX	Replace 2nd Floor Roof	NRM	$6,389
17	San Antonio	TX	Replace Air Handle Units Ph VIII	NRM	$6,000
17	San Antonio	TX	Install a Sky Bridge	NRM	$5,500
17	San Antonio	TX	Renovate First Floor for Expansion of Mental Health and Diagnostic Services	NRM	$4,699
17	San Antonio	TX	Renovate Corridor GL,1st and 2nd Floors	NRM	$3,459
17	San Antonio	TX	Renovate 2C for Surgical Step-Down Unit	NRM	$3,080
17	San Antonio	TX	Expand Solar Photovoltaic Carports	NRM	$3,050

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
17	San Antonio	TX	Replace Sanitary Lines	NRM	$2,750
17	San Antonio	TX	Upgrade ceilings, lights and casework in research.	NRM	$1,540
17	San Antonio	TX	Renovate Corridors 3rd through 7th floor	NRM	$1,511
17	San Antonio	TX	Replace MRI	NRM	$1,450
17	San Antonio	TX	Renovate Auditorium for Clinical Space	NRM	$1,308
17	San Antonio	TX	Replace Keying System	NRM	$1,000
17	Temple	TX	Construct Outpatient Clinic	Major	$258,618
17	Temple	TX	Build Education Facility, Auditorium, and Library, Phase II	Minor	$10,814
17	Temple	TX	Build Education Facility, Auditorium, and Library, Phase I	Minor	$10,299
17	Temple	TX	Construct Endoscopy/Colonoscopy Suite	Minor	$9,900
17	Temple	TX	Build Staff Parking Garage	Minor	$9,800
17	Temple	TX	Construct Part Two Visitor Parking Garage	Minor	$8,250
17	Temple	TX	Relocate Lab Bldg 163	Minor	$6,658
17	Temple	TX	Construct MRI Suite Addition	Minor	$6,253
17	Temple	TX	Construct New Central Plant	NRM	$20,000
17	Temple	TX	Relocate Inpatient Pharmacy	NRM	$9,800
17	Temple	TX	Install CoGen System - 2	NRM	$7,500
17	Temple	TX	Expand Sterile Processing Service	NRM	$6,435
17	Temple	TX	Expand Primary Care Bldg 163 South (Lab)	NRM	$5,238
17	Temple	TX	Surgery Suite Renovation	NRM	$2,750
17	Temple	TX	Solar Hot Water System by Building 58	NRM	$2,750
17	Temple	TX	Retro- Commissioning Project	NRM	$2,248
17	Temple	TX	Correct Architectural Deficiencies Building 163	NRM	$2,200
17	Temple	TX	Replace Plumbing Systems Building 163	NRM	$2,200
17	Temple	TX	Replace Underground Diesel Tanks - Temple and Waco	NRM	$2,100
17	Temple	TX	Replace Building 163 Chillers	NRM	$2,100
17	Temple	TX	Upgrade Site Water Piping	NRM	$2,000
17	Temple	TX	Install Chillers at Bldg 205	NRM	$1,800
17	Temple	TX	Correct Architectural Deficiencies Building 202	NRM	$1,751
17	Temple	TX	Construct Employee Parking North	NRM	$1,544
17	Temple	TX	Install Geothermal Heat Pump Building 203	NRM	$1,525
17	Temple	TX	Replace Chillers at Building 203	NRM	$1,495
17	Temple	TX	Provide Onsite Water Storage	NRM	$1,419
17	Temple	TX	Complete Lighting Retrofit and Guiding Principles Certification	NRM	$1,240
17	Temple	TX	Construct Visitor Parking West	NRM	$1,152
17	Temple	TX	Construct New PACU	NRM	$1,023
17	Temple	TX	Install Solar Thermal System	NRM	$1,000
VBA	Waco	TX	Renew Lease at Tyler VR&E Office	Leases	$35
17	Waco	TX	Solar Hot Water System	NRM	$2,200
17	Waco	TX	Renovate Outpatient Clinic/Lab Clinic Bldg 4	NRM	$7,927
17	Waco	TX	Upgrade Mental Health Environment Bldg 94 (Nurses Stations)	NRM	$5,443
17	Waco	TX	Renovate Bldg 11 Community Living Center	NRM	$5,309
17	Waco	TX	Replace Medium Voltage Transformers	NRM	$3,850
17	Waco	TX	Relocate IT to Bldg 92	NRM	$3,250
17	Waco	TX	Correct Access Deficiencies on Waco Campus	NRM	$2,640
17	Waco	TX	Retro-Commissioning Project	NRM	$2,216
17	Waco	TX	Solar Hot Water System	NRM	$2,200
17	Waco	TX	Install Solar Hot water system at building 226 to generate hot water for the laundry.	NRM	$2,200
17	Waco	TX	Convert Chapel to Learning Center	NRM	$1,812

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
17	Waco	TX	Consolidate Engineering Bldg 17	NRM	$1,570
17	Waco	TX	Install Low Flow Water Devices	NRM	$1,400
17	Waco	TX	Complete Continuous Commissioning HVAC Repairs and Guiding Principles Certification	NRM	$1,350
17	Waco	TX	Install Utility Meters	NRM	$1,320
17	Waco	TX	Security Gap Correction	NRM	$1,150
17	Waco	TX	Replace Exterior Lighting With More Efficient LED Lamps	NRM	$1,100
VBA	Salt Lake City	UT	Renew Lease at Ogden VR&E Office	Leases	$8
19	Salt Lake City	UT	Gastrointestinal Service Modernization	Minor	$19,923
VBA	Salt Lake City	UT	Renovate and Realign Salt Lake City RB2 to eRO Model	Minor	$9,900
VBA	Salt Lake City	UT	Renovate and Realign Salt Lake City RO	Minor	$7,091
VBA	Salt Lake City	UT	Refresh Salt Lake City RB2	Minor	$3,300
NCA	Fort Harrison	VA	Renovate Historic Site Buildings and Infrastructure	Minor	$2,160
NCA	Glendale	VA	Renovation of Site/Buildings	Minor	$2,250
6	Hampton	VA	Standup Small House Model Community Living Center	Leases	$20,547
6	Hampton	VA	Standup Southside Ambulatory Care Surgery Center	Leases	$18,356
6	Hampton	VA	Construct SCI Expansion	Minor	$15,989
6	Hampton	VA	Renovate and Expand Domiciliary	Minor	$15,988
6	Hampton	VA	Construct Parking Garage	Minor	$15,572
6	Hampton	VA	Renovate and Expand On-Campus CLC	Minor	$15,428
6	Hampton	VA	Improve Patient Arrival into the Medical Center	Minor	$9,185
6	Hampton	VA	Improve Wayfinding by Renovating/Adding Connecting Corridors and Common Space	Minor	$8,955
6	Hampton	VA	Install Photovoltaic Electric Generation Panels	NRM	$16,500
6	Hampton	VA	Upgrade Steam Distribution System Mechanical Rooms in Various Buildings	NRM	$6,710
6	Hampton	VA	Renovate Building 110 Second Floor	NRM	$5,652
6	Hampton	VA	Abate Asbestos Across Medical Center Campus, Phase II	NRM	$5,610
6	Hampton	VA	Correct Physical Security Requirements Phase 2	NRM	$4,114
6	Hampton	VA	Renovate Building 110 Ground Floor	NRM	$3,261
6	Hampton	VA	Correct Water System Distribution Problems	NRM	$3,080
6	Hampton	VA	Correct FCA Deficiencies in HVAC Systems	NRM	$1,760
6	Hampton	VA	Investigate Feasibility of Using the James River as Heat Sink	NRM	$1,501
6	Hampton	VA	Remove Chapel and Building 43 from Central Steam System	NRM	$1,232
6	Richmond	VA	Increase Rehabilitation Access	Leases	$1,150
6	Richmond	VA	Expand Access for Primary Care and Mental Health Services to High Acuity Veterans	Minor	$15,995
6	Richmond	VA	Construct Spinal Cord Injury Long Term Care Center	Minor	$15,988
6	Richmond	VA	Increase Parking Access & Safety	Minor	$15,986
6	Richmond	VA	Improve Surgical Patient Privacy	Minor	$15,966
6	Richmond	VA	Construct Community Outreach Center	Minor	$15,966
6	Richmond	VA	Expand Women's Health/Primary Care Center	Minor	$15,966
6	Richmond	VA	Expand Cancer Center Access	Minor	$15,947
6	Richmond	VA	Construct Community Center for Research, Education and Innovation	Minor	$15,940
6	Richmond	VA	Create Private Rooms for Community Living Center	Minor	$15,887
6	Richmond	VA	Improve Safety & Access Spinal Cord Injury Primary Care Center	Minor	$15,858
6	Richmond	VA	Construct Specialty Care Addition	Minor	$15,849
6	Richmond	VA	Improve Access to Primary Care	Minor	$15,846

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
6	Richmond	VA	Construct Spirituality Center	Minor	$15,210
6	Richmond	VA	Expand and Improve Imaging Access	Minor	$9,990
6	Richmond	VA	Construct Private Beds	Minor	$9,990
6	Richmond	VA	Construct Spinal Cord Injury Care Center	Minor	$9,968
6	Richmond	VA	Construct Ambulatory Care Building	Minor	$9,950
6	Richmond	VA	Enhance Community Living Center/Hospice	Minor	$9,860
6	Richmond	VA	Enhance Research Efficiency	Minor	$9,782
6	Richmond	VA	Increase Access to Physical Medicine and Rehabilitation Services	Minor	$9,774
6	Richmond	VA	Enhance Cardiovascular Center	Minor	$9,720
6	Richmond	VA	Construct Support Space	Minor	$9,020
6	Richmond	VA	Construct Access Support Space	Minor	$8,525
6	Richmond	VA	Build Administrative / Clinical Building	Minor	$8,250
NCA	Richmond	VA	Renovate/Repair Historic Site and Buildings	Minor	$3,010
6	Richmond	VA	Renovate for Ambulatory Specialty Care Center	NRM	$9,350
6	Richmond	VA	Renovate 5th Floor	NRM	$8,800
6	Richmond	VA	Renovate 2nd floor Clinics	NRM	$6,820
6	Richmond	VA	Renovate Spinal Cord Injury for Privacy Phase II	NRM	$6,820
6	Richmond	VA	Renovate 1N	NRM	$6,600
6	Richmond	VA	Upgrade Primary Switchgear	NRM	$5,800
6	Richmond	VA	Renovate Community Living Center, Building 500, 1st floor	NRM	$5,600
6	Richmond	VA	Parking Lot PV Enhancement	NRM	$5,500
6	Richmond	VA	Upgrade Exterior Site Water and Sewer System	NRM	$4,070
6	Richmond	VA	Replace HVAC Systems-AC40, AC44, AC47-Second Floor	NRM	$3,600
6	Richmond	VA	Upgrade Redundant Electrical Service	NRM	$3,135
6	Richmond	VA	Replace Environmental Control Systems	NRM	$3,000
6	Richmond	VA	Upgrade Boiler Plant Systems	NRM	$2,700
6	Richmond	VA	Replace HVAC Systems AC4, AC8 & AC9, Building 500	NRM	$2,500
6	Richmond	VA	Elevator Improvements	NRM	$2,500
6	Richmond	VA	Renovate 1B	NRM	$2,475
6	Richmond	VA	Upgrade Administrative Spaces	NRM	$2,200
6	Richmond	VA	Replace HVAC Systems-AC19 & AC23	NRM	$2,055
6	Richmond	VA	Replace Cooling Systems	NRM	$1,940
6	Richmond	VA	Replace Air Handlers SCI	NRM	$1,790
6	Richmond	VA	Exterior Site Improvements	NRM	$1,760
6	Richmond	VA	Replace Roofs and Flashing	NRM	$1,445
6	Richmond	VA	Install Daylight & Occupancy Controls	NRM	$1,400
6	Richmond	VA	Replace Air Handling System Primary Care	NRM	$1,390
6	Richmond	VA	Upgrade Air Handling Systems - AC19	NRM	$1,290
6	Salem	VA	Expand Staunton CBOC and Lease	Leases	$490
6	Salem	VA	Construct Parking Garage	Minor	$15,908
6	Salem	VA	Renovate and Expand Palliative Care	Minor	$15,366
6	Salem	VA	Renovate Community Living Center	Minor	$11,518
6	Salem	VA	Expand and Relocate Prosthetics	Minor	$6,975
6	Salem	VA	Expand / Renovate Women's Health Clinic	Minor	$5,306
6	Salem	VA	Construct Secure Records Storage Facility	Minor	$4,125
6	Salem	VA	Renovate for Specialty Care	NRM	$11,265
6	Salem	VA	Replace Primary Transformers	NRM	$10,791
6	Salem	VA	Refurbish Floors Halls & Walls Phase II	NRM	$9,717
6	Salem	VA	Repair Architectural Elements	NRM	$8,263

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
6	Salem	VA	Repair Administration Building	NRM	$7,297
6	Salem	VA	Expand/Renovate Radiology and Nuclear Medicine	NRM	$7,273
6	Salem	VA	Correct Sanitary Waste and Administrative Building Plumbing Deficiencies	NRM	$6,755
6	Salem	VA	Restore Paving and Access Routes Phase I	NRM	$6,610
6	Salem	VA	Correct Electrical Study Deficiencies Phase II	NRM	$6,558
6	Salem	VA	Abate Environmental Hazards Phase I	NRM	$5,187
6	Salem	VA	Replace Building Automation System	NRM	$5,135
6	Salem	VA	Replace Windows	NRM	$4,590
6	Salem	VA	Renovate for IT Improvements	NRM	$4,531
6	Salem	VA	Correct Stormwater Drainage Deficiencies	NRM	$4,459
6	Salem	VA	Repair Steam Distribution System	NRM	$4,329
6	Salem	VA	Renovate Building 19 for Student Housing	NRM	$3,081
6	Salem	VA	Upgrade/ Replace HVAC Systems Phase IV	NRM	$2,200
6	Salem	VA	Upgrade Replace HVAC Systems Phase III	NRM	$2,200
NCA	Seven Pines	VA	Renovate Historic Buildings and Correct Deficiencies	Minor	$3,750
NCA	Winchester	VA	Renovate Historic Buildings and Correct Deficiencies	Minor	$4,523
1	White River Junction	VT	Replace Lease for Newport VT CBOC	Leases	$338
1	White River Junction	VT	Construct Expandable Parking Deck Campus	Minor	$11,000
1	White River Junction	VT	Construct Veterans Health & Wellness Center, Campus	NRM	$19,000
1	White River Junction	VT	Replace Main Hospital Electrical Switchgear, Campus	NRM	$6,600
1	White River Junction	VT	Construct Solar Panel Arrays & Electrical Infrastructure, Campus	NRM	$5,500
1	White River Junction	VT	Repair & Replace Roof, Hospital Building 1	NRM	$3,850
1	White River Junction	VT	Repair Historical Brick Exteriors, Campus	NRM	$3,300
1	White River Junction	VT	Renovate Research Lab Deficiencies, Research/Education, B 44	NRM	$3,300
1	White River Junction	VT	Demolish T-58, T-59, T-60 Buildings & Construct Replacement Office Building 68	NRM	$3,100
1	White River Junction	VT	Demolish T-61, T-62, T-63 Buildings & Construct Replacement Office Building 69	NRM	$3,100
1	White River Junction	VT	Repair & Replace Paving and Drainage Structures (Phase 2), Campus	NRM	$2,200
1	White River Junction	VT	Repair & Replace HVAC and Energy Efficiency Upgrades, Historical Business Office Building 4	NRM	$1,100
1	White River Junction	VT	Repair Facility Life Safety Deficiencies, Campus	NRM	$1,100
1	White River Junction	VT	Construct Protection for Facility Assets, Campus	NRM	$1,100
1	White River Junction	VT	Repair & Upgrade HVAC Controls, Campus	NRM	$1,100
1	White River Junction	VT	Repair & Replace HVAC & Upgrade Energy Efficiency, Building 6	NRM	$1,100

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
1	White River Junction	VT	Repair & Replace HVAC & Upgrade Energy Efficiency, Building 7	NRM	$1,100
1	White River Junction	VT	Repair & Replace HVAC & Upgrade Energy Efficiency, Building 9	NRM	$1,100
1	White River Junction	VT	Repair & Replace Roof (Phase 2), Hospital Building 31	NRM	$1,050
20	American Lake	WA	Construct Secondary Road and Reconstruct Veterans Drive	NRM	$9,900
20	American Lake	WA	Correct Campus-Wide Physical Security and Safety Deficiencies	NRM	$9,900
20	American Lake	WA	Abate Lead Paint	NRM	$8,085
20	American Lake	WA	Campus Wide Exterior Design Template and FCA Corrections	NRM	$8,000
20	American Lake	WA	Renovate Building 5 for Women's Residential Program	NRM	$5,800
20	American Lake	WA	Replace Sanitary Sewer	NRM	$3,800
20	American Lake	WA	Renovate Building 200 Community Living Center Dining Facility	NRM	$3,685
20	American Lake	WA	Upgrade HVAC Control System	NRM	$3,501
20	American Lake	WA	Asbestos Abatement	NRM	$3,300
20	American Lake	WA	Install Continuous Monitoring System	NRM	$3,000
20	American Lake	WA	Provide Back-Up Fuel Source for Building 200 and 4	NRM	$2,334
20	American Lake	WA	Construct a Vehicle and Equipment Wash Rack	NRM	$2,310
20	American Lake	WA	Construct Road Extension to Improve Safety and Access to Community Living Center	NRM	$2,200
20	American Lake	WA	Renovate Building 148 for Social Work and Homeless Programs	NRM	$1,430
20	American Lake	WA	Abate and remove Non-Friable Asbestos Floor Tile and Replace with New	NRM	$1,100
20	Seattle	WA	New VA Clinic Lease for Other Outpatient Services in King County, WA	Leases	$9,300
VBA	Seattle	WA	Renew Lease at Seattle SeaTac	Leases	$2,200
VBA	Seattle	WA	Renew Lease at Seattle RO3	Leases	$33
20	Seattle	WA	Replace Building 1 and Construct New and Renovate Existing Space to Expand Medical Specialty Services	Major	$822,000
20	Seattle	WA	Construct Parking Garage	Major	$49,500
20	Seattle	WA	Enclose Bldg 100 Rooftop to Construct New Space for GI Endoscopy Unit	Minor	$18,000
20	Seattle	WA	Replace Secondary Electrical Distribution Panels For Seattle Building 100	NRM	$14,300
20	Seattle	WA	Renovate BLD 100 2 East for Inpatient Medicine	NRM	$9,350
20	Seattle	WA	Correct Seattle Campus-Wide Physical Security and Safety Deficiencies	NRM	$9,000
20	Seattle	WA	Renovate BLD 100 5 East for GI	NRM	$9,000

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
20	Seattle	WA	Renovate BLD 100 6 West for BMTU	NRM	$8,525
20	Seattle	WA	Renovate East Clinic Project	NRM	$8,352
20	Seattle	WA	Install Continuous Water Monitoring System - Seattle	NRM	$4,900
20	Seattle	WA	Replace Seattle Boilers	NRM	$4,330
20	Seattle	WA	Upgrade and Clean Exterior Envelope Building 1	NRM	$3,900
20	Seattle	WA	Campus Pedestrian Handicap Access Site Improvements	NRM	$2,750
20	Seattle	WA	Replace Air Handler AC-33	NRM	$2,700
20	Seattle	WA	Upgrade Sanitary Sewer Infrastructure	NRM	$2,520
20	Seattle	WA	Asbestos Abatement Seattle Division	NRM	$1,964
20	Spokane	WA	Replace Expiring VA Clinic Lease in Couer D'Alene, ID	Leases	$21,139
20	Spokane	WA	Replace and Expand Building 27 for Specialty Care	Major	$38,500
20	Spokane	WA	Construct Diagnostic Imaging Building	Minor	$19,800
20	Spokane	WA	Construct Rehab Medicine/Prosthetics/Data Center Addition	Minor	$18,810
20	Spokane	WA	Construct New Support Services Facility	Minor	$17,995
20	Spokane	WA	Primary Care Expansion	Minor	$17,600
20	Spokane	WA	Renovate and Expand Community Living Center (CLC)	Minor	$17,000
20	Spokane	WA	Construct New Parking Structure	Minor	$16,500
20	Spokane	WA	Replace Dental Building	Minor	$15,950
20	Spokane	WA	Renovate and Expand Urgent Care Clinic	Minor	$14,600
20	Spokane	WA	Replace Buildings 5, 6 and 6a	Minor	$8,800
20	Spokane	WA	Renovate and Expand Building 2 Laundry	Minor	$2,100
20	Spokane	WA	Replace Campus Sewer Mains and Install Campus Storm Water Mains	NRM	$27,500
20	Spokane	WA	Replace Windows	NRM	$11,214
20	Spokane	WA	Construct Chiller Plant	NRM	$11,100
20	Spokane	WA	Upgrades and Remediation of Plumbing System	NRM	$10,340
20	Spokane	WA	Renovate Building 2 Infrastructure and Public Safety	NRM	$7,700
20	Spokane	WA	Install Continuous, PSDM Compliant Fencing and Gate with Screening Areas	NRM	$6,600
20	Spokane	WA	Correct SPS Project Deficiencies	NRM	$2,200
20	Spokane	WA	Roof Replacements Campus Wide	NRM	$2,100
20	Spokane	WA	Upgrade AHU-09 and AHU-15 Mechanical Systems	NRM	$2,100
20	Spokane	WA	Update Bldg 1 Interior Wayfinding	NRM	$1,650
20	Spokane	WA	Repair Site Pavement and Drainage	NRM	$1,650
20	Spokane	WA	Connect Redundant Power System Campuswide	NRM	$1,650
20	Spokane	WA	Retro-Commissioning Assessment and Upgrades	NRM	$1,650
NCA	Tahoma	WA	Gravesite Expansion and Cemetery Improvements	Major	$30,000
20	Walla Walla	WA	Construct Multi-Story Parking Garage	Minor	$16,400
20	Walla Walla	WA	Expand B143 Behavioral Health Department	Minor	$5,730
20	Walla Walla	WA	Construct Dedicated IT Building	Minor	$5,220
20	Walla Walla	WA	Replace and Improve Campus Sanitary Mains	NRM	$7,700
20	Walla Walla	WA	Upgrade Information Technology Infrastructure	NRM	$3,300
20	Walla Walla	WA	Renovate Building 66	NRM	$2,660
20	Walla Walla	WA	Replace Roofs, Facade Updates, and Exterior Improvements on Multiple Buildings and Structures	NRM	$2,500
20	Walla Walla	WA	Install Renewable energy system	NRM	$2,200
12	Madison	WI	Expand Psycho-Social Recovery Program	Leases	$1,127
12	Madison	WI	Expand Baraboo CBOC	Leases	$1,109
12	Madison	WI	Expand Freeport CBOC	Leases	$924
12	Madison	WI	MHICM Waupaca Lease	Leases	$423

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
12	Madison	WI	Relocate Inpatient Mental Health	Minor	$16,000
12	Madison	WI	Expand Outpatient Clinics and Consolidate Administration	Minor	$16,000
12	Madison	WI	Expand ED/Admissions	Minor	$13,300
12	Madison	WI	Expand and Renovate Building 12	Minor	$10,900
12	Madison	WI	Add Emergency Generator Systems	NRM	$8,000
12	Madison	WI	Renovate Outpatient Clinics	NRM	$7,600
12	Madison	WI	Construct Security Fencing and Entrance Controls	NRM	$4,000
12	Madison	WI	Renovate Radiology	NRM	$3,990
12	Madison	WI	Renovate 6B	NRM	$3,660
12	Madison	WI	Renovate 6A Ambulatory Care	NRM	$3,254
12	Madison	WI	Improve Accessibility	NRM	$2,900
12	Madison	WI	Tuckpoint Main Hospital	NRM	$2,500
12	Madison	WI	Renovate IRMS	NRM	$2,100
12	Madison	WI	Renovate Medical Services	NRM	$1,550
12	Madison	WI	Consolidate Administrative Support	NRM	$1,225
12	Madison	WI	Upgrade IT HVAC and Electrical	NRM	$1,100
12	Madison	WI	Replace Flooring/Wall covering	NRM	$1,100
12	Milwaukee	WI	Cleveland Outpatient Clinic	Leases	$2,531
12	Milwaukee	WI	Milwaukee CRRC	Leases	$1,200
12	Milwaukee	WI	Correct Substandard Operating Rooms and OR Suite	Minor	$15,400
12	Milwaukee	WI	Demolish Quonset Huts and Construct a Consolidated FM Storage Facility	Minor	$4,139
12	Milwaukee	WI	Renovate 6AS for Direct Patient Care	NRM	$6,600
12	Milwaukee	WI	Renovate 70 A Wing and 70 D Wing for Research Consolidation	NRM	$5,862
12	Milwaukee	WI	Upgrade Electrical Systems Area 2	NRM	$4,991
12	Milwaukee	WI	Upgrade Electrical Systems Area 3	NRM	$4,583
12	Milwaukee	WI	Renovate 7AS for Flexible Procedural and Clinic Space	NRM	$4,494
12	Milwaukee	WI	Correct Inpatient Acute Privacy Substandard Beds 3C, 4C, 5C, 7C, and 144	NRM	$4,031
12	Milwaukee	WI	Recondition Elevators Bldg 111 Main Hospital	NRM	$3,960
12	Milwaukee	WI	Install West and North Campus Perimeter Security Fencing and Access Gates	NRM	$3,531
12	Milwaukee	WI	Correct Deficiencies and Renovate Building 5	NRM	$3,439
12	Milwaukee	WI	Correct Deficiencies Building 123 Mental Health	NRM	$3,037
12	Milwaukee	WI	Upgrade Structural Systems for Building 7	NRM	$2,853
12	Milwaukee	WI	Install East Campus South Perimeter Security Fencing and Access Gates	NRM	$2,393
12	Milwaukee	WI	Reconstruct East Side Drainage Canal	NRM	$2,117
12	Milwaukee	WI	Renovate Basement for Nuclear Medicine Relocation	NRM	$2,084
12	Milwaukee	WI	Correct Campus Wide Lightning Protection	NRM	$1,861
12	Milwaukee	WI	Install South Campus Perimeter Security Fencing and Access Gates	NRM	$1,631
12	Tomah	WI	Lease Clark County Outpatient Clinic	Leases	$280
12	Tomah	WI	Expand and Consolidate Pharmacy - Building 406	Minor	$9,776
12	Tomah	WI	Expand Community Living Center and Renovate for Privacy, Building 402 Second Floor	Minor	$8,690
12	Tomah	WI	Expand Building 32 for Information Technology	Minor	$6,649
12	Tomah	WI	Expand Inpatient Mental Health Building 403	Minor	$5,751

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
12	Tomah	WI	Expand and Renovate Community Living Center, Building 402 Third Floor	Minor	$5,218
12	Tomah	WI	Construct Recycling Center Building 403	Minor	$3,007
12	Tomah	WI	Renovate Inpatient Beds for Privacy Building 400	NRM	$9,900
12	Tomah	WI	Construct Emergency Power Generation Plant	NRM	$7,700
12	Tomah	WI	Replace Air Handling Equipment and Upgrade Electrical Building 408	NRM	$7,050
12	Tomah	WI	Renovate Specialty Care Building 400	NRM	$5,500
12	Tomah	WI	Replace Air Handling Equipment and Update Electrical Building 407	NRM	$5,500
12	Tomah	WI	Replace Air Handling Units Serving Bldg 402, 2nd and 3rd Flrs	NRM	$4,950
12	Tomah	WI	Update Elevators Buildings 407 and 408	NRM	$4,350
12	Tomah	WI	Renovate Second Floor Building 408	NRM	$3,850
12	Tomah	WI	Install Elevator and Exit Stairwell - Building 23	NRM	$3,850
12	Tomah	WI	Renovate North end of Building 406, 2nd Floor	NRM	$2,640
12	Tomah	WI	Expand Whole Health - Building 407	NRM	$1,760
12	Tomah	WI	Improve Energy Efficiency	NRM	$1,650
12	Tomah	WI	Replace Windows - Building 407	NRM	$1,100
5	Beckley	WV	Construct Community Living Center Facilities, Phase 2	Minor	$13,310
5	Beckley	WV	Construct Clinical Care Addition	Minor	$10,450
5	Beckley	WV	Construct Mental Health Outpatient Facility	Minor	$9,570
5	Beckley	WV	Construct Wind Mills	NRM	$9,500
5	Beckley	WV	Remodel Hall and Walls Building 1	NRM	$8,800
5	Beckley	WV	Correct Access Control Issues for Physical Security	NRM	$6,600
5	Beckley	WV	Corrections to Facility Condition Assessment Electrical, Architectural and Structural	NRM	$3,300
5	Beckley	WV	Corrections to access, architectural, mechanical systems	NRM	$2,700
5	Beckley	WV	Seal and Clean Concrete Surfaces	NRM	$1,000
5	Clarksburg	WV	Replace Building 5 and Expand Behavioral Health	Minor	$10,450
5	Clarksburg	WV	Construct Third Floor Addition to Expand the Operating Room Suite	Minor	$8,250
5	Clarksburg	WV	Demolish the Fiscal Trailer and Construct a New Multi-Use Building	Minor	$6,050
5	Clarksburg	WV	Construct Addition to Expand Primary Care and Add CT Scanner	Minor	$5,225
5	Clarksburg	WV	Correct Electrical Distribution System and Replace Equipment	NRM	$4,950
5	Clarksburg	WV	Renovate Cardiac Treatment Areas and Audiology Clinic	NRM	$1,320
5	Clarksburg	WV	Repair Heating, Ventilation, and Air Conditioning Deficiencies	NRM	$1,231
VBA	Huntington	WV	Renew Lease at Huntington RO	Leases	$2,850
5	Huntington	WV	Construct Alternative Therapy Building	Minor	$8,498
5	Huntington	WV	Improve Seismic Conditions	NRM	$7,975
5	Huntington	WV	Improve SPS Temperature and Humidity Control	NRM	$6,513
5	Huntington	WV	Replace #1 Boiler and Replace Fuel Tanks	NRM	$4,200
5	Huntington	WV	Refurbish and Replace Site Water Lines	NRM	$3,241
5	Huntington	WV	Upgrade Laundry Plant	NRM	$2,526
5	Huntington	WV	Upgrade Storm Water System	NRM	$2,200
5	Martinsburg	WV	Renew/Expand Cumberland CBOC	Leases	$2,125
5	Martinsburg	WV	Renew Petersburg CBOC Lease	Leases	$400
5	Martinsburg	WV	Renew Franklin CBOC Lease	Leases	$145
5	Martinsburg	WV	Construct New Domiciliary Building	Major	$33,660

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
OIT	Martinsburg	WV	Electrical Infrastructure gap corrections	Minor	$2,745
OIT	Martinsburg	WV	Perimeter vehicle restraint system	Minor	$850
OIT	Martinsburg	WV	Lobby Remodel	Minor	$550
OIT	Martinsburg	WV	Computer Room Economizer HVAC System	Minor	$450
5	Martinsburg	WV	Construct New Eye Clinic	Minor	$18,180
5	Martinsburg	WV	Construct Ambulatory Mental Health Building	Minor	$17,750
5	Martinsburg	WV	Expand Ft. Detrick Community Based Outpatient Clinic	Minor	$15,708
5	Martinsburg	WV	Construct Two 12-Bed Community Living Center Residences (West Wing)	Minor	$15,608
5	Martinsburg	WV	Renovate/Expand Domiciliary Pod D	Minor	$13,460
5	Martinsburg	WV	Construct 47-Bed Domiciliary Pod	Minor	$13,300
5	Martinsburg	WV	Construct Domiciliary Support Bldg, Renovate Vacated Space for Admin, Demolish Vacant Bldg	Minor	$11,680
5	Martinsburg	WV	Construct Parking Garage	Minor	$9,500
5	Martinsburg	WV	Construct Consolidated Support Building	Minor	$9,350
5	Martinsburg	WV	Construct Dementia Building Addition	Minor	$7,996
5	Martinsburg	WV	Construct Surgical Specialty Care Addition	Minor	$7,993
5	Martinsburg	WV	Construct Drive Through Pharmacy	Minor	$6,620
5	Martinsburg	WV	Construct Addition to Community Living Center, East Wing	Minor	$6,092
5	Martinsburg	WV	Construct Sim Lab	Minor	$5,222
5	Martinsburg	WV	Expand Consolidated Administrative Support Building	Minor	$3,978
5	Martinsburg	WV	Demolish and replace Baker House, Building 21	Minor	$2,951
5	Martinsburg	WV	Construct Isolation Suite for Emergency Department	Minor	$1,122
5	Martinsburg	WV	Renovate/Expand Rehab Medicine	NRM	$9,820
5	Martinsburg	WV	Renovate Acute Inpatient Psychiatric Unit on 4A	NRM	$8,500
5	Martinsburg	WV	Renovate 501C Community Living Center Support Core	NRM	$7,645
5	Martinsburg	WV	Renovate Community Living Center 501B	NRM	$7,546
5	Martinsburg	WV	Renovate/Expand Pathology & Laboratory and Replace AC-17	NRM	$7,330
5	Martinsburg	WV	Renovate existing surgery suite/OR	NRM	$6,732
5	Martinsburg	WV	Upgrade potable cold water distribution system for prevention of Legionella, Phase 3	NRM	$6,732
5	Martinsburg	WV	Renovate Unit 3C, Building 500, for Medical Specialties	NRM	$6,700
5	Martinsburg	WV	Renovate Primary Care Clinics for PACT compliance, building 500, First Floor	NRM	$6,330
5	Martinsburg	WV	Correct Campus Physical Security Deficiencies, phase 2	NRM	$6,140
5	Martinsburg	WV	Replace/Upgrade HVAC Mixing Boxes and Controls, Bldg 500	NRM	$5,750
5	Martinsburg	WV	Renovate/Expand Vacated Eye Clinic for Primary Care and add New Air Handling Unit 17A	NRM	$5,633
5	Martinsburg	WV	Relocate/Expand Prosthetics to 4C	NRM	$4,730
5	Martinsburg	WV	Correct Electrical Deficiencies, Bldg 500 Phase 2	NRM	$4,660
5	Martinsburg	WV	Renovate Bldg 500 Outpatient Addition for Radiology	NRM	$4,340
5	Martinsburg	WV	Upgrade Medical Gas System	NRM	$3,660
5	Martinsburg	WV	Correct Access Deficiencies, Entrance to Main Hospital, B 500	NRM	$3,410
5	Martinsburg	WV	Renovate former Police Service space for Women's Clinic expansion, Phase 2	NRM	$3,410
5	Martinsburg	WV	Upgrade HVAC Systems, Building 217	NRM	$3,162
5	Martinsburg	WV	Install Ground Source Heat Pumps in 300 Row Buildings	NRM	$2,942
5	Martinsburg	WV	Install Ground Source Heat Pumps in 400 Row Buildings	NRM	$2,900
5	Martinsburg	WV	Upgrade potable water distribution system for prevention of legionella, Phase 2	NRM	$2,750

VISN/ Admin	Station/ Cemetery	ST	Potential Future/Outyear Projects Project Name – Short Description	Project Type	Total Est. Cost ($000s)
5	Martinsburg	WV	Reseal exterior Windows and Install energy film, Building 500	NRM	$2,448
5	Martinsburg	WV	Renovate Vacated Audiology for Pharmacy and Speech Pathology	NRM	$1,970
5	Martinsburg	WV	Replace Air Handling Unit-2 in building 500-501 Connecting Corridor	NRM	$1,573
5	Martinsburg	WV	Renovate Section of Vacated Warehouse space for Police Service	NRM	$1,530
5	Martinsburg	WV	Install Solar Photo-Voltaic Array	NRM	$1,500
5	Martinsburg	WV	Repair/Upgrade Steam Lines to 400 Row Buildings	NRM	$1,275
5	Martinsburg	WV	Repair/Upgrade Steam Lines, Boiler Plant to 300 Row Bldgs	NRM	$1,225
5	Martinsburg	WV	Repair/Upgrade Critical Utilities - Main Steam Distribution - West campus	NRM	$1,200
5	Martinsburg	WV	Relocate Helipad	NRM	$1,200
5	Martinsburg	WV	Replace/Upgrade HVAC System, AC-15, and ancillary systems	NRM	$1,121
5	Martinsburg	WV	Repair/Upgrade Critical Utilities - Chill Water - East Campus	NRM	$1,017
5	Martinsburg	WV	Repair/Upgrade Critical Utilities - Chill Water - West campus	NRM	$1,017
19	Cheyenne	WY	Construct Physical Therapy & Cardio/Pulmonary Addition	Minor	$15,400
19	Cheyenne	WY	Add Second Cogeneration Unit	NRM	$3,933
19	Cheyenne	WY	Install Storm Water Control System	NRM	$3,917
19	Cheyenne	WY	Replace Buffalo Basement switchgear	NRM	$1,000
19	Sheridan	WY	Community Living Center Expansion/Renovation	Minor	$14,975

Stakeholder Involvement

One of the strengths of the VA capital investment planning process is that it encourages continual improvement and refinement in response to client and customer needs. VA has engaged and will continue to engage stakeholders in the SCIP process as it evolves. External stakeholders are briefed periodically throughout the SCIP process and on the main decision criteria that are used to prioritize projects. Stakeholders include the Veterans Service Organizations, Congressional staff, and GAO. Feedback from briefings is incorporated into the SCIP process and methodology. Engaging stakeholders allows for transparency and provides valuable input that is continually monitored and annually incorporated into the SCIP process to address changing needs and priorities. Continual dialog with clients and customers maximizes stakeholder involvement while allowing the SCIP process to drive VA's current and future year capital budget submissions.

Proposed Construction Related Legislation

Authority Allowing VA to Plan, Design, Construct, or Lease Joint VA/DoD Shared Medical Facilities; and to Transfer and Receive Funds for those Purposes: VA is again proposing legislation to improve collaboration with the Department of Defense (DoD) to develop shared medical facilities. VA proposes legislation that would expand our capacity to do more detailed planning and design, leasing, and construction of joint medical facilities in an integrated manner. The proposal would allow the Department to transfer and/or receive funds (to/from the Major and Minor Construction appropriations) for use in the planning, design, and/or construction of a shared medical facility with the DoD. It would also allow the transfer and/or receipt of funds (to/from the Medical Facilities appropriation)

to/from DoD for the purpose of leasing space for a shared medical facility, after section 8104 authorization requirements have been met. This change would allow VA to build extra capacity into its construction projects to meet the needs of DoD that VA currently does not have authority to do. This inherent authority would enhance collaboration between the Departments with the goal of improving the access, quality, and cost effectiveness of the health care provided by both Departments to Veterans, Service Members, and taxpayers.

VA/DoD Collaborative Projects

Congress and the Executive Branch have advocated efforts to improve collaboration and health resource sharing between VA and the Department of Defense (DoD). These initiatives were made to improve the quality, accessibility, and cost-effectiveness of health care delivery for Veterans, Service Members, and their beneficiaries. The Administration has expressed strong support for improving the existing collaboration between VA and DoD. Ongoing efforts between the two Departments will improve the provision of services for the men and women who serve and have served our country and also benefit taxpayers.

The VA/DoD Joint Executive Committee (JEC) recommends to the Secretaries of the Departments a strategic direction for joint coordination and sharing of resources. The JEC established the VA/DoD Construction Planning Committee (CPC) to provide a formalized structure to facilitate cooperation and collaboration in achieving an integrated approach to planning, design, construction (major and minor), leasing, and other real property related initiatives for shared medical facilities that are mutually beneficial to both Departments. The work group name has now changed to the Capital Asset Planning Committee (CAPC). The CAPC goal is to ensure that collaborative opportunities for joint capital asset planning are fully explored, evaluated and maximized to enhance service delivery. The CAPC coordinated efforts of VA, DoD stakeholders, and legal counsel to develop agreement on language for similar legislative proposals to reform legislation that impedes the effective collaboration between the Departments.

DoD CAPC members participate in VA's SCIP evaluation process and assist in identifying possible locations that would support increased collaboration. Through the SCIP process, each capital project (including Major Construction, Minor Construction, Leases and Non-Recurring Maintenance) considered for funding in the Budget or a future year's capital plan is required to provide an assessment of potential DoD collaborative opportunities in their SCIP business case. The business case is used to score and rank SCIP projects. DoD collaboration is one of the national criteria elements VA uses to evaluate, score, and rank its capital projects.

In addition, DoD's Capital Investment Decision Making (CIDM) process includes key evaluation criteria rankings that denote those projects that entail VA/DoD collaboration efforts. The outcome of adding greater insight to each Department's capital asset planning has resulted in each Department sharing capital construction priorities with the expressed goal of fostering a more effective use of federal funds.

The Department believes that the enactment of the proposed legislation would encourage greater collaboration and would enable the identification and potential development of more

viable opportunities for shared medical facilities that would be beneficial to Veterans, Service Members, and taxpayers. In preparation that legislative assistance may be forthcoming, VA and DoD CAPC staffs continue to facilitate the identification of additional opportunities for potential shared facilities. The CAPC staff also exchange their capital investment plans: VA shares with DoD its proposals in the SCIP Plan and DoD shares with VA its proposals in the CIDM Program. The CAPC works to ensure that any potential joint opportunities are pursued for maximum consideration. Additionally, the CAPC assesses opportunities in current co-located sites for further collaboration

VA and DoD are currently developing more robust, data-driven assessments of collaboration opportunities for collocated or shared facilities. CAPC members are currently working together to integrate and utilize information made available from VA Market Assessments and DoD Visioning to identify possible opportunities.

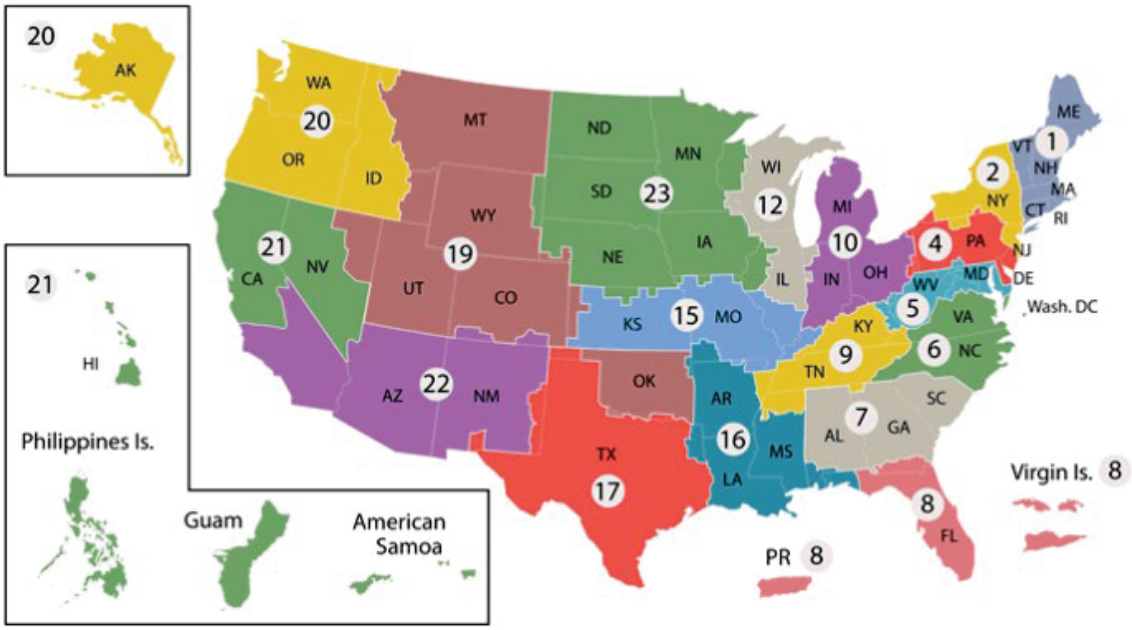
Chapter 8.3
Veterans Health Administration

Introduction

VHA delivers care in more than 5,655 buildings and 1,663 leased facilities across the country. Many VHA medical centers are located on large, campus-style settings and are in excess of 50 years old; at least one third of these buildings are historically significant. VHA is comprised of 151 VA Medical Centers that provide a multitude of services, including inpatient beds, community living centers, rehabilitation services, and outpatient services. Ambulatory care is provided in 1,074 clinics, of which 751 are community-based outpatient clinics (CBOCs) or higher complexity of care.

VHA facilities are organized into 18 Veteran Integrated Service Networks (VISNs) shown below:

Figure 3-1: VHA VISN Map



Action Plan Strategy

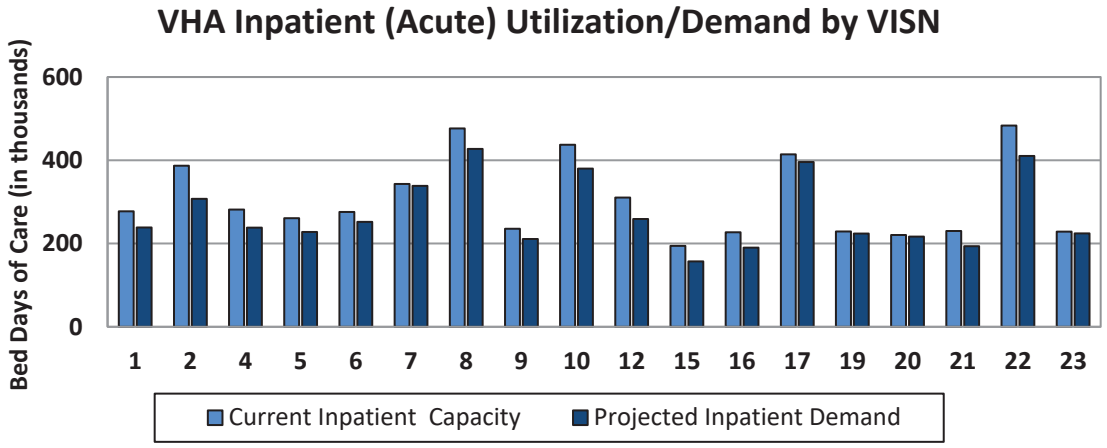
VHA's Action Plan strategy addresses access, utilization, space, and condition gaps, as well as energy requirements currently-identified in the Strategic Capital Investment Planning (SCIP) process. A combination of capital and non-capital solutions, such as telehealth, purchased care and extended hours of operations, are utilized to close currently-identified gaps. The access gap is closed by projects that provide additional points of care, typically as CBOCs. The utilization gap is closed by adding or repurposing space to accommodate each required service. The space gap is met by building additional space or by disposing of or demolishing space where space is in excess. Condition gaps are closed by projects that address deficiencies in buildings. Each VISN Action Plan also addresses energy gaps through medical facilities projects which will increase water and energy efficiency and meet VA's goals in those areas.

VHA Gaps

Utilization Gap: The utilization gap is calculated for inpatient and outpatient care. Inpatient utilization is calculated using Bed Days of Care (BDOC), defined as the number of occupied beds multiplied by the number of days occupied. For example, 30 beds occupied for 30 days equals 900 BDOC. Outpatient utilization is calculated using Clinic stops, defined by the number of unique encounters that are tracked for outpatient services. This is a VA goal that is expected to be addressed for each gap, as result of implementing the Action Plan. The VA target is to close 95% of all VHA utilization gaps and the graphs below show utilization in BDOC.

Inpatient Utilization – The figure below shows each VISN's current (Budget Year (BY) 2017) inpatient utilization and the projected demand for inpatient care.

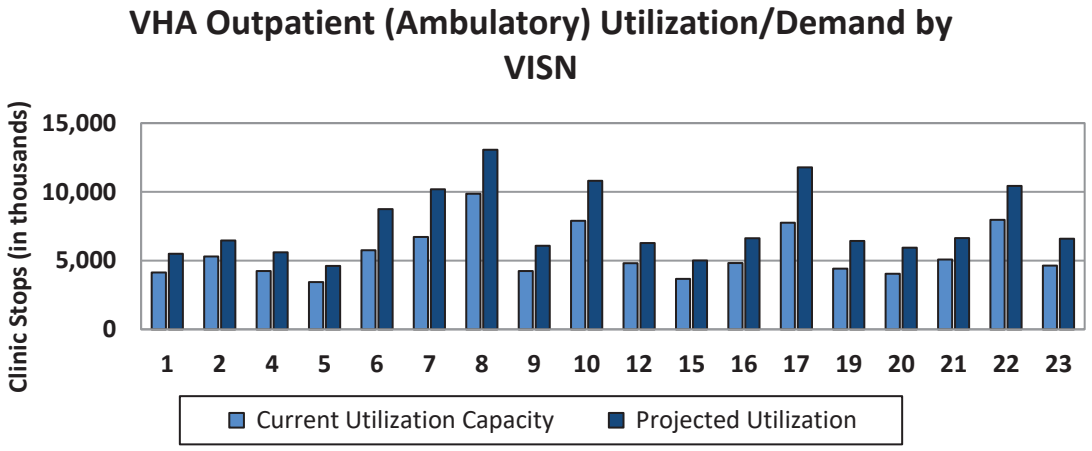
Figure 3-2: VHA Inpatient (Acute) Utilization/Demand



In accordance with national health care trends, VA is projected to see a general decrease in the demand for inpatient care over the next ten years. Most VISNs are projected to see an increase in demand for at least a few types of inpatient care, such as mental health and specialty services.

Outpatient Utilization – The figure below shows each VISN's current (BY 2017) outpatient capacity and the projected demand for outpatient capacity in 2027. In accordance with national health care trends, the chart illustrates the expected increase in demand for outpatient services over the next 10 years. In order to meet expected demand, all VISNs must increase their capacity to provide outpatient services.

Figure 3-3: VHA Outpatient (Ambulatory) Utilization/Demand



Space Gap: Defined as the difference between in inventory plus in process minus funded disposals and projected long-range planning needs, both positive and negative. Negative numbers indicate excess space, positive numbers indicate the need for additional space. The chart below illustrates the correction of both positive and negative space gaps that would occur following implementation of all projects identified by the SCIP process. The graphic on the following page illustrates the space inventory in each VISN based on square footage available Pre and Post-SCIP.

Figure 3-4: VHA Space Gap

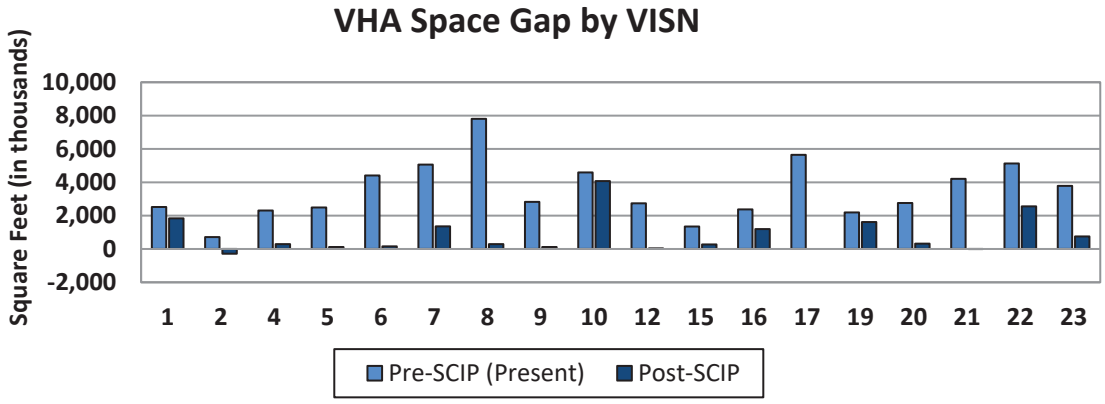
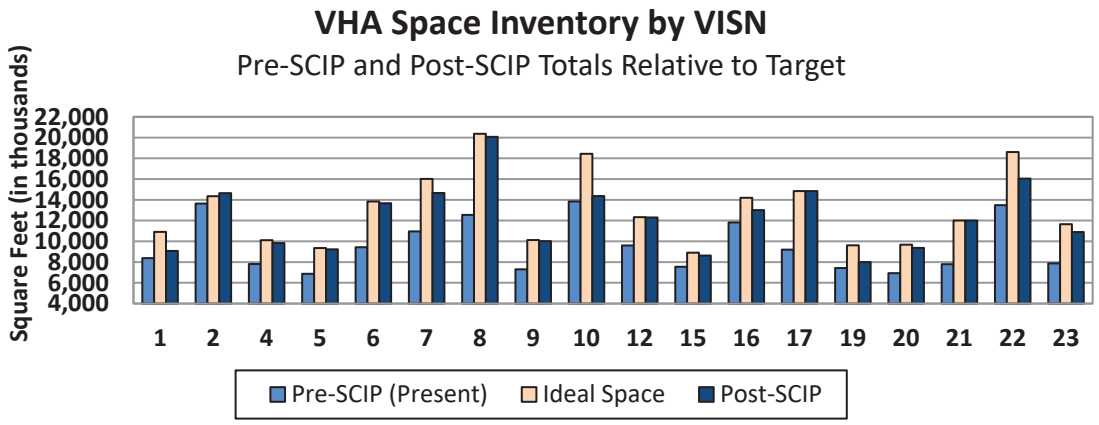
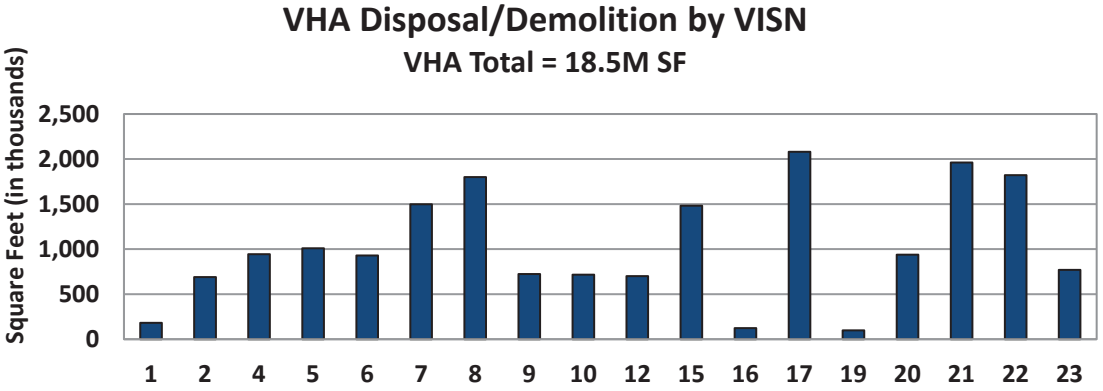


Figure 3-5: VHA Space Inventory



Disposal Goals: The ability to efficiently use space and remove obsolete space through outlease, demolition and disposal is critical to the capital planning process. VISN action plans incorporate demolition and disposal of space as a means of right-sizing excess inventory. Illustrated below is the total reduction in square footage due to disposal or demolition projects. The total disposal and demolition over the ten year planning horizon is 18.5 million square feet.

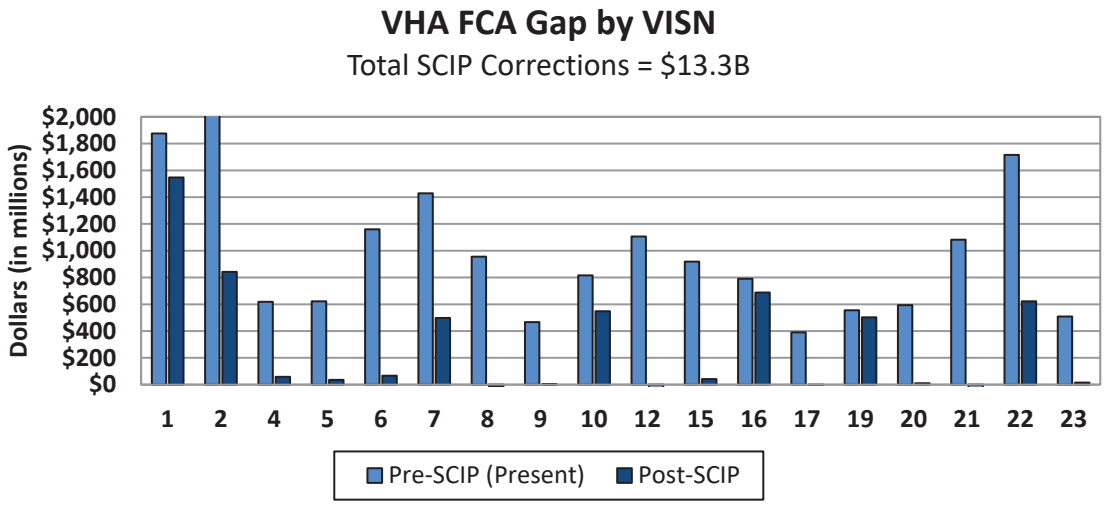
Figure 3-6: VHA Disposal/Demolition by VISN



Condition Gap: The condition gap is an estimate of dollars needed to correct currently-identified deficiencies in VHA facilities. Deficiencies were identified through on-site Facility Condition Assessments (FCA) and included those facility or infrastructure systems that were rated with either a D or F by the assessments. Actual project costs may vary from FCA dollars.

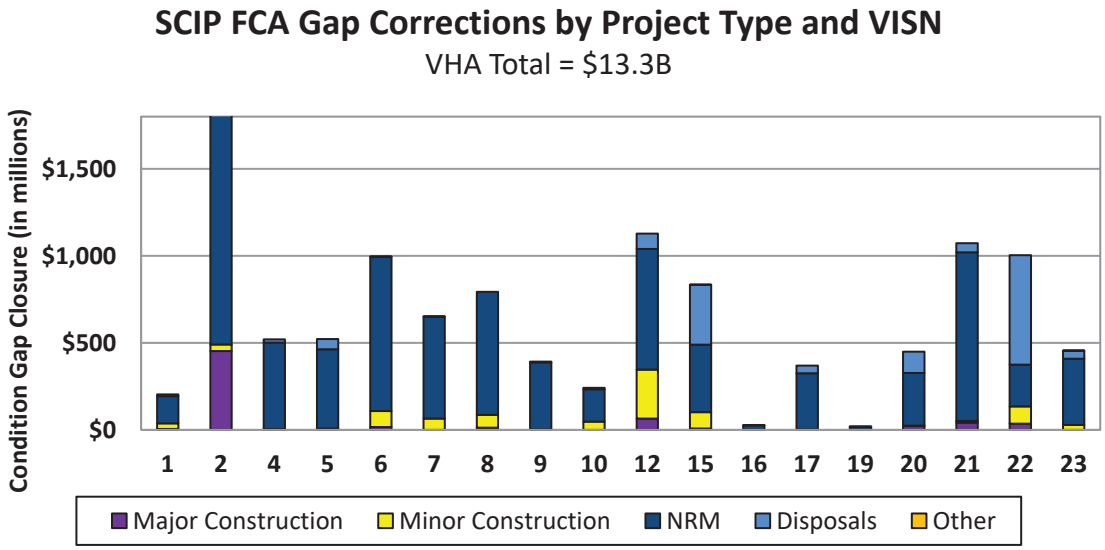
The chart on the next page illustrates the existence of substantial condition deficiencies across all VISNs. VISNs with the deficiencies exceeding $1 billion in correction costs include 1, 2, 6, 7, 12, 21 and 22.

Figure 3-7: VHA Condition Gap



The following chart illustrates the breakdown of how the long range plan proposes to correct identified FCA deficiencies by project type and capital investment.

Figure 3-8: VHA Condition Gap by Project Type



Non-Capital Approaches in Action Plan Strategy

Within VHA's Action Plan Strategy, there are opportunities to better address access, energy and space gaps by combining non-capital approaches with capital solutions. Non-capital approaches include the use of tele-medicine, extended hours for the provision of on-site services, and care in the community from non-VA sources. Incorporating such non-capital approaches can reduce the total cost of capital solutions that are used to increase access, or add space. Three of these approaches are described below.

Tele-medicine technologies allow patients to receive care, diagnostic services or monitoring at home or in other convenient locations, thereby reducing the need for patient travel, reducing the number of exam rooms needed, saving energy costs, and better utilizing providers remotely. This approach can also reduce the need to construct, lease or renovate space in pursuit of increased access where demand has increased. However, costs will increase for technological infrastructure, software and training.

Hours of service can be extended at outpatient care sites experiencing high utilization or projecting increased demand. In sites where projected increases in demand exceed the capacity of the facility after extended hours have been introduced, expansion may still be required. The application of extended hours can reduce the scope of facility expansion, resulting in capital savings. However, the cost of FTEs, energy and operating costs will increase when hours of service are extended.

Care in the community can be used in lieu of facility construction, renovation/ expansion, or leasing in certain circumstances to address access needs and space gaps, or to reduce the local footprint. This approach is useful where the volume for the particular service is low. In order to purchase medical services in the private sector the VA has to determine that capacity exists for the volume of care needed, that VHA quality of care standards can be met, and that electronic health records can be securely exchanged in accordance with all HIPAA and Privacy Act requirements.

Strategic principles and guidance were utilized to encourage use of capital and non-capital solutions for expanding access and developing a high performing network, while being good financial stewards. Solutions considered included expanded use of telehealth, mobile phone apps, evening and weekend clinic hours, and same day appointments. However, some capital solutions were required to meet VA's planning priorities, which included projects that:

- Focus resources with an emphasis on modernization of facilities for delivery of VA provided care,
- Improve the timeliness of services and projects that support Suicide Prevention; along with its impact on other foundational services,
- Enhance the Department's ability to provide greater choice for Veterans,
- Modernize systems by providing needed infrastructure improvements (i.e. life, safety, or code upgrades focused).

Energy Management Program

A series of laws and executive orders since the 1990s accelerated the need to coordinate energy, vehicle fleet, environmental, and sustainable buildings policies and programs at the Department level. VA integrated these areas under the Energy Management Program (EMP) Service within the Office of Management in 2006. This integration has proven essential in helping VA optimize and prioritize investments and other activities designed to reduce utility costs, increase fuel diversity, reduce fuel consumption, and provide cleaner, healthier environments for Veterans, visitors and staff, as well as meet requirements of laws, executive orders, and presidential memoranda. In FY 2019, the Energy Management Program continued to increase focus on pursuing energy savings performance contracts and utility energy service contracts, which leverage private sector financing to achieve facility improvements at little to no upfront cost to the agency.

In 2019, VA accomplishments included the following:

- Saved over $16.8 million in electricity and natural gas costs through commodities contracts put in place.
- Through energy savings performance contracts and utility energy service contracts, awarded $82.8 million in energy and water efficiency projects to install improvements at 17 facilities. Leveraged capital dollars with performance contracts on 22 projects to maximize VA savings and infrastructure improvements, including the award of work related to air handling units, chillers, cooling towers, roof replacement, heating, ventilation and air conditioning systems, plumbing replacements, and other improvements.
- Supported numerous ongoing energy projects by providing construction management and commissioning oversight.

By the end of September 2019, VA had awarded a cumulative $714.6 million in needed infrastructure upgrades at 65 VA campuses using private sector investment to implement energy savings performance contracts and utility energy service contracts. Once installed, these improvements are expected to translate into $1.16 billion of taxpayer savings over the life of the contracts, or $42 million in annual facility energy and waster costs each year. VA cumulative savings through competitive utilities purchasing has reached $230 million. VA has reduced energy consumption intensity by 33% since 2003, and has decreased water consumption intensity by 34% since 2007.

The pipeline of energy savings performance contracting project and utility enegy services contracting projects under development represents $492 million in needed energy and water equipment and system upgrades. Renewable energy and combined heat and power projects, along with other energy-related projects, compete for appropriated funding through the SCIP process. VA also plans to complete facility retro-commissioning in 25 percent of VA facilities and conduct energy assessments of 25 percent of VA facilities.

Finally, VA is pursuing improvement in vehicle fleet data and consolidating VA-owned vehicles to General Services Administration (GSA) leases, consistent with recommendations from OMB and GSA, to achieve a more efficient and effectively-managed fleet. GSA leased vehicles now represent 78 percent of VA's total fleet of

21,500 vehicles, performing mission-specific functions such as transporting Veterans to and from appointments and providing care to Veterans where they live and work. VA has embarked on a comprehensive inventory of all VA-owned, commercially-leased and donated vehicles, an effort expected to enhance data quality and reveal additional opportunities to improve fleet management. To meet acquisition mandates, VA is looking to a range of alternative fuel vehicles, including gasoline hybrids, plug-in hybrids, and electric vehicles.

SCIP Estimated Long Range Magnitude Costs

Each VISN developed and submitted a separate action plan detailing its capital asset investment strategy to address identified gaps. Improving the condition of facilities and meeting increased outpatient demand were the predominate drivers of the VISN plans, comprising a large portion of the proposed capital projects and associated funding. Of these projects, maintaining and improving the condition of VA's facilities through medical facilities non-recurring maintenance (NRM) projects (2,404) accounted for the largest resource need, followed by minor construction (568), major construction (74), and leases (304). It is important to note that the magnitude estimates are based on a snap shot in time, using current market conditions, baseline capital portfolio, demographic data, and projected needs. The costs provided will likely change as projects move through the investment process and as cost estimating and project requirements become more refined. For example, estimates are fine-tuned from action plan to business case to project prospectus (for major construction) to final design and construction documents. The magnitude estimates include activation (startup) costs; but do not include life cycle costs.

The cost to fully implement the Action Plan and correct all currently-identified gaps for VHA is estimated to be between $60 and $73 billion, including non-recurring and recurring activation costs. Table 3-1 provides a cost summary for all projects by type. VISN breakouts are provided in proceeding sections.

Table 3-1: VHA Capital Investment Projects by Type

VHA	2021		Future Years	
Project Type	# of Projects	2021 TEC ($000)	# of Projects	Future Year TEC ($000)[1]
Major Construction	1	$297,542	73	$15,576,859
Leases	130	$208,087	174	$821,407
Minor Construction	27	$375,773	541	$6,783,034
NRM (includes Energy Management projects)	544	$2,309,588	1,860	$8,367,862
Other (includes disposal and sharing projects)	0	$0	10	$11,066
Project Specific Subtotal	**702**	**$3,190,990**	**2,658**	**$31,560,228**
Future Year Planning (Minors and NRM)[1]	N/A	$0	-	$17,298,182
Below Threshold/Emergent Needs[2]	TBD	$0	-	$697,758
Non-Recurring Activation Costs[3]	-	$505,723	-	$4,756,026
Recurring Activation Costs[3]	-	$191,838	-	4,756,026
IT Non-Recurring Activation Costs[3]	-	$56,997	-	$715,057
IT Recurring Activation Costs[3]	-	$18,999	-	$238,352
Total	**702**	**$3,964,546**	**2,658**	**$62,843,301**

[1]Future planning includes estimates for NRMs and Minors for future years, non-major lease, disposal, and sharing projects for the ten-year planning horizon.
[2]VHA Action Plans include lump sums for emergent needs below the established dollar threshold of $1 million.
[3]Non-recurring and recurring activation totals are inclusive of the entire cost over a 10 year time frame and are reflected in the first funding year for each project.

See Chapter 8.2 for potential NRM projects and leases for 2021, and potential future utyear projects. The minor construction request for 2021 is comprised of $176.1 million for prior year SCIP approved projects that are awaiting construction funding, $37.6 million for new SCIP 2021 projects, and $30.3 million for enhanced-use lease contributions and Department of State Capital Security Cost Sharing program.

This page intentionally left blank.

Chapter 8.4
National Cemetery Administration

Introduction

NCA provides services to Veterans and their families across five Districts, administering burial benefit programs at 156 cemeteries, which includes 11 cemeteries being transferred from the Department of Army, and 33 soldiers' lots and monument sites. NCA maintains over 3.8 million gravesites and over 22,000 acres and operates 595 buildings.

A map showing the five Districts is provided below.

Figure 4-1: NCA District Map

Linkage to VA's Strategic Goals

The construction program is a critical element of NCA's strategy to improve access to burial and memorial benefits for Veterans and their families and provide greater choice. Two performance measures are impacted by NCA's construction program:

- Percent of Veterans served by a burial option within a reasonable distance (75 miles) of their residence.
    - Construction projects to develop new national cemeteries will provide a burial option to Veterans and their families who are not currently served by a national, state or tribal Veterans' cemetery within 75 miles of their residence. Also, projects to keep existing national cemeteries open by developing additional gravesites and columbaria, or by acquiring additional land, prevent the loss of a burial option for Veterans currently served by a national cemetery within a reasonable distance of their residence.

- Percent of survey respondents who rate national cemetery appearance as excellent.
    - Construction projects such as irrigation improvements, renovation of historic structures, and road resurfacing are important to maintaining our cemeteries as national shrines. In most cases, these types of projects directly impact cemetery appearance and, thereby, client satisfaction.

Meeting Current and Future Burial Needs

In 2019, NCA interred 134,833 Veterans and eligible family members. Annual Veteran deaths are projected to be over 573,000 in 2020 and are projected to slowly decline. The number of interments is expected to peak at about 137,601 in 2021, after which interments will decline gradually. The total number of gravesites is expected to increase from nearly 3.82 million in 2019 to more than 3.92 million in 2020. The number of gravesites maintained is expected to reach over 4 million in 2021.

It is critical that VA continue to provide service at existing national cemeteries by completing phased development projects to make additional gravesites or columbaria available for interments. National cemeteries that will close due to depletion of space are identified to determine the feasibility of extending the service period of the cemetery through expansion. As public acceptance of, and demand for, cremation as a burial option grows, construction of columbaria is an option that maximizes service delivery. VA will continue to develop columbaria, particularly in areas where land is scarce and the demand for cremation burials is high.

In addition to building, operating, and maintaining national cemeteries, NCA administers the Veterans Cemetery Grant Program to provide grants to states and tribal organizations to establish or expand Veterans cemeteries. Grants may fund up to 100 percent of the cost of establishing, expanding, or improving state or tribal Veterans cemeteries, including the acquisition of initial operating equipment.

Burial Policies

NCA anticipates that by 2021, approximately 93.1 percent of Veterans will have access to a burial option in a national, state, or tribal Veterans cemetery within 75 miles of their home. The independent *Evaluation of the VA Burial Benefits Program* (August 2008) drove a number of burial policies targeting increased access and availability of burial options for Veterans.

These include:

- Lowering the unserved Veteran population threshold to establish a new national cemetery to 80,000 within a 75-mile radius. This resulted in the identification of locations for five new national cemeteries that will provide a burial option to an additional 550,000 Veterans and their families.
- Establishing "Urban Initiative" locations to improve travel time and access in densely populated metropolitan areas currently served by a national cemetery. Five locations have been identified for this initiative in the Los Angeles and San Francisco/Oakland, CA areas, Chicago, IL, New York, NY, and Indianapolis, IN metropolitan areas. The columbarium expansion at Los Angeles National Cemetery opened in October 2019 as the first completed project under NCA's Urban Initiative. New York and Indianapolis columbaria-only locations are scheduled to open in 2021.

VA Burial Access Initiative for Rural Veterans

Building upon efforts to improve burial access, NCA continues to establish rural national cemeteries in areas where the Veteran population is less than 25,000 within a 75-mile service area. This initiative targets those states in which: 1) there is no national cemetery within the state open for first interments; and 2) areas within the state are not currently served by a State Veterans Cemetery or a National Cemetery in an adjacent state. Eight states meet these criteria (Idaho, Montana, Nevada, North Dakota, Maine, Utah, Wisconsin, and Wyoming). In 2014, NCA established the first national cemetery under the Rural Initiative at Yellowstone National Cemetery in Montana and the second rural cemetery opened in 2019 in Fargo, ND. Three additional rural cemeteries are scheduled to open in 2020 (Northwoods, WI; Snake River Canyon, ID; and Machias, ME) and two in 2021 (Cheyenne, WY; and Cedar City, UT).

The current strategic target for the percent of the Veteran population served by a national, state, or tribal Veterans cemetery within 75 miles of their home is 95 percent.

National Shrine Commitment

Each national cemetery exists as a national shrine which carry expectations of appearance that set them apart from private cemeteries. VA maintains the appearance of national cemeteries as national shrines. Infrastructure projects such as cemetery irrigation improvements, building renovations, maintenance of buildings and structures, and road and curb improvements are just some examples that contribute to this objective.

Action Plan Strategy

NCA's Action Plan addresses access, utilization, condition, and space gaps. Access and utilization gaps are closed by major and minor construction projects that provide new interment options through the establishment of new national cemeteries or expansion of existing cemeteries. NCA also continues to invest in columbarium-only cemeteries to serve Veterans in urban areas. The space gap is closed through new construction, including administration buildings, maintenance buildings, public restrooms, and committal shelters. The condition gap is closed by projects that address deficiencies in buildings as well as projects to decrease gaps in National Shrine assessments.

NCA Gaps

Access:
Defined as the percentage of Veterans who have access to a first interment burial option within 75 miles of their home. NCA's strategic goal for reasonable access is 95 percent. The percent of Veterans served by a burial option in a national or state Veterans cemetery in 2019 was 92.4 percent. NCA expects to meet a target of 93.1 percent in 2021 by activating new state Veterans cemeteries through the Veterans Cemetery Grants Program and continuing to develop the new national cemeteries. NCA expects to meet the strategic target of 95 percent by activating a new national cemetery in western New York, eight Rural Veterans Cemeteries currently in planning or under construction, expansions to existing cemeteries, and through its grant program to encourage establishment of additional state and/or tribal Veterans cemeteries. New planned national cemeteries, including the rural initiative, will address most of the gap between the current level and the strategic target. State and tribal Veterans cemeteries will further increase the percentage of Veterans who have access to a burial option within 75 miles of their home.

Condition:
There are two types of condition gaps for NCA: Facility Condition Assessment and Visual/National Shrine Impact. The long range estimated cost to correct all currently-identified gaps for NCA is approximately $121 million. This is an estimate only, costs may change as projects are further refined.

Table 4-1: NCA Capital Investment Projects by Type

NCA	2021		Future Years	
Project Type	# of Projects	2021 TEC ($000)	# of Projects	Future Year TEC ($000)[1]
Major Construction	2	$87,000	10	$425,000
Leases	0	$0	0	$0
Minor Construction	7	$57,140	62	$187,383
NRM	0	$0	0	$0
Other (includes disposals and sharing projects)	0	$0	0	$0
Project Specific Subtotal	**9**	**$144,140**	**72**	**$612,383**
Future Year Planning (Minors and NRM)[1]	N/A	$0	-	$0
Below Threshold/ Emergent Needs[2]	TBD	$0	-	$37,634
Non-Recurring Activation Costs[3]	-	$1,879	-	$11,845
Recurring Activation Costs[3]	-	$0	-	$0
IT Non-Recurring Activation Costs[3]	-	$0	-	$564
IT Recurring Activation Costs[3]	-	$0	-	$188
Total	**9**	**$146,019**	**72**	**$662,614**

[1] Future year planning includes estimates for Minors for future years, non-major lease, disposal, and sharing projects for the ten-year planning horizon.
[2] NCA Action Plans include under lump sum, for emergent needs below the established threshold of $1 million, that will be allocated during the year.
[3] Non-recurring and recurring activation totals are inclusive of the entire cost over a 10-year time frame, reflected in the first funding year for each project.

The 2021 minor construction request is comprised of $21.3 million for prior year Strategic Capital Invesmtnet Planning (SCIP) process approved projects awaiting construction funding, $10.7 million for new SCIP 2021 projects, and $53.9 million for below threshold/land acquisition for 2021.

The following table provides a list of planned leases and potential future year projects. Total estimated costs in the table below are preliminary planning costs and are subject to change as projects are further refined. The NCA long term planning horizon Cost Estimate Range does not include under-threshold or out-year planning estimates. For planning purposes, VA utilizes an established dollar amount for project specific inclusion in the Action Plans. For example, the dollar threshold for NCA Minor Construction projects is $1 million. Those potential projects for future years (beyond 2021) are provided in Table 4-2 below. The costs for all below-threshold projects are included in the overall NCA estimate as a lump-sum.

Table 4-2: NCA Future Year Above Threshold Potential Projects (Sorted by State, Cemetery)

Cemetery	ST	Future Year Above-Threshold Potential Projects Project Name – Short Description	Project Type	Total Estimated Costs ($000s)
Alabama	AL	Gravesite Expansion	Major	$30,000
Ft. Mitchell	AL	Gravesite Expansion (PPC, IGC)	Minor	$4,000
Ft. Smith	AR	Repair/Replace Roads, Curbing, and Drainage	Minor	$1,230
Golden Gate	CA	Install Irrigation Mainline and Controller Upgrades	Minor	$1,100
Los Angeles	CA	New Cemetery (Sepulveda)	Major	$40,000
Los Angeles	CA	Correct FCA Deficiencies	Minor	$3,920
Oakland	CA	Mini-minor Projects	Minor	$1,000
Riverside	CA	Construct Permanent Honor Guard Building	Minor	$1,330
Denver	CO	Mini-minor Projects	Minor	$1,000
Fort Logan	CO	Gravesite Expansion (PPC, IGC, Columbaria)	Major	$40,000
Fort Logan	CO	Gravesite Expansion (Columbarium)	Minor	$8,000
Bay Pines	FL	Gravesite Expansion (Columbarium)	Minor	$3,000
Bay Pines	FL	Replace Irrigation System	Minor	$2,417
Bay Pines	FL	Replace Roads and Add Storm Drainage	Minor	$1,810
Sarasota	FL	Gravesite Expansion	Major	$28,000
Marietta	GA	Install Irrigation	Minor	$1,670
Marietta	GA	Renovate Site/Buildings to Correct FCA Deficiencies	Minor	$1,670
Keokuk	IA	Expand Irrigation System to Entire Cemetery	Minor	$1,330
Rock Island	IL	Expand Irrigation System to Entire Cemetery	Minor	$2,730
Marion	IN	Gravesite Expansion (Columbarium)	Minor	$1,000
New Albany	IN	Correct FCA Deficiencies	Minor	$1,390
Leavenworth	KS	Replace Maintenance Facility	Minor	$4,490
Lebanon	KY	Correct FCA Deficiencies	Minor	$2,600
Lebanon	KY	Gravesite Expansion (PPC)	Minor	$1,800
Zachary Taylor	KY	Correct FCA Deficiencies	Minor	$2,210
Alexandria	LA	Renovate Maintenance Facility, Repair Roads/Storm Drainage	Minor	$1,160
Annapolis	MD	Historic Site Renovation	Minor	$3,000

Cemetery	ST	Future Year Above-Threshold Potential Projects Project Name – Short Description	Project Type	Total Estimated Costs ($000s)
Baltimore	MD	Replace Fence and Improve Property Border, FCA Deficiencies	Minor	$5,500
Baltimore	MD	Repave Roads, Replace Curbs & Site Drainage	Minor	$2,340
Loudon Park	MD	Renovate Historic Lodge and Site	Minor	$4,850
Ft. Custer	MI	Expand Irrigation System to Entire Cemetery	Minor	$3,580
Ft. Custer	MI	Gravesite Expansion (Columbarium)	Minor	$3,000
Ft. Custer	MI	Replace Equipment Storage Building	Minor	$1,445
Ft. Snelling	MN	Expand Irrigation System to Entire Cemetery	Minor	$5,190
Jefferson Barracks	MO	Gravesite Expansion	Major	$60,000
Jefferson Barracks	MO	Expand Irrigation System to Entire Cemetery	Minor	$9,020
Salisbury	NC	Construct Covered Storage and Materials Bins	Minor	$1,530
Beverly	NJ	Restore Iron Fences and Gates, Correct FCA Deficiencies	Minor	$1,360
Finn's Point	NJ	Renovate Lodge and Repairs	Minor	$4,000
Finn's Point	NJ	Historic Wall Restoration	Minor	$2,120
Santa Fe	NM	Santa Fe Replacement (Albuquerque)	Major	$55,000
Bath	NY	Gravesite Expansion (PPC, IGC)	Minor	$5,000
Long Island	NY	Renovate Historic Site	Minor	$9,990
Long Island	NY	Irrigation Project, Phase 1	Minor	$2,630
Solomon-Saratoga	NY	Repave Roads and Various Site Improvements	Minor	$1,280
Dayton	OH	Expand Administration/Maintenance Building	Minor	$2,670
Dayton	OH	Mill and Pave Roads	Minor	$1,260
Ft. Gibson	OK	Gravesite Expansion (Columbarium)	Minor	$2,000
Indiantown Gap	PA	Gravesite Expansion	Major	$32,000
Philadelphia	PA	Mini-minor Projects	Minor	$1,000
Philadelphia	PA	Mini-minor Projects	Minor	$1,000
Washington Crossing	PA	Gravesite Expansion	Major	$50,000
Beaufort	SC	Gravesite Expansion (PPC, IGC, Columbarium)	Minor	$6,000
Beaufort	SC	Renovate Lodge, Maintenance Building, and Restroom	Minor	$3,840
Beaufort	SC	Replace Irrigation System	Minor	$2,000
Florence	SC	Gravesite Expansion (PPC)	Minor	$3,000
Florence	SC	Demolish/Replace Admin/Maint. Building and Correct FCA Deficiencies	Minor	$2,390
Black Hills	SD	Renovate/Repair Roadways	Minor	$1,588
Chattanooga	TN	Gravesite Expansion (Chattanooga Replacement)	Major	$60,000
Chattanooga	TN	Install Irrigation System	Minor	$8,930
Chattanooga	TN	Replace Roads & Storm Drainage	Minor	$1,200
Mountain Home	TN	Irrigate Approx. 40 Acres	Minor	$3,360
Nashville	TN	Install Irrigation System	Minor	$5,580
Nashville	TN	Replace Roads, Curbs and Repair Storm Drainage	Minor	$3,500
Nashville	TN	Correct Cemetery FCA Deficiencies	Minor	$1,400
Houston	TX	Pond Dredging and Storm Drainage Maintenance	Minor	$4,280
Fort Harrison	VA	Renovate Historic Site Buildings and Infrastructure	Minor	$2,160
Glendale	VA	Renovation of Site/Buildings	Minor	$2,250
Richmond	VA	Renovate/Repair Historic Site and Buildings	Minor	$3,010

Cemetery	ST	Future Year Above-Threshold Potential Projects Project Name – Short Description	Project Type	Total Estimated Costs ($000s)
Seven Pines	VA	Renovation of Historic Buildings and Correction of FCA Deficiencies	Minor	$3,750
Winchester	VA	Renovate Historic Buildings and Correct FCA Deficiencies	Minor	$4,523
Tahoma	WA	Gravesite Expansion and Cemetery Improvements	Major	$30,000

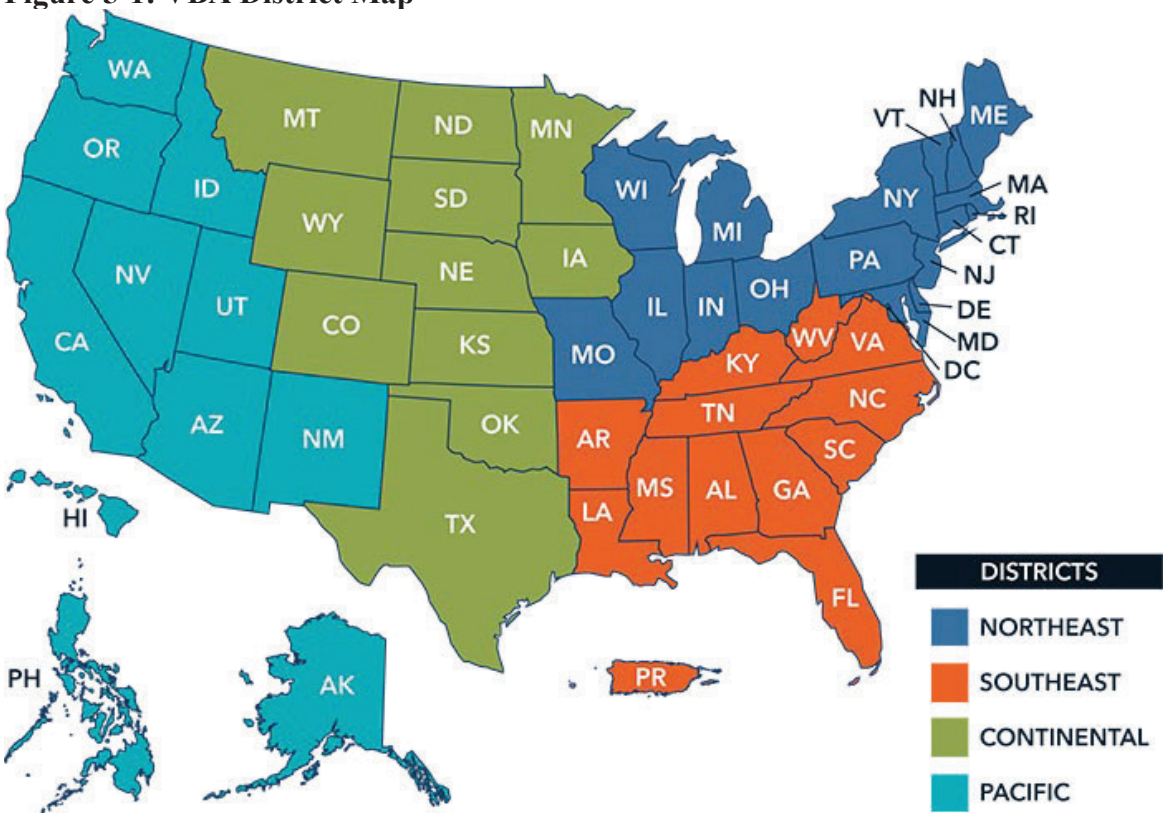
Page Intentionally Left Blank

Chapter 8.5
Veterans Benefits Administration

Introduction

VBA provides benefits and services to the Veteran population through four districts (Northeast, Southeast, Continental and Pacific) and 56 Regional Offices. VBA benefits and services include disability compensation and pension, education, vocational rehabilitation, loan guaranty, and insurance.

Figure 5-1: VBA District Map



Action Plan Strategy

VBA's Action Plan strategy focuses on functional and space gaps identified in the Strategic Capital Investment Planning (SCIP) process. VBA's plan will reduce those gaps through renovation and maintenance projects. Renovation/realignment projects will focus on more efficient office flow arrangements to support transformation initiatives, reduce security and safety deficiencies, and provide better service to Veterans. These projects will reconfigure space freed up by the removal of paper files and ensure compliance to new space standards.

The overall goal is to make the space more flexible for adjustment to changing business practices. Current leases, primarily through General Services Administration (GSA), allow VBA to relocate quickly with business process changes, or to follow Veteran population concentration changes.

SCIP Estimated Long Range Magnitude Costs

The estimated cost to correct all currently-identified gaps for VBA is between $1.4 and $1.8 billion. The estimated cost of correcting building deficiencies at VA-owned facilities occupied by VBA is approximately $18.5 million. Facility modification projects normally require a significant funding contribution by VBA, even for leased space. The expected range of costs for all of these future requirements is an estimate only; the range may change as projects are further refined.

Table 5-1: VBA Capital Investment Projects by Type

VBA	2021		Future Years	
Project Type	**# of Projects**	**2021 TEC ($000)**	**# of Projects**	**Future Year TEC ($000)[1]**
Major Construction	0	$0	0	$0
Leases	36	$28,590	34	$22,938
Minor Construction	1	$19,900	34	$203,888
NRM	0	$0	0	$0
Other (includes disposals and sharing projects)	0	$0	0	$0
Project Specific Subtotal	**37**	**$48,490**	**68**	**$226,826**
Future Year Planning (Minors and NRM)[1]		$0		$0
Below Threshold/ Emergent Needs[2]		$0		$757
Non-Recurring Activation Costs[3]		$425,763		$618,312
Recurring Activation Costs[3]		$0		$0
IT Non-Recurring Activation Costs[3]		$98,674		$110,258
IT Recurring Activation Costs[3]		$32,891		$36,753
Total	**37**	**$605,819**	**68**	**$992,907**

[1] Future planning includes estimates for NRMs and Minors for future years, non-major lease, disposal, and sharing projects for the ten-year planning horizon.
[2] VBA Action Plans include lump sums for emergent needs below the established dollar threshold of $500,000 that will be allocated during the year.
[3] Non-recurring and recurring activation totals are inclusive of the entire cost over a 10 year time frame and are reflected in the first funding year for each project.

The 2021 minor construction request is comprised of $19.9 million for new SCIP 2021 projects and $6.6 million for below threshold/urgent needs and Department of State Capital Security Cost Sharing program.

The table on the next page list potential future year projects.

For planning purposes, VA utilizes an established dollar amount for project specific inclusion in the Action Plans. For example, the dollar threshold for VBA Minor Construction projects is $500,000. Those potential projects for future years (beyond 2021) are provided in Table 5-2, below. The costs for all below-threshold projects are included in the overall VBA estimate as a lump-sum.

Table 5-2: VBA-Potential Future Year Above-Threshold Projects (Sorted by State, City, and Type)

City	ST	Potential Future Year Above-Threshold Projects Project Name – Short Description	Project Type	Total Est. Cost (000s)
Anchorage	AK	Renovate and Realign Anchorage to eRO Format	Minor	$3,630
Montgomery	AL	Renew lease at Birmingham VR&E Office	Leases	$48
Montgomery	AL	Renew Lease at Ft Walton Beach VR&E Office	Leases	$45
Montgomery	AL	Renovate and Realign Montgomery RO to the eRO Model	Minor	$8,131
Montgomery	AL	Replace Air Handling Units at Montgomery RO	Minor	$2,700
Phoenix	AZ	Renew Lease at Phoenix RO	Leases	$3,300
Phoenix	AZ	Renew Lease at Phoenix RO2	Leases	$550
Phoenix	AZ	Renew Lease at Flagstaff VR&E Office	Leases	$26
Oakland	CA	Renew Lease at Oakland RO	Leases	$3,000
San Diego	CA	Renew Lease at San Diego RO	Leases	$3,000
San Diego	CA	Renew Lease at San Diego RO4	Leases	$1,750
San Diego	CA	Renew Lease at San Diego Storage	Leases	$26
San Diego	CA	Build out at new San Diego RO Leases Consolidation	Minor	$17,707
Washington	DC	Realign 722 I Street NW DC	Minor	$8,844
Wilmington	DE	Renovate and Realign Wilmington RO to eRO Format	Minor	$2,152
St Petersburg	FL	Renew Lease at Jacksonville VR&E Office	Leases	$167
St Petersburg	FL	Renew Lease at Sarasota VR&E Office	Leases	$30
St Petersburg	FL	Renovate and Realign St Petersburg RO	Minor	$9,900
St Petersburg	FL	Upgrade Lighting Control System	Minor	$350
St Petersburg	FL	Install Reclaimed Waterline System	Minor	$330
Atlanta	GA	Renew Lease at Atlanta Storage	Leases	$79
Atlanta	GA	Renovate and Realign Atlanta RO 3rd Floor to eRO Model	Minor	$5,668
Atlanta	GA	Renovate and Realign Atlanta 4th Floor RO to eRO Model	Minor	$5,668
Honolulu	HI	Renew Lease at Guam-Tamuning VR&E Office	Leases	$150
Honolulu	HI	Renew Lease at Hilo VR&E Office	Leases	$27
Des Moines	IA	Renew Lease at Cedar Rapids VR&E Office	Leases	$70
Des Moines	IA	Renovate and Realign Des Moines RO	Minor	$6,000
Boise	ID	Renew Lease at Pocatello VR&E Office	Leases	$6
Boise	ID	Renovate and Realign Boise RO to eRO Model	Minor	$3,731
Chicago	IL	Renovate and Realign Chicago RO to eRO Model	Minor	$8,197
New Orleans	LA	Renovate and Realign New Orleans RO to eRO Model	Minor	$7,707
St Louis	MO	Renovate and Realign RMC Office Space	Minor	$6,600
St Louis	MO	Renew Lease at Lees Summit VR&E Office	Leases	$72
Jackson	MS	Renovate and Realign Jackson to eRO Format	Minor	$9,130
Fort Harrison	MT	Renew Lease at Missoula VR&E Office	Leases	$80

City	ST	Potential Future Year Above-Threshold Projects Project Name – Short Description	Project Type	Total Est. Cost (000s)
Fort Harrison	MT	Renovate and Realign Ft Harrison to eRO Format	Minor	$4,900
Fort Harrison	MT	Brace Non-structural Components at Ft Harrison	Minor	$750
Winston-Salem	NC	Renew Lease at Winston Salem Wacovia Center	Leases	$2,108
Winston-Salem	NC	Renew Lease at Winston Salem RO	Leases	$1,723
Fargo	ND	Renovate and Realign Fargo RO to eRO Format	Minor	$2,085
Lincoln	NE	Renovate and Realign Lincoln RO to eRO Model	Minor	$7,743
Newark	NJ	Realign Newark RO	Minor	$8,900
Albuquerque	NM	Renew Lease at Las Cruces VR&E Office	Leases	$23
Reno	NV	Renew Lease at Reno RO	Leases	$979
Buffalo	NY	Build out at Buffalo RO lease	Minor	$9,903
Cleveland	OH	Renew Lease at Cleveland RO3	Leases	$15
Cleveland	OH	Build out at Lease Renewal for Cincinnati VR&E Office	Minor	$283
Philadelphia	PA	Renew Lease at Harrisburg VR&E Office	Leases	$45
Philadelphia	PA	Realign Philadelphia RO	Minor	$9,800
Pittsburgh	PA	Renew Lease at Pittsburgh RO Parking	Leases	$11
Pittsburgh	PA	Build out at new lease up on 10/22/26	Minor	$8,000
Columbia	SC	Renew Lease at Greenville VR&E Office	Leases	$40
Sioux Falls	SD	Renovate and Realign Sioux Falls RO	Minor	$2,406
Nashville	TN	Renew Lease at Suite 760 Highwood	Leases	$330
Nashville	TN	Renew Lease at Nashville VR&E Office	Leases	$96
Nashville	TN	Renew Lease at Nashville RO 5	Leases	$16
Nashville	TN	Build out a Nashville RO FB lease in FY25	Minor	$9,924
Houston	TX	Complete the Realignment and Renovation of the Houston RO	Minor	$8,393
Houston	TX	Replace Sagging Ceiling Tile at Houston RO	Minor	$2,365
Houston	TX	Replace Worn Carpet in Houston RO	Minor	$1,700
Waco	TX	Renew Lease at Tyler VR&E Office	Leases	$35
Salt Lake City	UT	Renew Lease at Ogden VR&E Office	Leases	$8
Salt Lake City	UT	Renovate and Realign Salt Lake City RB2 to eRO Model	Minor	$9,900
Salt Lake City	UT	Renovate and Realign Salt Lake City RO	Minor	$7,091
Salt Lake City	UT	Refresh Salt Lake City RB2	Minor	$3,300
Seattle	WA	Renew Lease at Seattle SeaTac	Leases	$2,200
Seattle	WA	Renew Lease at Seattle RO3	Leases	$33
Huntington	WV	Renew Lease at Huntington RO	Leases	$2,850

Chapter 8.6
Staff Offices

Introduction

VA Staff Offices (SO) are central, Departmental organizations. These include: General Counsel; Inspector General; Enterprise Integration; Public and Intergovernmental Affairs; Congressional and Legislative Affairs; Acquisition, Logistics, and Construction Management; Human Resources and Administration; and Information Technology.

Staff Offices Action Plan Strategy

The SO Action Plan strategy focuses on condition gaps identified in the Strategic Capital Investment Planning (SCIP) process. The Action Plan will reduce gaps through projects and non-capital solutions. SO funds are used for infrastructure repairs and enhancements to improve operations and provide acceptable and operationally suitable work environments, as well as to complete modifications and upgrades to existing facilities to expand capacity. The plan includes projects to maintain space (electrical and painting) and to reconfigure space (adding or removing offices) to accommodate FTE changes, including telework.

Office of Information Technology (OIT) Action Plan Strategy

OIT's SCIP optimizes utilization of data center space and employee/non-IT support space as part of a long-term strategy to reduce operational costs and environmental impacts; this ensures that IT systems remain operational and secure. OIT's plan does not include major construction; it utilizes non-capital solutions and minor construction to correct deficiencies and optimize operational space utilization.

To improve the interoperability and standardization of VA's technical infrastructure and IT services to foster increasing levels of organizational effectiveness and customer satisfaction, OIT has implemented, and continues to refine standards for the technical environment / infrastructure across the VA enterprise. These projects include hardening of IT system security and correction of environmental deficiencies for mission critical systems. This is achieved while optimizing data center space utilization and shifting to standardized platforms and infrastructures.

SCIP Estimated Long Range Magnitude Costs

The estimated cost to correct all currently-identified gaps for Staff Offices is between $224.1 and $273.9 million. Total estimated costs provided in the table on the following page are preliminary planning costs and are subject to change as projects are further refined.

Table 6-1: Staff Office Capital Investment Projects by Type

Staff Offices	2021		Future Years	
Project Type	# of Projects	2021 TEC ($000)	# of Projects	Future Year TEC ($000)[1]
Major Construction	0	$0	0	$0
Leases	7	$5,863	1	$16,700
Minor Construction	2	$33,500	39	$89,061
NRM	0	$0	0	$0
Other (includes disposals and sharing projects)	0	$0	0	$0
Project Specific Subtotal	**9**	**$39,363**	**40**	**$105,761**
Future Year Planning (Minors and NRM)[1]	N/A	$0	-	$0
Below Threshold (BT)/Emergent Needs[2]	TBD	$0	-	$5,335
Non-Recurring Activation Costs[3]	-	$66,188	-	$23,621
Recurring Activation Costs[3]	-	$0	-	$0
IT Non-Recurring Activation Costs[3]	-	$4,324	-	$2,247
IT Recurring Activation Costs[3]	-	$1,441	-	$749
Total	**9**	**$111,316**		**$137,712**

[1]Future planning includes estimates for NRMs and Minors for future years, non-major lease, disposal, and sharing projects for the ten-year planning horizon.
[2]The Staff Offices Action Plan includes lump sums for emergent needs below the established dollar threshold of $500,000 that will be allocated during the year.
[3]Non-recurring and recurring activation totals are inclusive of the entire cost over a 10 year time frame and are reflected in the first funding year for each project.

The 2021 minor construction request is comprised of $33.5 million for new SCIP 2021 projects and $10 million for below threshold/urgent needs.

The 2021 potential leases are list in the table below.

Table 6-2: Staff Office 2021 Potential Leases (Sorted by State and City)

City	ST	Project Name - Short Description	Total First Year Estimated Cost ($000)[1]
Washington	DC	Replacement Lease – 1575 I St NW	$2,142
Washington	DC	Lease Renewal – 1717 H St NW	$2,055
Washington	DC	Replacement Lease for FMBT at L'Enfant Plaza	$736
Washington	DC	Replacement Lease – 90 K St. NE	$618
Indianapolis	IN	OGC – New Lease to Expand Indianapolis	$183
Winston-Salem	NC	OGC – Lease Renewal Winston-Salem	$66
Akron	OH	OGC – Renew Akron Lease	$63

[1]Lease costs include first year annual unserviced rent plus any associated build out cost, but excludes future annual rent payments.

For planning purposes, VA utilizes an established dollar amount for project specific inclusion in the Action Plans. The Staff Offices use a dollar of $500,000 to identify specific Minor Construction projects to be included on the list of potential projects for future years (beyond 2021), provided in Table 6-3, below. The costs for all below-threshold projects are rolled into the overall Staff Office estimate as a lump-sum.

Table 6-3: Potential Staff Office Future Year Above-Threshold Projects (Sorted by State, City, and Type)

City	ST	Potential Future Year Above-Threshold Projects Project Name – Short Description	Project Type[1]	Total Est. Cost (000s)
Washington	DC	Lease renewal for 801 I Street	Lease	$16,700
Washington	DC	GSA Construction	Minor	$1,000
Washington	DC	VACO Construction	Minor	$1,000
Washington	DC	General Counsel Office Renovations in 810 Vermont Avenue	Minor	$450
Washington	DC	Renovate NCA Space in 810 Vermont	Minor	$450
Washington	DC	Renovate OALC Space in 810 Vermont Avenue	Minor	$450
Washington	DC	Space Planning Services	Minor	$300
Hines	IL	Data Center Electrical Service Upgrade	Minor	$9,614
Hines	IL	Add UPS and distribution system	Minor	$4,999
Hines	IL	Data Center Electrical System Upgrades (PDUs)	Minor	$3,960
Hines	IL	Data Center Dedicated HVAC System and Building Water Condenser Water System Upgrades	Minor	$3,000
Hines	IL	Parking lot expansion and complete repaving	Minor	$2,750
Hines	IL	Replace existing transformers	Minor	$2,000
Hines	IL	General construction to room 161	Minor	$1,200
Hines	IL	Replace and modernize existing paralleling gear system	Minor	$499
Hines	IL	Renovate Distribution Operations Space, Phase 2	Minor	$499
Philadelphia	PA	Expand and Renew Data Center Electrical Support Systems	Minor	$9,600
Philadelphia	PA	Relocate Main Utility Power Feed	Minor	$7,000
Philadelphia	PA	Renew and Upgrade Data Center Mechanical Support Systems	Minor	$7,000
Philadelphia	PA	Renew Mechanical Infrastructure Support Systems	Minor	$1,600
Philadelphia	PA	Mechanical Infrastructure gap correction	Minor	$ 975
Philadelphia	PA	Data Center Monitoring System Connectivity	Minor	$700
Austin	TX	Remodel Entire Building Office Space	Minor	$8,000
Austin	TX	Install Roof Top energy efficient cooling system for AITC Computer Room	Minor	$2,300
Austin	TX	Electrical Infrastructure gap corrections	Minor	$2,200
Austin	TX	Replace end of life Circuit Breaker Panel in Room 160E	Minor	$2,000
Austin	TX	Hot/Cold Isle Containment in Computer Room	Minor	$2,000
Austin	TX	Mechanical Infrastructure gap corrections	Minor	$1,900
Austin	TX	Safety Infrastructure gap corrections	Minor	$1,700
Austin	TX	Replace Data Center Wet Sprinkler System	Minor	$1,500
Austin	TX	Replace end of life Generator switchgear for power system A	Minor	$1,000
Austin	TX	Install redundant A/C units in Telecom Rooms (12 Rooms)	Minor	$1,000
Austin	TX	Install transfer switches for each computer room air cond. unit	Minor	$625
Austin	TX	Reconfigure Office Space for teleworking, desk sharing, hoteling, etc.	Minor	$495
Austin	TX	Command Center Remodel	Minor	$450
Austin	TX	Replace Cafeteria Flooring	Minor	$250
Martinsburg	WV	Electrical Infrastructure gap corrections	Minor	$2,745
Martinsburg	WV	Perimeter vehicle restraint system	Minor	$850
Martinsburg	WV	Lobby Remodel	Minor	$550
Martinsburg	WV	Computer Room Economizer HVAC System	Minor	$450

[1] Lease costs include first year annual unserviced rent plus any associated build out cost, but excludes future annual rent payments.

This Page Intentionally Left Blank

Chapter 9.1

Enhanced-Use Leasing and the Annual Consideration Report

Part I – Enhanced-Use Lease Program

Background on VA's Enhanced-Use Lease Program

The national health care delivery system and demographics have created both exciting opportunities and expensive inefficiencies for the government. VA infrastructure was largely designed and built when hospitalization and in-patient care were the norm. The new paradigm of health care delivery, supported by medical and technological advances, now allows for the delivery of most patient care through outpatient services. Veteran demographics and geographic concentrations are also changing. Since World War II, the Veteran population has shifted to the west and south of the United States, along with the general population. The current VA network-based health care system often requires a different set of assets and infrastructure from those in VA's current inventory of buildings and land.

In response to these changes in demographics and health care delivery, VA has utilized an innovative capital asset management tool called Enhanced-Use Leasing (EUL) to more effectively utilize its underutilized real property assets. VA first obtained its legislative authority in 1991 (38 U.S.C. § 8161-8169) to enter into EULs. VA's EUL authority expired on December 21, 2011. VA's EUL was later modified and reinstated in 2012 via Public Law 112-154, Section 211, through December 21, 2023. EUL is a cooperative arrangement in which underutilized VA properties are made available to public or private entities in exchange for monetary consideration at fair value as determined by the Secretary. Additionally, through the EUL program, VA has been able to engage in strategic partnerships which have allowed VA to offer expanded services to Veterans (for example, by creating supportive housing facilities for Veterans and their families); to generate substantial cost savings (for example, by facilitating campus realignment projects); and to help VA meet its sustainability goals (for example, by building on-site renewable energy facilities, thus enabling VA to reduce its greenhouse gas emissions).

VA's former EUL authority, leased properties could be developed for VA and/or non-VA uses compatible with the mission of the Department. Under the original EUL authority, the Department would obtain fair value consideration in the form of revenue and/or in-kind services.

Title 38 U.S.C. § 8161, Public Law 114-244 passed into law on September 29, 2016 and enacted the West Los Angeles Leasing Act of 2016. The enactment of this law allows VA to enter into an EUL of up to 75 years and collect cash consideration, but the authority is specifically limited to the West Los Angeles property.

The EUL authority was further amended via Public Law 115-182 (MISSION Act), specific to required reviews. Prior to the change in 38 U.S.C. § 8162 implemented by the MISSION Act, EULs had to be certified in advance in by the Director of Office of Management and Budget (OMB). The change made by the MISSION Act only requires OMB to review each EUL to ensure it does not include certain terms as outlined in 38 U.S.C. § 8162(b)(5), but no longer requires certification in writing from the Director of OMB.

Legislative Authority to Expand VA's Current EUL Authority beyond Supportive Housing
VA continued to propose certain amendments to Title 38 U.S.C. to authorize VA to pursue EULs for purposes beyond creating supportive housing. The "only supportive housing" constraint on the current EUL authority hinders VA's ability to enter into a wide range of agreements on VA property that could provide cost savings for VA and benefit Veterans across the country. For example, VA has many underutilized buildings, some of which are eligible to be listed on the National Register of Historic Places. Repurposing these facilities is expensive and in many cases the restoration costs are beyond the scope of low-income/homeless supportive housing projects. Furthermore, supportive housing is not perceived by the market as being needed in a number of markets where VA may have underutilized real property assets. An expanded EUL authority would allow a broader mix of potential uses such as medical office space or other Veteran focused support services especially for those areas with limited need for supportive housing. In addition, expanding the EUL authority would increase VA's opportunities to generate revenue that would serve as a source of funding deposited into the Medical Care Collection Fund account. The Medical Care Collection Fund account would be used to support renovation and new construction costs to provide additional units of supportive housing.

Benefits to Veterans
Veterans have enjoyed access to an expanded range of services such as homeless housing, job training, mental health counseling, etc. as a result of the EUL program. Without the EUL authority, homeless Veteran housing services would not be as readily available and accessible on some medical center campuses. VA has used its EUL authority to develop housing projects that included both transitional and permanent supportive housing for Veterans who are homeless or at risk of homelessness, as well as for independent and assisted living for senior and disabled Veterans. As of the close of fiscal year (FY) 2019, there are 49 EUL projects with a housing component currently in operation, providing 3,135 units of housing with another 357 units currently under construction or awaiting construction start. Many other services have come to fruition as a result of the VA's EUL authority such as hospice centers, mental health facilities, expanded parking, and child care facilities.

Benefits to VA
Because of VA's real property assets under this authority, VA's EUL program has encouraged innovative public/private partnerships which have greatly benefited VA. The various EUL projects repurpose underutilized capital assets, land and buildings, and/or transfer some or all of the cost to construct and/or renovate, operate and maintain these properties to third-party partners. Use of this program has resulted in savings realized by VA in operations and maintenance of its underutilized buildings and land assets through cost avoidance.

Generally, when an agency generates revenue connected to real property, proceeds must be deposited in the U.S. Treasury. Under VA's EUL authority, VA is allowed to retain funds received as

consideration and redirect the net proceeds to Veteran services and also to fund the EUL program itself. This in turn, provides the incentive necessary to encourage VA to be creative and to aggressively pursue EUL opportunities to partner with both private and non-profit entities to more effectively utilize VA's real property assets.

The EUL program has proven to be an innovative tool that provides VA partners with long-term access to underutilized VA buildings and/or land assets in exchange for fair consideration that benefits Veterans. Moreover, the EUL itself, as financeable collateral, allows VA's development partners access to pursue capital and operating funding in the private debt markets in order to enhance VA's capital assets through renovation and/or construction of supportive housing facilities, while providing supportive services that directly improve the lives of our Veterans.

Benefits to Developers and Local Community

An EUL provides the developer (lessee) with the long-term property interest necessary to secure financing through the capital markets and to amortize any capital investment made to the property or facility. Initially, during the construction phase of development, these EUL projects provide the local community with gainful jobs for skilled labors and trades. In the long term, although the underlying land remains Federal property, once leased, the facility improvements are subject to state and local taxes, increasing the tax base for the local community during the term of the lease. The developer (lessee) is responsible to pay annualized taxes on the improvements to the respective state and any local government agency. The increased tax dollars that are generated over the term of the EUL are then used by the community to support schools, emergency services (fire, police and medical), and community facilities (public parks, water and sewer systems). This increase to the tax base helps to support the local community's ability to provide needed services.

Transparency

A key component of the EUL program is close coordination with, and the involvement of, the local government and community as full partners in the development process. For example, VA must hold a public hearing at the location of any proposed EUL to obtain Veteran and local community input. Before conducting a hearing, the Secretary is required to provide reasonable notice to the general public regarding the proposed lease and of the hearing. If after a public hearing the Secretary intends to enter into an EUL of the property, the Secretary shall notify the Congressional Veterans' Affairs committees, the Committees on Appropriations, and the Committees on the Budget of the House of Representatives and the Senate of the Secretary's intention to enter into an EUL. The Secretary shall also publish a notice of such intention in the Federal Register. Upon the request of the congressional committees and not later than 30 days after the date of such notice, the Secretary shall testify before the committees on the EUL, including the status of the lease, the cost, and the plans to carry out the activities under the lease.

In summation, the VA EUL authority allows VA to more effectively realign its existing real property portfolio in a way that creates value for Veterans, VA, and other stakeholders throughout a given community. Local governments, Veterans groups, private partners, and community members benefit as underutilized properties are redeveloped to provide new services and economic opportunities for Veterans, VA, and the local community.

Working toward the objective of alleviating Veteran homelessness, VA is continuing its ongoing evaluation of unused and underutilized buildings on existing VA properties for potential homeless

housing opportunities through public-private collaboration and VA's EUL program. To date, the EUL program has provided many Veterans across the county with housing and supportive services, which has contributed to the goal of ending Veteran homelessness nationally. A complete list of EULs can be found in the index of this report. The EUL program has the dual benefit of (1) supporting VA's initiative to end homelessness among our Veterans, while (2) reducing the cost of operating and maintaining VA's inventory of underutilized buildings and land.

Strategic Vision for 2020

The VA EUL program will continue its efforts to provide a vehicle for VA towards achieving its goal to eliminate Veteran homelessness across the nation.

Through the EUL program in 2020, VA expects to continue to increase the number of permanent homeless housing facilities with the goal of providing additional housing and services for homeless Veterans and Veterans at risk of homelessness.

Part II – Enhanced-Use Lease Consideration Report

EUL Consideration Report

The EUL Consideration Report, published by VA, describes VA's stewardship of its underutilized real property assets via its EUL authority and details the motivation and terms of each lease. The EUL Consideration Report is an annual report that provides a transparent view of the measurable outcomes of VA asset utilization through the EUL program. The report also documents VA's best practices within the EUL program. It is important to note that EULs also provide "soft" benefits that are not quantified in this report, such as improved health care outcomes, quality of life, customer service, improved satisfaction for Veterans, socioeconomic stimulus and other benefits to local communities, and improved community relations for VA.

Honoring its commitment to effectively monitor its resources, VA has been working to standardize the mechanisms and calculations used to measure the revenues, expenses, and other benefits derived from its EULs. Systematic efforts have been made to institute policies and regulate procedures whereby all data and documentation gathered accurately and clearly reflect the EULs' cost-benefit outcomes. Benchmarks have been established for each EUL project type, and steps have been taken to monitor the reporting and documentation of each EUL. The methodology reflected in this report and outlined in further detail below has been used to calculate consideration figures for FY 2012 through FY 2019, as well as the data that has been accumulated since FY 2006.

In this report, we attempt to quantify the consideration VA realizes from its operational EULs in terms of cash (**revenue)** and in-kind consideration (**cost avoidance**, **cost savings** and **enhanced services**) to Veterans, VA, and/or the community, net of any **VA expenses** generated by the lease.

Active Project Portfolio

EUL projects can be divided into three (3) major categories according to the type of benefits provided. These categories are used for classification purposes, but are not mutually exclusive in terms of the benefits a particular EUL can provide:

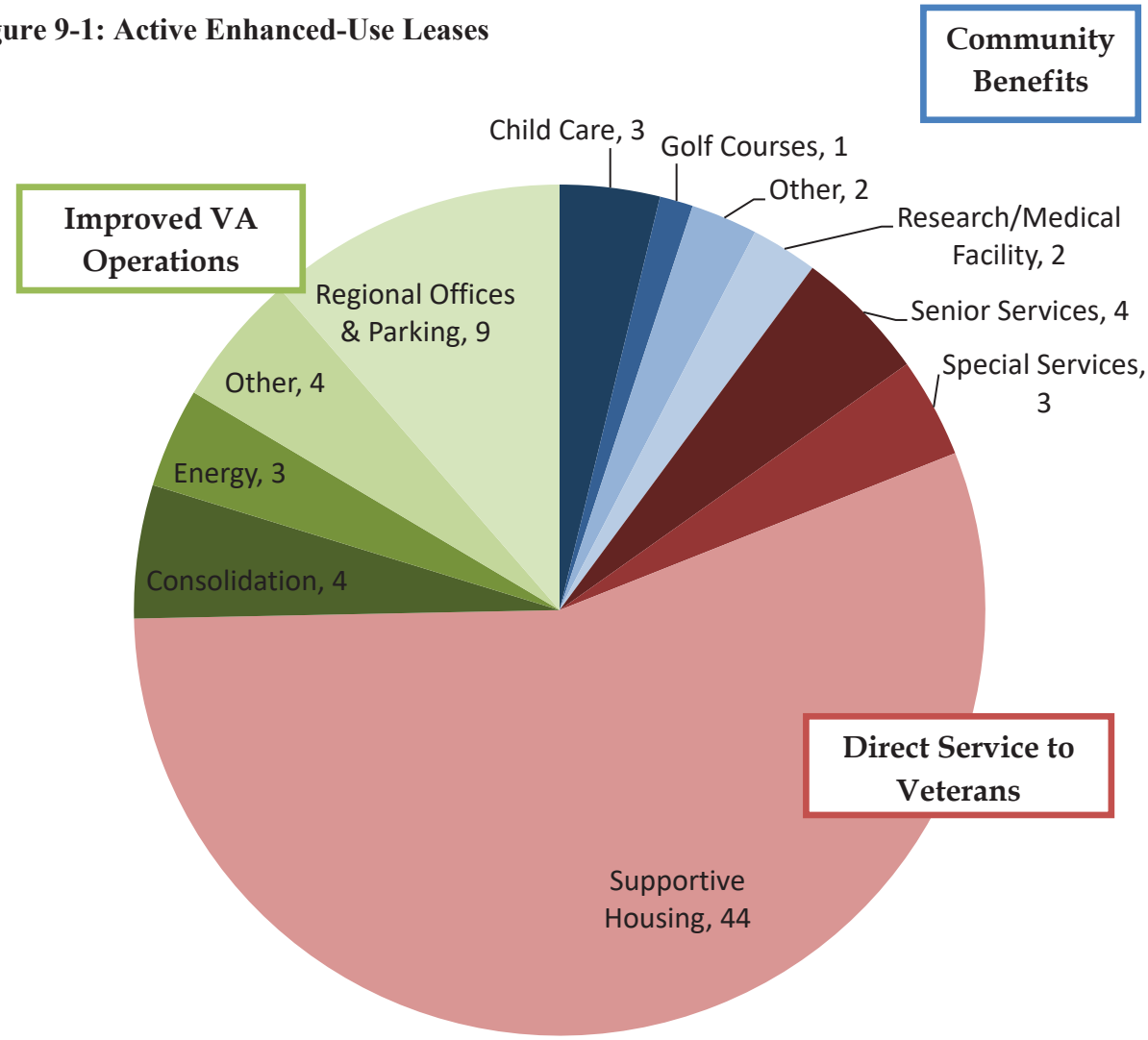
- **Direct Service to Veterans.**
  EULs in this category provide Veterans with certain services that augment the existing services provided at VA medical centers (VAMCs) or services that are not available at the VAMCs, in many cases because VA is not authorized to provide such certain specific services itself. Examples of services VA is not authorized or able to directly provide include housing, hospice, employment counseling, and crisis triage facilities. However, those services are able to be offered on VA property through mechanism of the EUL. Our partners are able to provide Veterans with priority placement for services, and in some cases, are able to serve Veterans exclusively. All of these EUL projects represent cost avoidance to VA in terms of bed days of care or similar health care services that VA would likely need to provide if the EUL did not exist. Housing projects located on VA campuses provide safe, affordable shelter and living arrangements near health care providers, which contribute to positive health care outcomes for Veterans.

- **Improved VA Operations.**
  EULs in this category contribute to more effective and improved use of VA resources to enhance services to Veterans. Examples include regional office co-locations, VISN offices, parking, consolidation of services, energy generation, visitor centers, and public safety buildings. Unlike Direct Service to Veterans, this type of EUL provides services or cost avoidance directly to VA and contributes to better use of VA's infrastructure and/or resources. While cost savings from rent, parking, and energy as well as cost avoidance can be easily measured, other benefits from this type of EUL (such as improved services, access, and increased Veteran satisfaction) are not as quantifiable. For example, providing additional parking capacity via EUL allows Veterans to park closer to and walk a shorter distance to get to their appointments, improving the Veteran experience. Another non-quantifiable benefit from this type of EUL is locating a Veterans Benefits Office through an EUL onto a VA Medical Center campus which allows Veterans to obtain both health and benefit services in one location, also improving the Veteran experience.

- **Community Benefits.**
  EULs in this category provide services to the general community, in addition to Veterans and/or VA itself. Examples include research and development facilities, additional parking, and child care. The main impact of these leases is through revenue generation, cost avoidance, and difficult-to-quantify benefits such as community relationship improvement and increased VA employee/Veteran satisfaction.

A further breakout of the active EULs by category is illustrated in the graph on the following page in Figure 9-1.

Figure 9-1: Active Enhanced-Use Leases



There are 79 active EULs, all of which are featured in the 2019 EUL Consideration Report. These featured EULs are broken down by individual project summaries, highlights, and outcomes. The 2019 EUL Consideration Report does feature one new EUL project which became operational in fiscal year 2019 (Fort Harrison, MT Permanent Supportive Housing). As of FY 2019, active EULs provide 3,135 available housing units to Veterans. Additional phase of existing EUL projects which became operational in FY 2019: (Leavenworth (Phase 3) Permanent Supporting Housing and Hines III (Phase 2) Permanent Supportive Housing. Additional EULs will continue to become operational over the course of several fiscal years and will be reported in this Consideration Report as they become operational.

Cumulative EUL Consideration

Operating Impact: The EUL program directly impacts VA's operations by providing revenue in the form of upfront payments and ongoing lease payments. In addition, VA's operations are improved and enhanced by cost avoidance, i.e., the value of goods or services provided by the lessees

that would have otherwise been paid by VA, and by cost savings, i.e., the market price of goods or services supplied by the lessees to VA minus VA's current cost to procure these goods and services. This consideration is offset by project and program expenses. These positive operating impacts allow VA to continue to expand access to existing programs and services, as well as to provide additional services to Veterans.

The table below presents estimated cumulative EUL consideration since 2006, as it impacts VA's operations.

Table 9-1: Cumulative EUL Considerations

Fiscal Year	Revenue (+)	Cost Avoidance (+)	Cost Savings (+)	Project Expenses (-)	Program Expenses (-)	Total Budget Impact
2006	$23.5m	$15.0m	$9.3m	($8.1m)	($3.5m)	$36.1m
2007	$1.2m	$18.2m	$10.8m	($1.7m)	($7.8m)	$20.8m
2008	$1.5m	$23.3m	$14.4m	($1.7m)	($3.8m)	$33.8m
2009	$1.4m	$20.4m	$11.3m	($2.3m)	($3.5m)	$27.4m
2010	$3.1m	$27.9m	$12.3m	($11.6m)	($2.9m)	$28.8m
2011	$1.3m	$29.3m	$10.7m	($27.3m)	($7.1m)	$6.9m
2012	$9.4m	$32.1m	$13.8m	($9.3m)	($1.2m)	$44.8m
2013	$1.9m	$39.9m	$10.6m	($19.4m)	($3.0m)	$30.0m
2014	$1.8m	$51.9m	$10.7m	($13.8m)	($2.7m)	$47.9m
2015	$1.5m	$55.9m	$9.2m	($18.3m)	($2.3m)	$46.0m
2016	$1.3m	$60.9m	$4.7m	($20.1m)	($1.4m)	$45.4m
2017	$1.7m	$64.1m	$6.1m	($14.1m)	($4.2m)	$53.6m
2018	$2.0m	$86.3m	$7.9m	($16.8m)	($3.5m)	$76.0m
2019	$2.0m	$95.3m	$6.4m	($12.7m)	($2.1m)	$88.9m
Total	**$53.7m**	**$620.5m**	**$138.3m**	**($177.2m)**	**($48.9m)**	**$586.4m**

Some historic values in the chart have been updated to reflect more accurate information received after initial submission. Adjustments are detailed on the individual project pages.

Enhanced Services: In addition to the consideration elements that have a direct impact on VA's operating budget, this report captures the value of enhanced services, i.e., the value of newly available or expanded services to Veterans, VA employees, and/or the community that do not impact VA's operating budget.

The table below presents an estimate of the cumulative value of enhanced services provided since 2006.

Table 9-2: Cumulative Value of Enhanced Services:

Fiscal Year	Enhanced Services
2006	$18.7m
2007	$21.9m
2008	$23.9m
2009	$26.2m
2010	$29.4m
2011	$33.7m
2012	$33.6m
2013	$42.9m
2014	$48.1m
2015	$49.7m
2016	$56.0m
2017	$65.8m
2018	$67.4m
2019	$75.3m
TOTAL	**$592.6m**

Some historic values in the chart have been updated to reflect more accurate information received after initial submission. Adjustments are detailed on the individual project pages.

The estimated value for enhanced services presented in the Consideration Report may not accurately reflect all benefits that accrue as a result of the EUL project as some benefits are difficult to evaluate, quantify and monetize. In addition, the estimated enhanced service value presented in the Consideration Report does not reflect all costs incurred by entities outside of VA, in the development or operation of the project. For these reasons, the enhanced service value presented should not necessarily be considered as an element of a cost-benefit analysis of an EUL project.

Consideration Methodology

The methodology, reflected in this report and outlined below, was used to calculate consideration figures for FY 2006-2018 in last year's Consideration Report. The same methodology is being

used to calculate the 2019 consideration figures as depicted in this report. No changes have been made to the consideration methodology since 2012.

For each EUL, VA quantifies the consideration and benefits VA realizes in terms of cash (revenue) and other in-kind consideration (cost avoidance, cost savings, enhanced services) to Veterans, VA, and/or the community. VA also tracks expenses pertaining to each lease. More specifically, these consideration elements are defined as follows:

- **Revenue:** Any **revenue** or **payments** to VA, this includes both upfront payments and ongoing payments.
- **Cost Avoidance:** Any amount VA would have had to pay to maintain or operate a facility and/or deliver services in the absence of an EUL (only includes land or existing buildings that are part of the EUL, not any new improvements being constructed).
- **Cost Savings:** Any discount realized on necessary VA purchases, such as energy, office space, or parking services. Specific EUL projects may show negative cost savings, meaning that VA is paying more than the benchmark rate used in the methodology. These cases are due to unique circumstances with that particular EUL or the local benchmarks used, but are shown as negative expenses to reflect the actual benefit generated by the lease.
- **Enhanced Services:** Value of newly available services to Veterans, VA employees, and/or the community.
- **Expenses:** Any incremental expense incurred due to the EUL.

Revenue	Cost Avoidance	Cost Savings	Enhanced Services	VA Expenses
New cash receipts to VA	Amount VA would have paid to maintain facility and/or deliver services in the absence of an EUL	Discounts realized on necessary VA purchases, such as energy, office space, or parking	Value of newly available services to Veterans, VA employees, and/or the community	New expenses associated with the lease (not already subtracted in calculation of cost savings)

(+) Impact on VA Operating Budget

Budget Neutral

(-) Impact on VA Operating Budget

Beginning in the 2012 Consideration Report, in reformulating its consideration methodology, VA implemented a number of changes to its former approach:

- Rent has been renamed **Ongoing Lease Payments** to differentiate from the rent that VA pays to lessees in those cases where VA leases portions of the facility back from lessees.
- The new category **Up Front Lease Payment** captures and distinguishes one-time, upfront payments from the lessee from the other ongoing payments described above.

- Calculations of **Cost Avoidance** and **Cost Savings** have been standardized by using predetermined market benchmarks and VA actual costs, rather than allowing facilities to determine benchmarks on their own.
- The definition of **Enhanced Services** has been expanded to include the value of new benefits available to the community.
- A line item for **Expenses,** such as third party reports, maintenance, and other expenses incurred by VA during the execution or steady-state phases of an EUL project, has been added to the consideration calculation. Program overhead costs are not included in these numbers as they are not tied to specific projects; they are general costs incurred to oversee the program and are included in table 9-1 as program expenses and included in the cumulative consideration calculation.

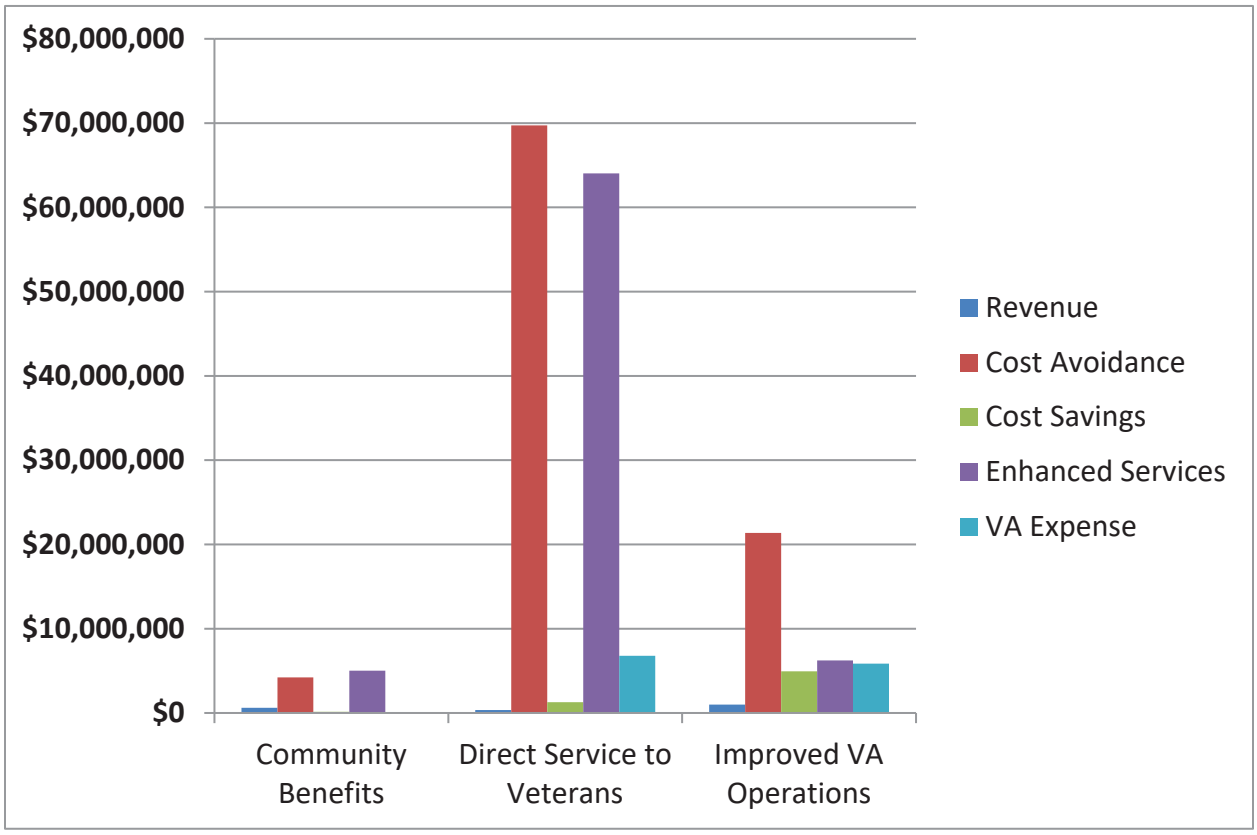
For further detail on VA's EUL consideration methodology, refer to Lease Consideration Definitions on page 9.1-90.

Across project types, EULs generated $164.2 million in total consideration to VA in FY 2019, including $2.0 million in revenue, $95.3 million in cost avoidance, $6.4 million in cost savings, and $75.3 million in enhanced services (excludes $12.7 million in project expenses and $2.1 million in program expenses). The direct budget impact to VA in FY 2019 is $88.9 million. Since 2006, the EUL program has cumulatively generated $1.2 billion in total consideration to VA, including $53.7 million in revenue, $620.5 million in cost avoidance, $138.3 million in cost savings, and $592.6 million in enhanced services (excludes $177.2 million in project expenses and $48.9 million in program expenses). The cumulative direct budget impact to VA is $586.4 million.

Average Recurring Consideration per Project Category

The form of consideration varies by project and project category. On average, direct service projects tend to generate the majority of their value through enhanced services, such as providing supportive housing to Veterans and the community. In contrast, improved VA operations projects tend to deliver the majority of their value through cost avoidance on VA facility and land maintenance and cost savings on large VA purchases, such as energy, office space, and parking. Community benefit projects affect VA primarily through enhanced services by making services such as child care available to VA employees and the community.

Figure 9-2: FY 2019 Comparison of Consideration by Project Category



Note: *Program overhead expenses for FY 2019 are not included in the chart above. Expenses associated with program overhead are attributed to the program as a whole, including contractor expenses related to formulation, execution and oversight.*

Quick Guide to EUL Summaries

Direct Service to Veterans

Project Categorization within this report

Supportive Housing

Project Subcategory

BARBERS POINT, HAWAII

Project Title

Permanent and Transitional Supportive H

MOTIVATION: Barbers Point, Hawaii recognized an unmet need for supportive services, including housing for homeless Veterans throu This project leases the 6.00 acre Barbers Point property inc ings, to a private developer, and offers a total of 244 safe, s ble housing beds: 146 permanent housing beds and 98 transi ***Benefits to Veterans:*** This EUL provides beds to mentally adult homeless Veterans on a priority basis. In addition, enhanced services provided by this project such as meals, tional classes, and training to residents.

Benefits to VA: VA receives consideration in the form of ongoing lease payments and avoi and bed days of care costs that would have otherwise been incurred.

Note: Per Diem expenses are included for FY 2016 and FY 2018 because the 98 transitional housing beds are part of a VA Grant and Per Diem program operated by the United States Veterans Initiative.

Description of project background, consideration pre-2005, and benefits (including those that could not be quantified, as applicable)

Terms

Lessee	Property	Key Terms	Awarded	Term
Cloudbreak, Hawaii, LLC	6 acres, 3 Buildings (65,963 sq. ft.)	▪ Lessee to provide no less than 118 beds for homeless Veterans and non-Veterans ▪ Priority placement for Veterans ▪ VA receives ongoing lease payments of 2% gross revenue	2003	50 years

Outcomes	Description	Cumulative (2006-2018)	2018	2017
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing L	209,992	$10,661	$10,504
Cost Avoidance	Avoided B	836,393	$553,593	$417,135
	Avoided P	$77,274	$33,231	$5,718
	Avoided C	2	$5,060,900	$4,199,918
Cost Savings	Rental Sav	1	$37,141	$36,238
VA Expense	Per Diem I	0	$1,694,067	$1,637,908
Direct Budget Impact	Fiscal Yea	2	**$4,001,459**	**$3,031,605**
	Estimated Value of Enhanced Services (Budget			
Enhanced Services	Value of Veteran Units	$32		
	Value	$12,714,895	$0	$484,687
	Value	$2,400,944	$43,524	$59,512
Total Consideration	Fiscal Year Grand Total	**$82,162,597**	**$8,262,864**	**$7,169,175**

Forms of consideration that directly affect VA's

Any incremental expense incurred due to the EUL; negatively affects VA's operating budget

Excludes the estimated value of Enhanced Services

Value of new services to Veterans, VA employees, and/or the community

Direct Service to Veterans

Supportive Housing

AUGUSTA I, GEORGIA

Permanent Supportive Housing

MOTIVATION: The EUL project located at the Uptown VAMC campus of the Charlie Norwood VA Medical Center is providing 70 units of permanent, affordable housing for homeless Veterans, Veterans at risk of homelessness, disabled Veterans, and their families, who are able to live independently. Through this EUL, the lessee financed, designed, developed, constructed, and will operate and maintain a permanent housing community and associated vehicular parking spaces.

Benefits to Veterans: Priority placement is given to eligible homeless Veterans and Veterans at risk of homelessness. Veterans also benefit from a supportive services program that guides resident Veterans toward long-term independence and self-sufficiency. The co-location of this project on the VAMC campus ensures that Veterans have ready access to care and treatment.

Benefits to VA: The EUL allows VA to avoid the maintenance costs associated with the Uptown VAMC campus.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Freedom's Path, LLC	11.56 acres, 2 Buildings (58,600 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement for admission ▪ Facility of 70 units and 87 parking spaces	2011 *(Operations began: 2018)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$414,730	$325,688	$89,043
	Avoided Property Maint. Costs	$85,602	$69,596	$16,006
	Avoided Cost of Bed Days of Care	$1,768,391	$1,452,085	$316,306
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
	Capital Contribution	$1,557,855	$0	$1,557,855
Direct Budget Impact	**Fiscal Year Subtotal**	**$710,868**	**$1,847,368**	**-$1,136,500**
	Estimated Value of Enhanced Services (Budget Neutral)			
Enhanced Services	Value of Veteran Units	$1,431,983	$1,168,365	$263,618
	Value of Non-Veteran Units	$109,704	$70,810	$38,894
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$2,252,555**	**$3,086,543**	**-$833,988**

Direct Service to Veterans

Supportive Housing

AUGUSTA II, GEORGIA

Permanent Supportive Housing

MOTIVATION: The EUL project located at the Uptown campus of the Charlie Norwood VA Medical Center is providing 28 units of permanent housing for homeless Veterans, Veterans at risk of homelessness, disabled Veterans, and their families, who are able to live independently. Through this EUL, the lessee financed, designed, developed, constructed, and will operate and maintain a permanent housing community and associated vehicular parking spaces.

Benefits to Veterans: Priority placement is given to eligible homeless Veterans and Veterans at risk of homelessness. Veterans also benefit from a supportive services program that guides resident Veterans toward long-term independence and self-sufficiency. The co-location of this project on the VAMC campus ensures that Veterans have ready access to care and treatment.

Benefits to VA: The EUL allows VA to avoid the maintenance costs associated with the Uptown VAMC campus.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Augusta Veterans Residences Limited Partnership	2.25 acres, 1 Building (26,752 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement for admission ▪ Facility of 28 units and 42 parking spaces	2011 *(Operations began: 2018)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$158,498	$124,468	$34,030
	Avoided Property Maint. Costs	$16,661	$13,546	$3,115
	Avoided Cost of Bed Days of Care	$717,223	$572,034	$145,190
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
	Capital Contribution	$1,608,036	$0	$1,608,036
Direct Budget Impact	**Fiscal Year Subtotal**	**-$715,653**	**$710,048**	**-$1,425,701**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$581,270	$460,265	$121,005
	Value of Non-Veteran Units	$35,405	$35,405	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**-$98,979**	**$1,205,718**	**-$1,304,696**

Direct Service to Veterans

Supportive Housing

BARBERS POINT, HAWAII

Permanent and Transitional Supportive Housing

MOTIVATION: Barbers Point, Hawaii recognized an unmet need for supportive services, including housing for homeless Veterans throughout the community. This project leases the 6.00 acre Barbers Point property including three (3) buildings, to a private developer, and as of FY 2019 offers a total of 286 safe, supportive, and affordable housing beds: 188 permanent housing beds and 98 transitional housing beds.

Benefits to Veterans: This EUL provides beds to mentally ill, disabled, and single adult homeless Veterans on a priority basis. In addition, Veterans benefit from enhanced services provided by this project such as meals, transportation, educational classes, and training to residents.

Benefits to VA: VA receives consideration in the form of ongoing lease payments and avoided building, property, and bed days of care costs that would have otherwise been incurred.

Note: Per Diem expenses are included for FY 2016 and FY 2018 because the 98 transitional housing beds are part of a VA Grant and Per Diem program operated by the United States Veterans Initiative.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Cloudbreak, Hawaii, LLC	6 acres, 3 Buildings (65,963 sq. ft.)	▪ Lessee to provide no less than 118 beds for homeless Veterans and non-Veterans ▪ Priority placement for Veterans ▪ VA receives ongoing lease payments of 2% gross revenue	2003	50 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$226,365	$16,373	$10,661
Cost Avoidance	Avoided Building Maint. Costs	$8,665,988	$829,595	$553,593
	Avoided Property Maint. Costs	$113,396	$36,122	$33,231
	Avoided Cost of Bed Days of Care	$41,107,259	$5,566,327	$5,060,900
Cost Savings	Rental Savings	$250,824	$37,773	$37,141
VA Expense	Per Diem Payments	$11,302,605	$1,734,845	$1,694,067
Direct Budget Impact	**Fiscal Year Subtotal**	**$39,061,228**	**$4,751,345**	**$4,001,459**
Estimated Value of Enhanced services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$37,215,608	$4,478,733	$4,217,882
	Value of Non-Veteran Units	$13,299,078	$584,183	$0
	Value of Other Services	$2,472,984	$72,040	$43,524
Total Consideration	**Fiscal Year Grand Total**	**$92,048,898**	**$9,886,300**	**$8,262,864**

Direct Service to Veterans

Supportive Housing

BATAVIA, NEW YORK

Transitional Supportive Housing

MOTIVATION: VA identified the need for transitional housing and accompanying services in the Western New York area, where many Veterans are homeless with multiple medical conditions. Through this EUL, the lessee rehabilitated "Building 1" on the property into an 18-bed, 11-unit transitional housing services facility for eligible Veterans and non-Veterans of the Western New York Health Care System, and remains responsible for the maintenance, repair, and operation of the project and property.

Benefits to Veterans: This project provides safe, supportive, and affordable housing to homeless Veterans on a priority basis. The property's proximity to the Medical Center campus ensures easy access to treatment and services for Veterans to support recovery and improved life opportunities. In addition, Veterans benefit from enhanced services provided by the project.

Benefits to VA: In addition to ongoing lease payments, VA receives consideration from this project in the form of cost avoidance for building maintenance, property maintenance, and bed days of care that would have otherwise been incurred in the absence of this project.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Cazenovia Recovery Systems, Inc.	3.00 acres, 1 Building (7,195 sq. ft.)	▪ VA receives ongoing lease payments ▪ Eligible Veterans will receive priority admission to the facility and priority receipt of supportive services offered within the facility	2008	40 years, *(plus three options for successive 10 year extensions)*

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$305,643	$0	$47,828
Cost Avoidance	Avoided Building Maint. Costs	$195,294	$36,901	$26,849
	Avoided Property Maint. Costs	$53,489	$18,061	$16,615
	Avoided Cost of Bed Days of Care	$2,315,658	$0	$280,009
Cost Savings	N/A	$0	$0	$0
VA Expense	Maintenance	$829,519	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$2,040,565**	**$54,962**	**$371,301**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$2,109,007	$0	$233,366
	Value of Non-Veteran Units	$88,264	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration[1]	**Fiscal Year Grand Total**	**$4,237,835**	**$54,962**	**$604,668**

[1] Since July 2018, the facility has not provided Transitional Housing services and has been vacant (Veterans have been relocated to alternate housing facilities).

Direct Service to Veterans

Supportive Housing

BATTLE CREEK, MICHIGAN

Permanent Supportive Housing

MOTIVATION: VA identified the need for more access to suitable housing conditions in order to support the Battle Creek VAMC's operations and address homeless Veteran concerns in the community. This EUL leases 4.95 acres of VAMC property for the lessee to finance, construct, operate, and maintain a housing facility providing 75 units of safe, affordable, drug and alcohol free housing and services to eligible Veterans and non-Veterans. An amendment for Phase II of the EUL at Battle Creek leased another 5.06 acres of land to the lessee and resulted in the construction of 100 additional apartments, which were operational for all of FY 2015.

Benefits to Veterans: Veterans receive priority placement into the housing facility, as well as supportive services including professional counseling, case management, and job training. In addition, the proximity of the facility to the VAMC campus ensures easy access to the treatment necessary to support the full recovery of the Veterans served.

Benefits to VA: This project results in cost avoidance to VA through reduced operating costs, including property maintenance and reduced reliance on in-patient and domiciliary resources. In the event the lessee is unable to provide priority placement for eligible Veterans, VA would receive rental payments until the eligible Veterans are placed in the facility.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Medallion Management, Inc.	10.01 acres	▪ Priority placement for VA-referred Veterans ▪ VA receives payments if priority placement is unavailable	2008 *(Operations began: 2010)*	50 years *(plus 25 year extension option)*

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$14,345	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$`151,566	$60,264	$55,440
	Avoided Cost of Bed Days of Care	$24,496,239	$3,850,226	$3,629,744
Cost Savings	N/A	$0	$0	$0
VA Expense	Third Party Reports	$6,200	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$24,655,951**	**$3,910,490**	**$3,685,184**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$21,697,272	$3,097,938	$3,025,120
	Value of Non-Veteran Units	$94,871	$0	$0
	Value of Other Services	$225,000	$75,000	$75,000
Total Consideration	**Fiscal Year Grand Total**	**$46,673,093**	**$7,083,427**	**$6,785,304**

Direct Service to Veterans

Supportive Housing

BEDFORD, MASSACHUSETTS

Permanent Supportive Housing - SRO

MOTIVATION: Bedford, MA recognized the acute need for safe, affordable housing for the homeless Veteran population in greater Boston, where the only affordable housing available is often in unsafe areas where alcohol and drug abuse are widespread, which is unsuitable for Veterans who are in recovery and need a supportive living arrangement. Through this EUL, the lessee rehabilitated "Building 5" on the leased property into a 60-unit Single Room Occupancy (SRO) to provide permanent housing to homeless Veterans in the community.

Benefits to Veterans: This project provides safe, supportive, and affordable housing to mentally ill, disabled, and single adult homeless Veterans. All services are offered exclusively to Veterans.

Benefits to VA: The SRO facility provides revenue, and allows VA to avoid costs associated with building maintenance, property maintenance, and outpatient and domiciliary resources that otherwise would have been utilized in the absence of this project.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Vietnam Veterans Workshop, Inc.	1.00 acre, 1 Building (23,686 sq. ft.)	▪ 100% priority placement for eligible Veterans into all services offered ▪ VA receives ongoing lease payments	2004 *(Operations began: 2008)*	55 years *(plus a 20 year extension option)*

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$1,210,251	$65,797	$72,412
Cost Avoidance	Avoided Building Maint. Costs	$1,678,551	$158,218	$149,293
	Avoided Property Maint. Costs	$18,899	$6,020	$5,538
	Avoided Cost of Bed Days of Care	$10,187,729	$1,122,066	$995,587
Cost Savings	N/A	$0	$0	$0
VA Expense	Non-recurring Maintenance	$22,00	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$13,073,430**	**$1,352,102**	**$1,222,830**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$9,286,399	$902,828	$829,747
	Value of Non-Veteran Units	$1,620,458	$159,323	$207,437
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$23,980,287**	**$2,414,252**	**$2,260,014**

Direct Service to Veterans

Supportive Housing

BEDFORD, MASSACHUSETTS

Permanent Supportive Housing

MOTIVATION: The Bedford Housing EUL project recognized a continued demand for affordable veteran housing on the Edith Nourse Rogers Memorial Veterans Hospital in Bedford. This facility, built on 5.2 acres of property, provides 69 units of supportive rental housing to homeless veterans. Through this project, units will be offered at or below 30% to 60% of Area Median Income. Supportive services to be offered include individualized case management to assist Veterans achieve long term goals.

Benefits to Veterans: Veterans will receive priority placement in the 69 unit facility and admission into the supportive services offered. Nine of the 69 units are handicap accessible and three units include features for those with visual and hearing disabilities. In addition, Veterans benefit from the site's close proximity to the VAMC campus.

Benefits to VA: This EUL provides safe, affordable, and permanent supportive housing while avoiding the costs associated with in-patient care, construction and property maintenance.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Bedford Place, LLC	5.2 acres	▪ 69-bed facility that provides affordable housing and supportive services ▪ 100% of total units designated as Veteran priority placement	2011	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$65,693	$31,306	$28,800
	Avoided Cost of Bed Days of Care	$4,260,858	$1,408,083	$1,348,191
Cost Savings	N/A	$0	$0	$0
VA Expense	Capital Contribution	$2,411,000	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$1,915,551**	**$1,439,389**	**$1,376,991**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$3,553,950	$1,132,960	$1,123,616
	Value of Non-Veteran Units	$157,658	$88,513	$69,146
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$5,627,159**	**$2,660,861**	**$2,569,752**

Direct Service to Veterans

Supportive Housing

BROCKTON, MASSACHUSETTS

Permanent Supportive Housing

MOTIVATION: The EUL project located at the Brockton campus of the VA Boston Healthcare System is providing 14 units of permanent supportive housing for eligible Veterans who are homeless, or at risk of homelessness. Through this EUL, the lessee financed, designed, developed, renovated, and will operate and maintain a permanent supportive housing community and associated vehicular parking spaces.

Benefits to Veterans: Priority placement is given to eligible homeless Veterans and Veterans at risk of homelessness. Veterans also benefit from a supportive services program that guides resident Veterans toward long-term independence and self-sufficiency. The co-location of this project on the VAMC campus ensures that Veterans have ready access to care and treatment.

Benefits to VA: The EUL allows VA to avoid the maintenance costs associated with the Brockton campus.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Howard House, LLC	0.8 acres, 1 Building (13,334 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement for admission ▪ Facility of 14 units and 17 parking spaces	2011 *(Operations began: 2016)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$57,925	$9,773	$27,670
	Avoided Property Maint. Costs	$9,819	$4,816	$4,431
	Avoided Cost of Bed Days of Care	$774,208	$308,018	$290,380
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
	Capital Contribution	$1,200,000	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**-$358,048**	**$322,607**	**$322,480**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$640,265	$247,835	$242,010
	Value of Non-Veteran Units	$25,070	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$307,287**	**$570,442**	**$564,490**

Direct Service to Veterans

Supportive Housing

BUTLER, PENNSYLVANIA
Transitional Supportive Housing

MOTIVATION: Butler, PA, recognized the unmet need for supportive services and affordable housing for Veterans in the Butler VA community. Through this EUL, the lessee constructed a two-story addition to "Building 5" (Deshon Place) on the VAMC campus, expanding the VAMC's existing transitional housing program by 10 single-occupancy units for homeless Veterans and other citizens.

Benefits to Veterans: This project provides safe, supportive, and affordable housing to mentally ill, disabled, and single adult homeless Veterans, who receive priority placement into all of the SRO units and services offered. If there are no Veterans referred or on the waiting list, a unit could be offered to a non-Veteran. The proximity to the Medical Center campus ensures easy access to treatment and services that support recovery and improved life opportunities for the Veterans served.

Benefits to VA: This project allows VA to avoid costs associated with building maintenance, property maintenance, outpatient services, and domiciliary resources for Building 5 that otherwise would have been utilized in the absence of this project.

Terms	Lessee	Property	Key Terms	Awarded	Term
	County of Butler, Pennsylvania	0.26 acres, 1 Building (8,688 sq. ft.), 10 Units	▪ Priority placement for VA-referred Veterans ▪ Addition of 10 single-occupancy units for a total of 20 units	2007 *(Operations began: 2010)*	35 years *(plus a 20 year extension option)*

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$469,566	$47,875	$35,462
	Avoided Property Maint. Costs	$4,805	$1,565	$1,440
	Avoided Cost of Bed Days of Care	$995,930	$88,005	$62,224
Cost Savings	N/A	$0	$0	$0
VA Expense	Maintenance	$7,500	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$1,462,801**	**$137,445**	**$99,126**
	Estimated Value of Enhanced Services (Budget Neutral)			
Enhanced Services	Value of Veteran Units	$918,736	$70,810	$51,859
	Value of Non-Veteran Units	$2,224,790	$283,240	$293,869
	Value of Other Services	$341,930	$117,650	$110,150
Total Consideration	**Fiscal Year Grand Total**	**$4,948,257**	**$609,145**	**$555,004**

Direct Service to Veterans

Supportive Housing

CANANDAIGUA, NEW YORK

Permanent and Transitional Supportive Housing

MOTIVATION: The Cadence Square EUL project at the Canandaigua VA Medical Center is delivering 33 units (48 beds) of permanent/transitional housing for homeless and at-risk Veterans and their families. Through this EUL, the lessee financed, renovated, constructed, and now operates a transitional and permanent housing facility on 1.90 acres of property, providing supportive services that guide Veteran residents toward attaining long-term independence and self-sufficiency.

Benefits to Veterans: This project offers eligible Veterans priority placement into affordable, safe, and substance-free housing. Veterans also receive an array of supportive services. The consolidation and use of VAMC land enables services and VA personnel to be centralized, which result in efficiencies and improved access to health care services.

Benefits to VA: The EUL allows VA to avoid costs associated with maintaining the leased property. In addition, this project will result in significant cost avoidance to VA by reducing reliance on community residences and hospitalization of Veterans.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Cazenovia Recovery Systems, Inc.	1.90 acres, 1 Building (41,100 sq. ft.)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement for all services offered ▪ No less than 33 tenant units and associated parking provided	2012 *(Operations began: Q1 FY 2014)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$521,745	$140,195	$128,628
	Avoided Property Maint. Costs	$28,793	$11,439	$10,523
	Avoided Cost of Bed Days of Care	$4,039,218	$616,036	$725,949
Cost Savings	N/A	$0	$0	$0
VA Expense	Per Diem Payments	$1,393,714	$0	$259,296
	Capital Contribution	$1,340,690	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$1,855,352**	**$767,670**	**$605,804**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$3,527,875	$495,670	$605,024
	Value of Non-Veteran Units	$773,811	$265,538	$138,291
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$6,157,037**	**$1,528,878**	**$1,349,119**

Direct Service to Veterans

Supportive Housing

CHILLICOTHE, OHIO

Permanent Supportive Housing

MOTIVATION: The EUL project is a 60-unit permanent supportive housing complex for eligible Veterans who are homeless, or at risk of homelessness on the Chillicothe VA Medical Center campus. Through this EUL, which came about as a partnership between the VA and Chillicothe Veterans Residences Limited Partnership, the lessee financed, designed, developed, renovated, and will operate and maintain a permanent supportive housing community and associated vehicular parking spaces.

Benefits to Veterans: Priority placement is given to eligible homeless Veterans and Veterans at risk of homelessness. Veterans also benefit from a supportive services program that guides resident Veterans toward long-term independence and self-sufficiency. The co-location of this project on the VAMC campus ensures that Veterans have ready access to care and treatment.

Benefits to VA: The EUL allows VA to avoid the maintenance costs associated with the facility.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Chillicothe Veterans Residences Limited Partnership	5.3856 acres, 1 Building (53,689 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement for admission ▪ Facility of 60 units and 64 parking spaces	2015 *(Operations began: 2016)*	71 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$66,583	$32,450	$29,852
	Avoided Cost of Bed Days of Care	$2,607,734	$1,276,075	$1,120,035
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
	Capital Contribution	$1,300,857	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$1,373,459**	**$1,308,525**	**$1,149,888**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$2,141,272	$1,026,745	$933,466
	Value of Non-Veteran Units	$793,730	$35,405	$103,718
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$4,308,461**	**$2,370,675**	**$2,187,072**

Direct Service to Veterans

Supportive Housing

DANVILLE, ILLINOIS

Permanent Supportive Housing

MOTIVATION: The EUL project located at the campus of the Danville VAMC is providing 65 units (1, 2, and 3-bedroom units) of permanent supportive housing for eligible Veterans and their families who are homeless, or at risk of homelessness. The lessee agreed to construct, operate, and maintain a permanent housing facility for at risk Veterans and their families at the VA Danville Campus.

Benefits to Veterans: Priority placement is given to eligible homeless Veterans and Veterans at risk of homelessness. Veterans also benefit from a supportive services program that guides resident Veterans toward long-term independence and self-sufficiency. The co-location of this project on the VAMC campus ensures that Veterans have ready access to care and treatment.

Benefits to VA: The EUL allows VA to reduce maintenance costs associated with the Danville campus.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Danville Veterans Housing LLC	10.64 acres, 1 Building (74,108 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement for admission ▪ Facility of 65 units and 79 parking spaces	2015 *(Operations began: 2016)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$130,591	$64,057	$58,929
	Avoided Cost of Bed Days of Care	$3,606,024	$1,408,083	$1,348,191
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
	Capital Contribution	$850,184	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$2,886,431**	**$1,472,140**	**$1,407,120**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$2,983,607	$1,132,960	$1,123,616
	Value of Non-Veteran Units	$105,448	$17,703	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$5,975,486**	**$2,622,802**	**$2,530,736**

Direct Service to Veterans

Supportive Housing

DAYTON, OHIO

Transitional Supportive Housing – Building 400

MOTIVATION: VA realized a need for transitional housing and related "wrap-around" supportive services in the Dayton community. Through this EUL, the lessee renovated, operates, and maintains "Building 400" on the 1.50 acres of property leased from the Dayton VAMC, providing 50 units of transitional housing beds and related supportive services to eligible Veterans and non-Veterans.

Benefits to Veterans: This project provides safe, supportive, drug and alcohol free housing and supportive services to Veterans, who receive 100% priority placement. The proximity of the facility to the VAMC campus ensures easy access to treatment and services necessary to support recovery and improve life opportunities for the Veterans served.

Benefits to VA: The EUL allows VA to avoid costs associated with building maintenance, property maintenance, outpatient services, and domiciliary resources that otherwise would have been utilized in the absence of this project. In addition, VA receives income consideration from ongoing lease payments.

Note: Previous Consideration Reports understated Per Diem Payments made by VA. These figures have been corrected and the report now reflects the full VA Expense impact of the EUL.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Volunteers of America of Greater Ohio	1.50 acres, 1 Building (39,750 sq. ft.)	▪ VA receives ongoing lease payments ▪ Eligible Veterans receive priority placement for all services offered ▪ No less than 50 units of transitional housing provided	2008	30 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$59,255	$5,772	$5,715
Cost Avoidance	Avoided Building Maint. Costs	$1,861,510	$393,982	$202,805
	Avoided Property Maint. Costs	$26,809	$9,031	$8,308
	Avoided Cost of Bed Days of Care	$6,997,870	$528,031	$435,569
Cost Savings	N/A	$0	$0	$0
VA Expense	Per Diem Payments	$7,686,800	$708,100	$864,320
	Capital Contribution	$477,256	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$781,388**	**$228,715**	**-$211,923**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$6,395,844	$424,860	$363,014
	Value of Non-Veteran Units	$1,462,971	$460,265	$501,306
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$8,640,203**	**$1,113,840**	**$652,397**

Direct Service to Veterans

Supportive Housing

DAYTON, OHIO

Transitional Supportive Housing – Building 402

MOTIVATION: The Dayton VAMC recognized an unmet need for safe, clean, and affordable housing opportunities in the area for homeless Veterans. Through this EUL, Ohio Avenue Commons, LLC (OAC) renovated, operates, and maintains "Building 402" of the property, and provides 27 units of transitional housing and related supportive services for eligible Veterans and non-Veterans.

Benefits to Veterans: This project provides safe, supportive, and affordable housing to mentally ill, disabled, and single adult homeless Veterans, who receive 100 percent priority placement into the facility and any services and programs offered. The proximity of the facility to the Medical Center campus ensures easy access to treatment and services that support recovery and improve life opportunities for the Veterans served. In addition, other services such as life skills training, first aid, and clothing are offered.

Benefits to VA: Besides providing ongoing lease payments, this EUL allows VA to avoid costs associated with building maintenance, property maintenance, outpatient services, and domiciliary resources that otherwise would have been utilized in the absence of this project.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Ohio Avenue Commons, LLC	0.60 acres, 1 Building (23,060 sq. ft.)	▪ VA receives annual ongoing lease payments ▪ Eligible Veterans receive priority placement for all services offered ▪ No less than 27 units of transitional housing provided	2007 *(Operations began: 2008)*	65 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$59,773	$0	$6,055
Cost Avoidance	Avoided Building Maint. Costs	$1,193,134	$228,559	$117,652
	Avoided Property Maint. Costs	$11,089	$3,612	$3,323
	Avoided Cost of Bed Days of Care	$969,362	$198,012	$124,448
Cost Savings	N/A	$0	$0	$0
VA Expense	Maintenance	$1,824	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$2,231,534**	**$430,183**	**$251,478**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$861,443	$159,323	$103,718
	Value of Non-Veteran Units	$3,897,801	$318,645	$363,014
	Value of Other Services	$1,025,845	$129,417	$129,417
Total Consideration	**Fiscal Year Grand Total**	**$8,016,622**	**$1,037,567**	**$847,628**

Direct Service to Veterans

Supportive Housing

DAYTON, OHIO

Permanent Supportive Housing – Building 412

MOTIVATION: Prior to the execution of this project, the deteriorating physical condition of "Building 412" on the Dayton VAMC campus jeopardized the residential housing services provided to homeless adults diagnosed with substance abuse and/or mental illness, made available via short-term 3-year out-lease of the building. This EUL provided VA the opportunity to out-lease the property for a long-term period, obtain necessary building improvements and renovations, and continue to offer 34 housing units to homeless Veterans and non-Veterans in the community.

Benefits to Veterans: This project provides safe and affordable permanent housing to Veterans, who receive priority placement into the facility. The proximity of the facility to the Medical Center campus ensures easy access to treatment and services necessary to support recovery and improve life opportunities for the Veterans served. In addition, other services such as life skills training, first aid, and clothing are offered.

Benefits to VA: The EUL allows VA to avoid costs associated with building maintenance, property maintenance, outpatient services, and domiciliary resources that otherwise would have been utilized in the absence of this project. In addition, VA receives income consideration from ongoing lease payments.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Miami Valley Housing Opportunities	2.20 acres, 1 Building (46,567 sq. ft.)	▪ VA receives annual ongoing lease payments ▪ Eligible Veterans receive priority placement for all services offered	2004	50 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$596,898	$50,637	$40,648
Cost Avoidance	Avoided Building Maint. Costs	$2,641,921	$461,548	$237,585
	Avoided Property Maint. Costs	$41,579	$13,245	$12,185
	Avoided Cost of Bed Days of Care	$2,573,813	$110,006	$207,414
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$5,854,211**	**$635,436**	**$497,831**
	Estimated Value of Enhanced Services (Budget Neutral)			
Enhanced Services	Value of Veteran Units	$2,412,073	$88,513	$172,864
	Value of Non-Veteran Units	$4,523,255	$513,373	$414,874
	Value of Other Services	$2,182,919	$157,491	$157,491
Total Consideration	**Fiscal Year Grand Total**	**$14,972,459**	**$1,394,812**	**$1,243,060**

Direct Service to Veterans

Supportive Housing

DAYTON, OHIO

Senior Supportive Housing – Building 415

MOTIVATION: Under this project, the lessee, Lyons Place II Limited Partnership, financed, developed, and maintains an assisted living facility of at least 55 tenant units and 59 associated parking spaces located within the Dayton, OH VAMC. This EUL provides affordable, safe, substance-free senior supportive housing and supportive quality-of-life services to eligible senior Veterans and non-Veterans, and their families of the Dayton community.

Benefits to Veterans: Eligible Veterans will receive priority admission into the Facility and priority receipt of the supportive services offered within the Facility. In addition, this Facility will increase availability of affordable senior supportive housing for eligible senior Veterans and non-Veterans.

Benefits to VA: This project will result in significant cost avoidance to VA by reducing reliance upon in-patient and domiciliary resources that may otherwise have been utilized in the absence of this project. In addition, the project permits more VA resources to be directed toward direct Veteran care.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Lyons Place II Limited Partnership	6 acres, 1 Building (55,561 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement into the Facility and any services and programs offered therein ▪ No less than 55 tenant units and 59 associated parking units provided	2013 *(Operations began: 2015)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$86,735	$36,122	$33,231
	Avoided Cost of Bed Days of Care	$3,835,283	$1,034,061	$933,363
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
	Capital Contribution	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$3,922,018**	**$1,070,183**	**$966,594**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$3,268,064	$832,018	$777,888
	Value of Non-Veteran Units	$929,619	$141,620	$172,864
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$8,119,701**	**$2,043,820**	**$1,917,346**

Direct Service to Veterans

Supportive Housing

FORT HARRISON, MONTANA

Permanent Supportive Housing

MOTIVATION: The Ft. Harrison Veterans Residences Limited Partnership EUL project at the Fort Harrison, Montana VA Medical Center delivers 42 tenant units and 60 associated parking spaces for the purpose of providing affordable, safe, and drug-free permanent housing for homeless and disabled Veterans within the Ft. Harrison community. Through this EUL, the lessee financed, designed, developed, occupied, operated and maintained the land, which offers supportive services to eligible Veterans and non-Veterans.

Benefits to Veterans: Eligible Veterans will receive priority placement over all other applicants for housing and any services and programs offered within the Permanent Supportive Housing Facility.

Benefits to VA: VA avoids building and property maintenance costs associated with the project and will experience significant reduction in the cost of bed days of care for veterans residing in one of these units.

Terms	Lessee	Property	Key Terms[1]	Awarded	Term
	Ft. Harrison Veterans Residences Limited Partnership	12 Buildings (34,982 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement in facility and receipt of programs & services ▪ Facility of 42 units and 60 parking spaces	2011 *(Operations began: June 2019)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	*Lease became operational in June 2019.*
	Ongoing Lease Payments	$0	$0	
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	
	Avoided Property Maint. Costs	$10,766	$10,766	
	Avoided Cost of Bed Days of Care	$6,417	$6,417	
Cost Savings	N/A	$0	$0	
VA Expense	Maintenance	$0	$0	
	Capital Contribution	$3,214,443	$3,214,443	
Direct Budget Impact	**Fiscal Year Subtotal**	**-$3,197,260**	**-$3,197,260**	
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$5,163	$5,163	
	Value of Non-Veteran Units	$41,306	$41,306	
	Value of Other Services	$0	$0	
Total Consideration	**Fiscal Year Grand Total**	**-$3,150,791**	**-$3,150,791**	

[1]Only 9 units were operational in FY 2019. All 42 units will be operational in January 2020.

Direct Service to Veterans

Supportive Housing

FORT SNELLING, MINNESOTA

Permanent Supportive Housing

MOTIVATION: The CBVA Minneapolis Limited Partnership EUL project at the Fort Snelling Upper Post VAMC is delivering 58 tenant units and 45 associated parking spaces for the purpose of providing supportive housing and services to eligible homeless and disabled Veterans. Through this EUL, the lessee financed, designed, developed, constructed, operated, and maintains a housing facility on 5.76 acres of property, providing permanent residences and supportive services to eligible Veterans and non-Veterans of the Minneapolis—St. Paul, Minnesota community.

Benefits to Veterans: Eligible Veterans will receive priority admission into the Facility and priority receipt of the supportive services offered within the Facility. The consolidation and use of VAMC land enables residents to benefit from proximity to VA services, which result in improved access to health care services.

Benefits to VA: The EUL allows VA to avoid costs associated with maintaining the leased property, and additionally allows more VA resources to be applied toward direct Veteran care.

Terms	Lessee	Property	Key Terms	Awarded	Term
	CBVA Minneapolis Limited Partnership	5.76 acres	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement into the Facility and any services and programs offered therein ▪ No less than 58 tenant units and 45 associated parking units provided	2011 *(Operations began: 2015)*	50 years *(plus a 25 year extension option)*

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$1,746,378	$394,096	$400,917
	Avoided Property Maint. Costs	$83,265	$34,677	$31,902
	Avoided Cost of Bed Days of Care	$4,544,915	$1,166,068	$1,099,294
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
	Capital Contribution	$788,090	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$5,586,468**	**$1,594,842**	**$1,532,112**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$3,879,002	$938,233	$916,179
	Value of Non-Veteran Units	$225,085	$88,513	$86,432
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$9,690,554**	**$2,621,587**	**$2,534,724**

Direct Service to Veterans

Supportive Housing

GRAND ISLAND, NEBRASKA

Permanent Supportive Housing

MOTIVATION: The Victory Place EUL project located at the Grand Island VA Medical Center campus is providing 26 apartment units (20 one-bedroom apartments and 6 two-bedroom apartments) targeted for low-income Veterans who are homeless or at risk of becoming homeless. If the demand exceeds the 26 units provided in the initial phase of the project, the developer will consider implementing a second and/or third phase for additional apartment buildings on the same land. Through this EUL, the lessee financed, designed, developed, constructed, and will operate and maintain a permanent housing community.

Benefits to Veterans: Eligible Veterans or a Veteran's widowed spouse who is homeless or at risk of becoming homeless will have priority over all other applicants for housing and any services and programs offered within the facility.

Benefits to VA: The EUL allows VA to avoid costs associated with maintaining the leased property. In addition, this project will result in significant cost avoidance to VA by reducing reliance on domiciliary resources.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Victory Place, LLC	5.4 acres, 1 Building (26,959 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement for admission ▪ Facility of 26 apartment units and 52 parking spaces	2011 *(Operations began: 2017)*	55 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$56,641	$27,694	$25,477
	Avoided Cost of Bed Days of Care	$1,513,395	$572,034	$539,276
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$1,570,036**	**$599,727**	**$564,753**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$1,253,728	$460,265	$449,446
	Value of Non-Veteran Units	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$2,823,764**	**$1,059,992**	**$1,014,200**

Direct Service to Veterans

Supportive Housing

HINES, ILLINOIS

Transitional Supportive Housing – Building 14

MOTIVATION: The Edward Hines, Jr. VA Hospital recognized an unmet need for transitional housing for Veterans and other residents in the Hines, IL community. This EUL rehabilitated "Building 14", a previously vacant building on the VAMC campus, into a 41-unit residential transitional housing facility consisting of 40 units for low-income or very-low income persons and 1 unit for managers and social service providers.

Benefits to Veterans: Homeless and formally homeless Veterans receive priority placement into 40 units and associated services of the transitional housing facility. The proximity of the facility to the Medical Center campus ensures easy access to treatment and the services necessary to support recovery. In addition, other services such as a work program are offered by the lessee.

Benefits to VA: This EUL is expected to reduce VA operating costs by transferring the maintenance of "Building 14" and the associated property to the lessee. VA also avoids costs associated with outpatient and domiciliary resources that otherwise would have been utilized in the absence of the project, and receives income consideration from ongoing lease payments.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Shelters for the Homeless and Cooke's Manor, LLC	0.50 acres, 1 Building (18,702 sq. ft.)	▪ Veterans receive priority placement for 100% of the units ▪ VA receives annual ongoing lease payments	2004 *(Operations began: 2006)*	32 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$504,665	$81,957	$7,805
Cost Avoidance	Avoided Building Maint. Costs	$1,486,702	$151,225	$142,265
	Avoided Property Maint. Costs	$9,450	$3,010	$2,769
	Avoided Cost of Bed Days of Care	$5,714,019	$0	$0
Cost Savings	N/A	$0	$0	$0
VA Expense	Per Diem Payments	$6,148,305	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$1,566,531**	**$236,192**	**$152,839**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$5,516,161	$0	$0
	Value of Non-Veteran Units	$782,841	$0	$0
	Value of Other Services	$126,720	$0	$0
Total Consideration[1]	**Fiscal Year Grand Total**	**$7,992,253**	**$236,192**	**$152,839**

[1] Since September 2016, the facility has not provided Transitional Housing services (Veterans have been relocated to alternate housing facilities). VA continues to receive Lease Payments and Cost Avoidance through the EUL.

Direct Service to Veterans

Supportive Housing

HINES, ILLINOIS

Permanent Supportive Housing

MOTIVATION: The Hines Veterans Residences Limited Partnership EUL project at the Edward Hines Jr. VA Hospital is delivering 72 tenant units and 36 associated parking spaces for the purpose of providing housing for homeless and disabled Veterans within the Hines community. Through this EUL, the lessee financed, designed, developed, constructed, operated, and maintains a housing facility, which offers supportive services to eligible Veterans and non-Veterans. In FY 2019, Phase II of the EUL was completed, which added an additional 52 tenant units and 54 associated parking spaces.

Benefits to Veterans: This project offers eligible homeless and at-risk of homelessness Veterans priority placement into residential housing, providing private residences with numerous amenities to enhance independence and quality of life. Residents also benefit from close proximity to VA services.

Benefits to VA: The EUL allows VA to avoid costs associated with maintaining the leased property, and additionally allows more VA resources to be applied toward direct Veteran care.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Hines Veterans Residences Limited Partnership	4.6551 acres, 2 Building (129,887 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement into the Facility and any services and programs offered ▪ No less than 72 tenant units and 36 associated parking units provided	2013 *(Operations began: 2015)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$92,983	$53,716	$25,782
	Avoided Cost of Bed Days of Care	$6,417,560	$2,137,792	$1,451,898
Cost Savings	N/A	$0	$0	$0
VA Expense	Capital Contribution	$2,400,000	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$4,110,543**	**$2,191,508**	**$1,477,680**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$5,439,085	$1,720,093	$1,210,048
	Value of Non-Veteran Units	$615,270	$398,306	$34,573
	Value of Other Services	$0	$0	$0
Total Consideration[1]	**Fiscal Year Grand Total**	**$10,164,898**	**$4,309,907**	**$2,722,301**

[1]Previous Consideration Reports incorrectly reported a Fiscal Year 2016 VA Expense for 72 Per Diem Beds. The project is in fact supported by HUD VASH, and the current figure reflects the Per Diem Payments expense of zero.

Direct Service to Veterans

Supportive Housing

KERRVILLE, TEXAS

Permanent Supportive Housing

MOTIVATION: With over 1.6 million Veterans residing in Texas, the Kerrville VAMC recognized the need for more independent living units of permanent supportive housing for at risk Disabled and Senior Veterans. Through the EUL, the lessee has agreed to construct, renovate, operate, and maintain a permanent housing facility. The 49-unit facility will include 1-2 bedroom apartments offered at affordable rental rates. Freedom's Path will include various community amenities such as on-site management, fitness/rehab center and a club/dining room.

Benefits to Veterans: Veterans will receive 100 percent priority placement and benefit from close proximity to the VAMC campus.

Benefits to VA: By guiding resident Veterans towards long-term independence and self-sufficiency, the project reduces costs associated with in-patient services that otherwise would have been utilized in the absence of this project. In addition, VA avoids the costs of constructing and maintaining the property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Kerrville Senior Apartments Limited Partnerships	5 acres	▪ 49 independent living units and supportive services for risk Disabled and Senior Veterans ▪ 100% of total units designated as Veteran priority placement	2011	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$67,014	$30,102	$27,692
	Avoided Cost of Bed Days of Care	$2,407,952	$814,048	$705,207
Cost Savings	N/A	$0	$0	$0
VA Expense	Capital Contribution	$1,227,000	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$1,247,966**	**$844,150**	**$732,900**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$2,021,294	$654,993	$587,738
	Value of Non-Veteran Units	$1,262,825	$212,430	$259,296
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$4,532,084**	**$1,711,572**	**$1,579,933**

Direct Service to Veterans

Supportive Housing

LEAVENWORTH, KANSAS

Mixed Housing

MOTIVATION: Before the execution of this project, the Dwight D. Eisenhower VAMC campus contained 38 vacant and/or underused historical buildings of aging infrastructure. VA entered into this EUL to reuse, redevelop, and renovate the property for the purpose of providing affordable senior housing, long term care, and transitional housing. As of FY 2019, the project provides 161 units of housing to Veterans (137 one-bedroom units and 24 two-bedroom units).

Benefits to Veterans: This project offers a unique opportunity for Veterans, who receive priority placement, to live and receive care on the VAMC campus in a "life-care" community setting.

Benefits to VA: This EUL allows for the transfer of the costs of building and property maintenance and compliance with National Historic Preservation guidelines to a private partner. VA also avoids costs associated with domiciliary resources that otherwise would have been utilized in absence of the project.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Eisenhower Ridge Association	50.00 acres, 38 Buildings (547,882 sq. ft.)	▪ Lessee to redevelop, renovate, and reuse the facilities to operate affordable transitional and senior housing ▪ VA allowed continued use of certain buildings	2005 *(Operations began: 2006)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$18,352,586	$2,666,986	$2,719,296
	Avoided Property Maint. Costs	$944,967	$301,019	$276,924
	Avoided Cost of Bed Days of Care	$15,094,984	$2,530,148	$1,928,950
Cost Savings	N/A	$0	$0	$0
VA Expense	Renovations, Utilities	$22,993	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$34,369,543**	**$5,498,154**	**$4,925,169**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$13,546,067	$2,035,788	$1,607,635
	Value of Non-Veteran Units	$1,889,261	$814,315	$17,286
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$49,804,871**	**$8,348,256**	**$6,550,091**

Direct Service to Veterans

Supportive Housing

LINCOLN, NEBRASKA

Permanent Supportive Housing

MOTIVATION: Lincoln had a demonstrated need for affordable permanent supportive housing for Veterans and non-Veterans of the Eastern Nebraska and Western Iowa communities. The Victory Park Veterans Residence EUL provides affordable permanent supportive housing units supported by HUD-VASH housing vouchers. All 70 units are reserved for Veterans at or below 50 percent of the Area Median Income. This project is the first to be completed under the improvements of the existing Lincoln VAMC campus.

Benefits to Veterans: Eligible Veterans shall receive priority placement into the facility and any services and programs offered therein. The co-location of this project on the VAMC campus ensures that Veterans have ready access to care and treatment.

Benefits to VA: The EUL allows VA to avoid the cost of maintaining the leased property. In addition, this project will result in significant cost avoidance to VA by reducing reliance on domiciliary resources.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Seniors Foundation VA Vision, LLC	59.93 acres, 1 Building (58,970 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement for admission ▪ Facility of 70 units and 85 parking spaces	2011 *(Operations began: 2018)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$967,870	$323,697	$644,173
	Avoided Property Maint. Costs	$611,482	$360,621	$250,861
	Avoided Cost of Bed Days of Care	$2,785,142	$1,540,090	$1,245,052
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
	Capital Contribution	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$4,364,495**	**$2,224,408**	**$2,140,086**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$2,154,170	$1,239,175	$914,995
	Value of Non-Veteran Units	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$6,518,665**	**$3,463,583**	**$3,055,082**

Direct Service to Veterans

Supportive Housing

LOS ANGELES, CALIFORNIA

Permanent Supportive Housing –Building 209

MOTIVATION: The EUL project at the VA Greater Los Angeles Healthcare System's (GLAHS) West LA campus is providing 54 units of permanent supportive housing to eligible Veterans and their families, comprising of 32 studios and 22 one-bedroom units in addition to one unit for an on-site resident manager. Through this EUL, the lessee is obligated to renovate, operate, and maintain affordable residential housing and associated vehicular spaces.

Benefits to Veterans: This project offers eligible Veterans priority placement into affordable and safe housing as well as priority receipt of any services and program offered at the facility. In addition, the consolidation and use of VAMC land enables services and VA personnel to be centralized on the GLAHS campus, which result in efficiencies and improved access to health care services.

Benefits to VA: The EUL allows VA to avoid costs associated with maintaining the leased property. In addition, this project will result in significant cost avoidance to VA by reducing reliance on community residences and reducing the hospitalization of Veterans.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Veterans Housing Partnership, LLC	1.84 acres, 1 Building (80,210 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement for admission ▪ Facility of 54 tenant units and one managers unit	2017	50 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$40,806	$21,006	$19,800
Cost Avoidance	Avoided Building Maint. Costs	$897,319	$464,307	$345,454
	Avoided Property Maint. Costs	$23,832	$12,041	$11,077
	Avoided Cost of Bed Days of Care	$2,753,747	$1,210,071	$1,140,777
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
	Capital Contribution	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$3,715,704**	**$1,707,425**	**$1,517,108**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$2,269,102	$973,638	$950,752
	Value of Non-Veteran Units	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$5,984,806**	**$2,681,062**	**$2,467,860**

Direct Service to Veterans

Supportive Housing

LYONS, NEW JERSEY

Permanent Supportive Housing

MOTIVATION Lyons, NJ has a demonstrated need for permanent supportive housing services in the local community for Veterans, at-risk Veterans, and non-Veterans. Under this EUL, the lessee is to finance, develop, construct, operate, and maintain a permanent supportive housing facility of at least 61 tenant units and 70 parking spaces. The facility is centrally located on the VAMC campus.

Benefits to Veterans: Eligible Veterans receive priority placement into affordable, safe and substance free housing and receive supportive services.

Benefits to VA: VA avoids the cost of maintaining the leased property. In addition, this project will result in significant cost avoidance to VA associated with domiciliary resources that otherwise would have been utilized in absence of the project.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Valley Brook Village I LLC,	12.88 acres	▪ Lessee is responsible for the coordination of client services across the consortium of health and social service organizations of which Lyons VAMC is a part ▪ 61 beds are designated as Veteran preferential	2012 *(Operations began: Q4 FY 2013)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$15,000	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$187,707	$77,543	$71,336
	Avoided Cost of Bed Days of Care	$6,964,122	$1,320,077	$1,244,484
Cost Savings	N/A	$0	$0	$0
VA Expense	Capital Contribution	$4,000,000	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$3,166,829**	**$1,397,620**	**$1,315,819**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$6,067,402	$1,062,150	$1,037,184
	Value of Non-Veteran Units	$34,989	$17,703	$17,286
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$9,269,220**	**$2,477,473**	**$2,370,290**

Direct Service to Veterans

Supportive Housing

MENLO PARK, CALIFORNIA

Permanent Supportive Housing

MOTIVATION: Since 2010 rental rates in the Bay Area have increased by 30 percent, expanding the need for affordable Veteran housing units near Palo Alto Health Care System - Menlo Park Division, a regional Veteran health care provider. The facility includes 60 newly constructed supportive rental units to be owned, operated, and maintained by the lessee. Through the EUL, supportive services will be offered to residents.

Benefits to Veterans: All 60 units provide priority placement to Veterans, while 35 of the 60 units are specifically designated for homeless Veterans who will receive project-based assistance through HUD VASH. Resident Veterans benefit from close proximity to the Palo Alto Health Care System.

Benefits to VA: By increasing the inventory of affordable housing available to Veterans, the project reduces costs associated with in-patient services that otherwise would have been utilized in the absence of this project. In addition, VA avoids the costs of constructing and maintaining the property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Willow Housing L.P.	1.99 acres	▪ 60-bed facility that provides supportive rental housing services ▪ All units are Veteran priority, with 35 units designated specifically for homeless Veterans to receive assistance through HUD VASH	2011 *(Operations began: 2016)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$75
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$162,764	$77,543	$71,336
	Avoided Cost of Bed Days of Care	$4,454,799	$1,276,075	$1,223,742
Cost Savings	N/A	$0	$0	$0
VA Expense	Capital Contribution	$1,615,000	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$3,002,638**	**$1,353,617**	**$1,295,153**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$3,770,903	$1,026,745	$1,019,898
	Value of Non-Veteran Units	$166,899	$35,405	$17,286
	Value of Other Services	$580,531	$202,104	$193,317
Total Consideration	**Fiscal Year Grand Total**	**$7,520,972**	**$2,617,871**	**$2,525,654**

Direct Service to Veterans

Supportive Housing

MINNEAPOLIS, MINNESOTA

Permanent Supportive Housing

MOTIVATION: A 2001 statewide survey found that there were approximately 3,413 homeless Veterans in the metro area of the Twin Cities, Minnesota, an estimated 45 percent of which were clinically diagnosed with a serious mental health disorder and 52 percent of which considered themselves to be chemically dependent. Under this EUL, the lessee constructed two (2) new buildings and renovated three (3) existing VA duplexes to provide 140 units of affordable, safe, drug and alcohol free housing and related services to Veterans in the Twin Cities area. In addition, the lease provides for the construction of associated parking adequate to meet the needs of the staff and occupants of the facility and the renovation of a building for administrative and community use.

Benefits to Veterans: This EUL provides access to safe, supportive, and affordable housing, allowing Veterans an opportunity to focus on rehabilitation from chronic and debilitating conditions. Veterans receive priority placement into 51 percent of the total units and benefit from enhanced services associated with the project.

Benefits to VA: VA achieves cost avoidance related to building maintenance, property maintenance, and bed days of care, and saves on rental costs for office and storage space received at no cost in this lease.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Hennepin County Housing and Redevelopment Authority (HCHRA)	4.34 acres, 4 Buildings (3 residential duplexes, 1 administration) (20,253 sq. ft.)	▪ Priority placement for Veterans in 51% of 140 units ▪ Lump sum payment $300,000 in 2005 ▪ Office and Storage for VA's exclusive use	2005 *(Operation began: August 2006)*	60 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$1,280,216	$139,060	$141,467
	Avoided Property Maint. Costs	$82,023	$26,128	$24,037
	Avoided Cost of Bed Days of Care	$19,667,339	$2,068,121	$2,136,364
Cost Savings	Rental Savings	$318,280	$25,301	$24,899
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$21,347,858**	**$2,258,611**	**$2,326,767**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$18,030,304	$1,664,035	$1,780,499
	Value of Non-Veteran Units	$9,610,806	$814,315	$639,597
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$48,988,968**	**$4,736,961**	**$4,746,863**

Direct Service to Veterans

Supportive Housing

MINNEAPOLIS II, MINNESOTA

Permanent Housing

MOTIVATION: The Veterans East Apartment Complex is providing 100 studio apartment units via a building constructed on the east side of the Minneapolis VAMC campus. The Veterans East EUL will provide permanent, affordable housing to single adult population of homeless and individuals at risk of homelessness, with a priority placement offered for Veterans. The EUL is an expansion of the existing Veterans & Community Housing development on the Minneapolis VAMC campus.

Benefits to Veterans: Eligible Veterans shall receive priority placement into the facility and any services and programs offered therein. The co-location of this project on the VAMC campus ensures that Veterans have ready access to care and treatment.

Benefits to VA: The EUL allows VA to avoid the cost of maintaining the leased property. In addition, this project will result in significant cost avoidance to VA by reducing reliance on domiciliary resources.

Terms	Lessee	Property	Key Terms	Awarded	Term
	CHDC Veterans Limited Partnership	3 acres, 1 Building (58,200 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement for admission ▪ Facility of 100 units and 100 parking spaces	2016 *(Operations began: 2017)*	50 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$34,677	$18,061	$16,615
	Avoided Cost of Bed Days of Care	$3,934,847	$2,068,121	$1,866,726
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
	Capital Contribution	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$3,969,523**	**$2,086,182**	**$1,883,341**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$3,219,811	$1,664,035	$1,555,776
	Value of Non-Veteran Units	$279,079	$106,215	$172,864
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$7,468,413**	**$3,856,432**	**$3,611,981**

Direct Service to Veterans

Supportive Housing

NEWINGTON, CONNECTICUT

Permanent Supportive Housing

MOTIVATION: Newington, CT has had a demonstrated need for permanent supportive housing services in the local community for Veterans and non-Veterans. Under this EUL, 11.2 acres of land and improvements were leased to Victory Gardens Housing LLC. Buildings 13, 27, 31, and 43 were demolished and building 5 was renovated into 24 residential units. The selected developer financed, designed, developed, constructed, operates and maintains the permanent supportive rental housing community consisting of 74 units, with 37 of the units having priority occupancy for homeless and at-risk Veterans and the remaining units having priority occupancy for low income Veterans. Additionally, this EUL required the Lessee to develop 154 parking spaces associated with the facility.

Benefits to Veterans: Eligible Veterans receive priority placement into affordable, safe and substance free housing and receive supportive services.

Benefits to VA: VA avoids the cost of maintaining the leased buildings and property. In addition, this project will result in significant cost avoidance to VA associated with domiciliary resources that otherwise would have been utilized in absence of the project.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Victory Gardens Housing LLC	11.232 acres	▪ Veterans receive priority placement all 74 units, but half of the units are for homeless and at-risk Veterans specifically ▪ VA receives 24 parking spaces	2012 *(Operations began: Q4 FY 2013)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$2,260,283	$359,623	$312,115
	Avoided Property Maint. Costs	$178,240	$67,621	$62,208
	Avoided Cost of Bed Days of Care	$8,685,072	$1,628,096	$1,534,863
Cost Savings	Parking	$117,898	$20,236	$19,897
VA Expense[1]	Capital Contribution	$4,600,000	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$6,641,494**	**$2,075,575**	**$1,929,083**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$7,577,502	$1,309,985	$1,279,194
	Value of Non-Veteran Units	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration[1]	**Fiscal Year Grand Total**	**$14,218,995**	**$3,385,560**	**$3,208,277**

[1] Previous Consideration Reports incorrectly reported a Fiscal Year 2016 VA Expense for 74 Per Diem Beds. The current figure reflects the correct amount.

Direct Service to Veterans

Supportive Housing

NORTHAMPTON, MASSACHUSETTS

Permanent and Transitional Supportive Housing

MOTIVATION: The Northampton VAMC identified a need for homeless housing surrounding the Medical Center. As part of a two phase Northampton project, the selected developer will construct 16 units of transitional units for female Veterans and their children who are homeless or at risk of becoming homeless and 44 units of permanent housing to serve Veterans who are homeless or at risk of becoming homeless. Organized as a cooperative corporation, the Veterans will share ownership of units.

Benefits to Veterans: Female Veterans will receive priority placement into the transitional units and benefit from close proximity to the Northampton VAMC. Veterans will receive priority placement into the permanent units and will also benefit from close proximity to the VAMC. Permanent housing supportive services including case management, vocational training, substance abuse treatment and life skills development.

Benefits to VA: In reducing the length of homeless Veterans' stays at the VAMC, the project reduces costs associated with in-patient services that otherwise would have been utilized in the absence of this project. VA avoids construction and property maintenance fees.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Soldier On Inc.	11.27 acres	▪ 16-bed facility that provides transitional housing for women and children ▪ 44-bed facility that provides permanent housing and supportive services ▪ Priority placement is given to Veterans	2011	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$149,224	$67,850	$62,419
	Avoided Cost of Bed Days of Care	$3,566,655	$1,144,067	$1,037,070
Cost Savings	N/A	$20,236	$0	$0
VA Expense	Per Diem Payments	$1,027,796	$283,240	$276,582
Direct Budget Impact	**Fiscal Year Subtotal**	**$2,708,319**	**$928,677**	**$822,906**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$2,996,568	$920,530	$864,320
	Value of Non-Veteran Units	$489,974	$141,620	$172,864
	Value of Other Services	$0	$0	$0
Total Consideration[1]	**Fiscal Year Grand Total**	**$6,194,861**	**$1,990,827**	**$1,860,090**

[1] Previous Consideration Reports did not include the VA expense for Per Diem Payments. The current figures reflect the correct expense associated with the Per Diem Beds.

Direct Service to Veterans

Supportive Housing

PERRY POINT, MARYLAND

Permanent Supportive Housing

MOTIVATION: The HELP Veterans Village EUL project located at the Perry Point VA Medical Center campus is providing 75 units (33 one-bedroom duplexes (66 units), 8 two-bedroom single family homes (8 units), and 1 three-bedroom single family home (1 unit)) for homeless and at-risk Veterans and their families of the Perryville, Maryland community. Through this EUL, the lessee financed, designed, developed, constructed, and will operate and maintain a permanent housing community.

Benefits to Veterans: Eligible Veterans who are homeless or at risk of becoming homeless will have priority over all other applicants for housing and any services and programs offered.

Benefits to VA: The EUL allows VA to avoid costs associated with maintaining the property. In addition, this project will result in significant cost avoidance to VA by reducing reliance on domiciliary resources.

Terms	Lessee	Property	Key Terms	Awarded	Term
	H.E.L.P. Development Corp.	29.21 acres, 44 Buildings (58,858 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement for admission and associated services ▪ 75 units (33 one-bedroom duplexes, 8 two-bedroom single-family apartments and 1 three-bedroom single family apartment) and a Community Center	2011 *(Operations began: 2018)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$1,025,909	$863,077	$162,831
	Avoided Property Maint. Costs	$202,819	$175,855	$26,963
	Avoided Cost of Bed Days of Care	$1,909,364	$1,650,097	$259,267
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
	Capital Contribution	$2,873,137	$0	$2,873,137
Direct Budget Impact	**Fiscal Year Subtotal**	**$264,955**	**$2,689,030**	**-$2,424,075**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$1,543,768	$1,327,688	$216,080
	Value of Non-Veteran Units	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$1,808,722**	**$4,016,717**	**-$2,207,995**

Direct Service to Veterans

Supportive Housing

ROSEBURG, OREGON – Orchard Knoll

Transitional Supportive Housing

MOTIVATION: The Roseburg, Oregon VAMC realized a need for transitional housing units in the community; a single-day survey of the campus indicated that 32 percent of patients if discharged that day, would be homeless, about 83 patients per year. Through this EUL project, VA leased its property on the VAMC campus for the construction of a Single Room Occupancy facility by the lessee, providing 63 affordable and transitional housing beds for homeless individuals in the Oregon area.

Benefits to Veterans: Veterans must occupy at least 50 percent of the total units in the facility, and benefit from its close proximity to the VAMC campus.

Benefits to VA: By reducing the length of homeless Veterans' stays at the VAMC, the project reduces costs associated with in-patient services that otherwise would have been utilized in the absence of this project. In addition, VA avoids the cost of maintaining the property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Housing Authority of Douglas County, OR	1.15 acres	▪ 63-bed facility that provides transitional housing and supportive services ▪ 50% of beds designated as Veterans preferential	2000	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$21,734	$6,923	$6,369
	Avoided Cost of Bed Days of Care	$7,922,968	$836,049	$829,656
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$7,944,702**	**$842,972**	**$836,025**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$7,314,051	$672,695	$691,456
	Value of Non-Veteran Units	$5,553,418	$442,563	$397,587
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$20,812,171**	**$1,958,230**	**$1,925,068**

Direct Service to Veterans

Supportive Housing

ROSEBURG, OREGON – Eagle Landing
Permanent Supportive Housing

MOTIVATION: The Eagle Landing development at the Roseburg, Oregon VAMC realized a need for permanent supportive housing in the local community for Veterans. Through this EUL project, the lessee has financed, developed, constructed, operated, and maintained a permanent housing facility of 54 tenant units and one manager's unit for Veterans.

Benefits to Veterans: Eligible Veterans receive priority placement into affordable and safe housing with supportive services. Services include free haircuts two days every month, Alcoholics Anonymous meetings, on-site assistance from an Oregon Employment Services Veteran Representative, and walk, ride, and/or run groups.

Benefits to VA: By reducing reliance on domiciliary resources, the project lowers costs of care that would have otherwise been utilized in the absence of this EUL. In addition, VA avoids the cost of maintaining the leased property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Eagle Landing Associates LLC	4.76 acres	▪ Facility of 54 tenant units and one manager's unit ▪ Veterans receive no less than 50 parking spaces	2012 *(Operations began: Q1 FY2014)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$140,933	$55,990	$51,508
	Avoided Cost of Bed Days of Care	$6,202,798	$1,188,070	$1,120,035
Cost Savings[1]	N/A	$0	$0	$0
VA Expense	Capital Contribution	$1,000,000	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$5,343,731**	**$1,244,059**	**$1,171,543**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$5,402,117	$955,935	$933,466
	Value of Non-Veteran Units	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$10,745,848**	**$2,199,994**	**$2,105,009**

[1] Previous Consideration Reports (FY 2014 - FY 2017) included a value for cost savings related to vehicular parking spaces available to Veterans living at the housing facility. There are no cost savings for the Department associated with these vehicular parking spaces.

Direct Service to Veterans

Supportive Housing

SALT LAKE CITY, UTAH

Transitional Supportive Housing

MOTIVATION: Salt Lake City had a demonstrated need for transitional and supportive housing services in the local community for both Veterans and non-Veterans alike. Under this EUL, the lessee is to finance, develop, construct, operate, and maintain a transitional housing facility of at least 72 tenant units and not less than 14 new associated parking spaces. In addition, the consolidation and use of VAMC land enables services and VA personnel to be centralized on the VAMC campus in Salt Lake City.

Benefits to Veterans: Eligible Veterans receive priority placement into affordable, safe, and substance free housing. Supportive services are also included as additional benefits to Veterans.

Benefits to VA: VA avoids the cost of maintaining the leased property. In addition, this project will result in significant cost avoidance to VA by reducing reliance on domiciliary resources.

Note: The FY 2014 Consideration Report understated the Value of Veteran and Non-Veteran Units. These figures have been corrected and the report now reflects the full Enhanced Services impact of the EUL.

Terms

Lessee	Property	Key Terms	Awarded	Term
Housing Authority of Sat Lake City	0.92 acres	▪ Eligible Veterans receive 100% priority placement into facility and associated services ▪ Lessee reimburses VA for utility and ancillary services	2011 (*Operational in Q3 FY 2013)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$15,132	$5,557	$5,112
	Avoided Cost of Bed Days of Care	$6,570,695	$1,122,066	$850,397
Cost Savings	N/A	$0	$0	$0
VA Expense	Per Diem Payments	$7,879,094	$849,720	$1,244,621
	Capital Contribution	$1,000,000	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**-$2,293,267**	**$277,903**	**-$389,112**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$5,623,880	$902,828	$708,742
	Value of Non-Veteran Units	$2,037,748	$371,753	$535,878
	Value of Other Services	$0	$0	$0
Total Consideration[1]	**Fiscal Year Grand Total**	**$5,368,360**	**$1,552,483**	**$855,509**

[1] Previous Consideration Reports did not include the VA expense for Per Diem Payments. The current figures reflect the correct expense associated with the Per Diem Beds.

Direct Service to Veterans

Supportive Housing

SEPULVEDA, CALIFORNIA

Permanent Supportive Housing – Building 4

MOTIVATION: Prior to this EUL, VA was able to aid less than 10 percent of homeless Veterans in need in the Sepulveda, California community. Through this project, VA leases property located on the Sepulveda Ambulatory Care Center (SACC) campus, including "Building 4," to the lessee, who is renovating and will operate it as a 73-unit permanent housing facility providing safe and affordable supportive homeless housing.

Benefits to Veterans: Veterans will receive priority placement into all 73 permanent housing units and all services offered, including professional counseling, case management, and crisis management services.

Benefits to VA: VA avoids costs related to the maintenance of the building and property associated with the project.

Note: The FY 2014 Consideration Report understated the Avoided Cost of Bed Days of Care and Value of Veteran Units. These figures have been corrected and the report now reflects the full Cost Savings and Cost Avoidance impact of the EUL.

Terms	Lessee	Property	Key Terms	Awarded	Term
	New Directions Sepulveda I L.P.	1.40 acres, 1 Building (79,389 sq. ft.)	▪ Priority placement for VA-referred Veterans ▪ Counseling, case management, and crisis management provided to Veteran tenants ▪ VA receives 10% cash from film making activities.	2007 *(Operational in 2013)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$5,764,506	$756,511	$567,223
	Avoided Property Maint. Costs	$25,560	$8,429	$7,754
	Avoided Cost of Bed Days of Care	$8,517,436	$1,584,093	$1,493,380
Cost Savings	N/A	$0	$0	$0
VA Expense	Capital Contribution	$6,000,000	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$8,307,502**	**$2,349,032**	**$2,068,358**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$7,436,048	$1,274,580	$1,244,621
	Value of Non-Veteran Units	$42,057	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$15,785,607**	**$3,623,612**	**$3,312,978**

Direct Service to Veterans

Supportive Housing

SEPULVEDA, CALIFORNIA

Permanent Supportive Housing – Building 5

MOTIVATION: Sepulveda, CA had a demonstrated need supportive housing services in the local community for both Veterans and non-Veterans alike. Through this project, VA leases property located on the SACC campus, including "Building 5" to the lessee, who is renovating and will operate it as a 76-unit permanent housing facility for safe and affordable supportive homeless housing.

Benefits to Veterans: Veterans will receive priority placement into all 76 permanent housing units and all services offered, including professional counseling, case management, and crisis management services.

Benefits to VA: VA avoids costs related to the maintenance of the building and property associated with the project.

Note: The FY 2014 Consideration Report understated the Avoided Cost of Bed Days of Care and Value of Veteran Units. These figures have been corrected and the report now reflects the full Cost Savings and Cost Avoidance impact of the EUL.

Terms	Lessee	Property	Key Terms	Awarded	Term
	New Directions Sepulveda II L.P.	1.04 acres, 1 Building (77,310 sq. ft.)	▪ Priority placement for VA-referred Veterans ▪ Counseling, case management, and crisis management provided to Veteran tenants ▪ VA receives 10% cash from film making activities	2007 *(Operational in 2013)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$5,613,548	$736,700	$552,369
	Avoided Property Maint. Costs	$18,987	$6,261	$5,760
	Avoided Cost of Bed Days of Care	$8,862,035	$1,650,097	$1,555,605
Cost Savings	N/A	$0	$0	$0
VA Expense	Capital Contribution	$4,000,000	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$10,494,571**	**$2,393,058**	**$2,113,734**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$7,736,166	$1,327,688	$1,296,480
	Value of Non-Veteran Units	$53,527	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$18,284,264**	**$3,720,745**	**$3,410,214**

Direct Service to Veterans

Supportive Housing

ST. CLOUD, MINNESOTA

Permanent Supportive Housing

MOTIVATION: VA recognized a need for additional affordable housing options in the city of St. Cloud, Minnesota, where a significant portion of the Veteran community is homeless. Through this EUL, the St. Cloud Housing & Redevelopment Authority financed, constructed, operates and maintains a safe and affordable Housing Complex of 61 apartment units, as well as associated parking, on the St. Cloud VAMC campus.

Benefits to Veterans: This EUL provides safe and affordable housing options to homeless Veterans, who receive priority placement into 51 percent of the housing units. In addition, Veterans benefit from the Complex's close proximity to the VAMC campus.

Benefits to VA: This project allows VA significant avoided costs related to bed days of care by reducing reliance on domiciliary resources, as well as property maintenance.

Terms	Lessee	Property	Key Terms	Awarded	Term
	St. Cloud Housing & Redevelopment Authority	5.62 acres	▪ Veterans to receive 51% priority placement	2005 *(Operation began: 2006)*	50 years

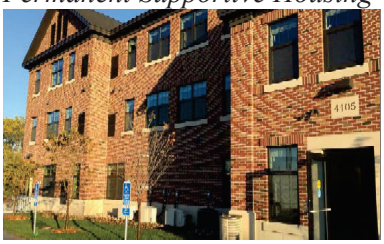
Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$106,214	$33,835	$31,126
	Avoided Cost of Bed Days of Care	$6,657,257	$792,046	$663,725
Cost Savings	N/A	$0	$0	$0
VA Expense	Third Party Reports – City Waste Water Testing	$2,295	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$6,761,176**	**$825,881**	**$694,851**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$6,112,823	$637,290	$553,165
	Value of Non-Veteran Units	$6,278,270	$424,860	$484,019
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$19,152,269**	**$1,888,031**	**$1,732,035**

Direct Service to Veterans

Supportive Housing

ST. CLOUD II, MINNESOTA

Permanent Supportive Housing



MOTIVATION: The Linden Grove EUL project provides 37 housing units (Studio, one, and two bedroom units containing a total of 39 beds) on the Veterans Affairs Minneapolis VA Medical Center located in St. Cloud. This project was constructed on vacant land on the VAMC campus and provides permanent, affordable housing to homeless and at-risk Veterans and their families, with a priority placement offered for homeless Veterans.

Benefits to Veterans: Eligible Veterans receive priority placement into the facility and for any services and programs offered therein. The co-location of this project on the VAMC campus ensures that Veterans housed there have ready access to care and treatment.

Benefits to VA: The EUL allows VA to avoid the cost of maintaining the leased property. In addition, this project will result in significant cost avoidance to VA by reducing VA's reliance on domiciliary resources.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Sand Companies, Inc.	2.92 acres, 1 Building (33,000 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement for admission ▪ Facility of 37 units and 55 parking spaces	2015 *(Operations began: 2016)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$36,303	$17,580	$16,172
	Avoided Cost of Bed Days of Care	$2,084,078	$770,045	$705,207
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
	Capital Contribution	$681,402	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$1,438,979**	**$787,625**	**$721,380**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$1,728,225	$619,588	$587,738
	Value of Non-Veteran Units	$133,226	$35,405	$51,859
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$3,300,429**	**$1,442,617**	**$1,360,977**

Direct Service to Veterans

Supportive Housing

TOGUS, MAINE

Permanent Supportive Housing

MOTIVATION: The Cabin in the Woods project is a 21 tenant unit permanent supportive housing development for eligible Veterans who are homeless, or at risk of homelessness on the Togus VA Medical Center campus. Through this EUL the lessee financed, designed, developed, constructed, and will operate and maintain a permanent supportive housing community and associated vehicular parking spaces.

Benefits to Veterans: Priority placement is given to eligible homeless Veterans and Veterans at risk of homelessness. Veterans also benefit from a supportive services program that guides resident Veterans toward long-term independence and self-sufficiency. The co-location of this project on the VAMC campus ensures that Veterans have ready access to care and treatment.

Benefits to VA: The EUL allows VA to avoid the maintenance costs associated with the Togus VAMC campus.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Volunteers of America Northern New England, Inc.	11 acres, 22 Buildings (14,468 sq ft)	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement for admission ▪ 21 tenant units and 7 parking spaces	2011 *(Operations began: 2018)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$138,920	$120,408	$18,512
	Avoided Cost of Bed Days of Care	$534,821	$462,027	$72,794
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
	Capital Contribution	$201,150	$0	$201,150
Direct Budget Impact	**Fiscal Year Subtotal**	**$472,591**	**$582,435**	**-$109,844**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$432,421	$371,753	$60,668
	Value of Non-Veteran Units	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$905,011**	**$954,187**	**-$49,176**

Direct Service to Veterans

Supportive Housing

TUSCALOOSA, ALABAMA
Permanent Supportive Housing

MOTIVATION: The Valor Grove, Ltd. EUL project at the Tuscaloosa, AL VAMC consist of 50 tenant units and 80 associated parking spaces for the purpose of providing housing and ancillary services to homeless Veterans in the Tuscaloosa community. Through this EUL, the lessee developed, operates, and maintains the housing facility on 3.64 acres of property, providing permanent residences and supportive educational services to eligible Veterans.

Benefits to Veterans: Eligible Veterans receive priority placement into affordable and safe housing with supportive services, including access to workshops, seminars, and classes offered as in-kind services for Adult Education, Parenting, Fatherhood, Healthy Relationships, and Career Development.

Benefits to VA: By reducing reliance on domiciliary resources, the project lowers costs of care that would have otherwise been utilized by VA. In addition, VA avoids the cost of maintaining the leased property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Valor Grove, Ltd.	3.64 acres	▪ VA receives cost avoidance ▪ Eligible Veterans receive priority placement into the Facility and any services and programs offered therein ▪ No less than 50 tenant units and 80 associated parking units provided	2013 *(Operation began: 2014)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$899,031	$217,646	$215,635
	Avoided Property Maint. Costs	$52,619	$21,914	$20,160
	Avoided Cost of Bed Days of Care	$4,394,570	$1,056,062	$933,363
Cost Savings	N/A	$0	$0	$0
VA Expense	Capital Contribution	$4,000,000	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$1,346,220**	**$1,295,623**	**$1,169,158**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$3,758,629	$849,720	$777,888
	Value of Non-Veteran Units	$452,741	$35,405	$86,432
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$5,557,590**	**$2,180,748**	**$2,033,478**

Direct Service to Veterans

Supportive Housing

VANCOUVER, WASHINGTON

Permanent Supportive Housing

MOTIVATION: The VA identified an unmet need for permanent affordable Veteran and resident housing in the Vancouver, Washington area. Through this project, the lessee has agreed to redevelop the parcel on the Portland VAMC into a 50-unit supportive housing facility, as well as an associated parking lot. This EUL will provide a safe and affordable housing opportunity for Veterans and the surrounding community. Units will be tied to the affordability guidelines set up through the Low Income Housing Tax Credit program and HUD Section 8 Rental Guidelines.

Benefits to Veterans: Veterans will receive priority placement into all 50 housing units and benefit from close proximity to the VAMC campus.

Benefits to VA: In reducing homeless Veterans' stays at the VAMC, the project reduces costs associated with inpatient services that otherwise would have been utilized in the absence of this project. In addition, VA avoids the cost of maintaining the property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Vancouver Veterans Residences Limited Partnership	1.31 acres	▪ 50-bed facility that provides permanent, affordable housing and supportive services ▪ Veterans receive priority placement for 100% of units	2011	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$16,550	$7,887	$7,255
	Avoided Cost of Bed Days of Care	$3,000,004	$1,034,061	$995,587
Cost Savings	N/A	$0	$0	$0
VA Expense	Capital Contribution	$1,800,664	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$1,215,890**	**$1,041,947**	**$1,002,842**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$2,495,343	$832,018	$829,747
	Value of Non-Veteran Units	$194,228	$53,108	$34,573
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$3,905,461**	**$1,927,072**	**$1,867,162**

Direct Service to Veterans

Supportive Housing

VANCOUVER, WASHINGTON

Transitional Supportive Housing

MOTIVATION: The Portland VAMC realized a need for homeless housing in the Vancouver, Washington area. A single-day survey of the campus indicated that 18 percent of patients, if discharged that day, would be homeless, which equates to approximately 40 Veterans a year. Through this EUL project, VA leased a previously vacant and undeveloped land parcel to the City of Vancouver Housing Authority; the Housing Authority was then able to construct a 124 residential development consisting of a mix of single room and studio apartments.

Benefits to Veterans: Veterans receive priority placement into 62 SRO units of the facility and benefit from its close proximity to the VAMC campus. In addition, Veterans benefit from supportive services at the facility for example, counseling and recreation.

Benefits to VA: By reducing the length of homeless Veterans' stay at the VAMC, the project reduces costs associated with in-patient services that otherwise would have been utilized in the absence of this project. In addition, VA avoids the cost of maintaining the leased property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Housing Authority of the City of Vancouver	1.54 acres	▪ Lessee is responsible for the coordination of client services across the consortium of health and social service organizations of which Portland VAMC is a part ▪ 62 beds are designated as Veteran preferential	1998	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$29,105	$9,271	$8,529
	Avoided Cost of Bed Days of Care	$16,179,158	$1,672,098	$1,555,605
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$16,208,263**	**$1,681,369**	**$1,564,134**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$14,932,986	$1,345,390	$1,296,480
	Value of Non-Veteran Units	$10,260,526	$832,018	$829,747
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$41,401,775**	**$3,858,777**	**$3,690,361**

Direct Service to Veterans

Supportive Housing

WALLA WALLA, WASHINGTON

Permanent Supportive Housing

MOTIVATION: VA recognized a need for additional affordable housing for Veterans and non-Veterans near the Jonathan M. Wainwright Memorial VA Medical Center, where approximately 20,000 Veterans 65 or older reside. The selected developer financed, renovated, developed, constructed, and will operate the property located on the VAMC campus. The project includes 40 tenant units and an associated vehicular parking lot.

Benefits to Veterans: Veterans will receive priority placement into the 40 units and benefit from its close proximity to the VAMC campus.

Benefits to VA: By reducing the length of homeless Veterans' stays at the VAMC, the project reduces costs associated with in-patient services that otherwise would have been utilized in the absence of this project. In addition, VA avoids the cost of maintaining the property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	WWVA Housing LLC	4 acres	▪ 40 bed facility that provides supportive permanent housing ▪ Priority placement for VA Veterans	2011	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs[1]	$326,074	$110,268	$129,544
	Avoided Property Maint. Costs	$51,343	$24,082	$22,154
	Avoided Cost of Bed Days of Care	$2,592,328	$858,050	$808,914
Cost Savings	N/A	$0	$0	$0
VA Expense	Capital Contribution	$2,000,000	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$969,746**	**$992,400**	**$960,612**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$2,166,808	$690,398	$674,170
	Value of Non-Veteran Units	$124,127	$17,703	$17,286
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$3,260,680**	**$1,700,500**	**$1,652,068**

[1]Previous years' Consideration did not take into account the Avoided Building Maintenance Costs associated with 19,966 square feet of conveyed building space. This year's value and previous years' values are corrected in the FY 2020 Report.

Direct Service to Veterans

Senior Services

BATAVIA, NEW YORK
Congregate Living Housing

MOTIVATION: Batavia, NY had an unmet need in senior housing for Veterans and other residents in the community. This EUL provided for the construction of a 30,990 square foot congregate housing facility of 32 affordable, independent housing units for Veterans and other elderly citizens in the New York area. This project created much needed low-income housing to individuals in the community who are in need of support services in order to continue to live independently.

Benefits to Veterans: Veterans receive priority placement into all services. In addition, co-locating Havenwood Congregate Living Housing on the VAMC campus creates a smooth transition for Veterans as they experience a need for changing levels of care.

Benefits to VA: VA receives ongoing lease payments and avoids maintenance costs associated with the property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Havenwood Associates Limited Partnership	3.00 acres	▪ Eligible Veterans receive priority placement for all of the services offered ▪ VA receives annual ongoing lease payments	2004	65 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$262,247	$19,978	$24,973
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$56,698	$18,061	$16,615
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$318,945**	**$38,040**	**$41,588**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$1,691,298	$159,768	$137,592
	Value of Non-Veteran Units	$1,661,790	$83,688	$107,016
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$3,672,033**	**$281,496**	**$286,196**

Direct Services to Veterans

Senior Services

DANVILLE, ILLINOIS
Independent Living Housing

MOTIVATION: The city of Danville, IL recognized an unmet need for affordable senior housing for Veterans and residents in the community. This EUL facilitated the rehabilitation of two (2) unused buildings on the Danville VAMC campus. The project provides 44 low-income senior citizen apartments for Veterans in the Illinois area.

Benefits to Veterans: Veterans receive priority placement into safe, affordable housing near their place of care at the Danville VAMC, as well as discounts on a limited number of units.

Benefits to VA: Besides receiving ongoing lease payments, VA avoids the costs of maintaining, repairing, and providing utilities to the buildings and property covered under this lease.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Danville VA Limited Partnership	3.07 acres, 2 Buildings (137,740 sq. ft.) (& option on 3rd building)	▪ VA to receive annual ongoing lease payments	1999	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$195,742	$5,421	$20,872
Cost Avoidance	Avoided Building Maint. Costs	$8,100,116	$1,134,732	$942,004
	Avoided Property Maint. Costs	$58,078	$18,501	$17,020
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$8,353,936**	**$1,158,654**	**$979,896**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$3,137,808	$249,084	$238,560
	Value of Non-Veteran Units	$544,992	$47,124	$61,344
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$12,036,736**	**$1,454,862**	**$1,279,800**

Direct Service to Veterans

Senior Services

HINES, ILLINOIS

Assisted Living Housing – Building 53

MOTIVATION: VA recognized an unmet need for affordable senior housing in the Chicago, Illinois area. Under this EUL, the lessee rehabilitated and continues to operate "Building 53" on the Edward Hines, Jr. VA Hospital VAMC campus, providing 71 housing units for low-income seniors.

Benefits to Veterans: Veterans receive priority placement into safe, affordable senior housing on the campus of their primary place of care, and benefit from supportive services provided by the lessee.

Benefits to VA: VA receives ongoing lease payments from the lessee and is able to avoid the maintenance costs associated with the leased building and property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Goedert Senior Housing Corporations (GSHC)	1.84 acres, 1 Building (58,000 sq. ft.)	▪ VA receives ongoing lease payments ▪ Lessee to pay VA's direct ancillary costs	2004 *(Operations began: April 2006)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$779,082	$61,500	$68,250
Cost Avoidance	Avoided Building Maint. Costs	$4,608,622	$468,989	$441,201
	Avoided Property Maint. Costs	$34,775	$11,078	$10,191
Cost Savings	N/A	$0	$0	$0
VA Expense	Maintenance	$67,143	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$5,355,335**	**$541,567**	**$519,642**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units	$5,882,856	$428,400	$415,800
	Value of Non-Veteran Units	$4,900,908	$440,640	$427,680
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$16,139,099**	**$1,410,607**	**$1,363,122**

Direct Services to Veterans

Senior Services

VIERA, FLORIDA
Assisted Living Housing

MOTIVATION: Under this project, the lessee has financed, developed, constructed, and is operating and maintaining an assisted living facility of at least 86 tenant units and 50 associated parking spaces. This EUL provides affordable, safe, substance-free assisted living housing and supportive services to eligible Veterans and non-Veterans of the Brevard County, Florida community.

Benefits to Veterans: Eligible Veterans will receive priority placement into 69 (80 percent) of the total units in the facility, and of that 80 percent priority admission into at least 66 studio units, as well as a 10 percent monthly rent discount. Veterans also receive priority receipt of any services and programs offered.

Benefits to VA: This project will result in significant cost avoidance to VA in terms of bed days of care by reducing reliance upon in-patient and domiciliary resources that would otherwise have been utilized in the absence of this project, as well as provide VA with annual lease payments. In addition, VA avoids the maintenance costs associated with the Viera property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	INVENCO Senior Housing, LLC	15 acres	▪ Veterans receive priority placement into 80% of total units ▪ All Veterans receive 10% discounted monthly rent ▪ VA receives ongoing lease payments	2011 *(Operation began: 2013)*	55 years *(plus an option for two successive 10 year extensions)*

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$204,111	$29,100	$29,100
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$243,443	$90,306	$83,077
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$447,554**	**$119,406**	**$112,177**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Veteran Units[1]	$4,620,571	$1,025,640	$990,810
	Value of Non-Veteran Units	$580,119	$60,639	$60,639
	Value of Other Services	$134,729	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$5,782,973**	**$1,205,685**	**$1,163,626**

[1] Estimated Value of Veteran Unit Enhanced Services was misstated in FY 2018. Figure is corrected in FY 2019 Report.

Direct Service to Veterans

Special Services

BUTLER, PENNSYLVANIA
Mental Health Facility

MOTIVATION: VA faces the continual challenge of identifying secure, clinically-based residential care for individuals requiring extended, intensive mental health treatment and monitoring. Under this EUL, Butler County Human Services constructed, operates, and maintains a mental health facility with 16 beds. This improves mental health services and recovery opportunities for Veterans who meet these needs.

Benefits to Veterans: VA-referred patients are admitted on a priority basis, expanding mental health services to Veterans and allowing them to stay in close proximity to VA physicians and health care providers.

Benefits to VA: Butler County's provision of in-patient mental health care yields substantial Veteran encounter cost avoidance to the VAMC due to reduced admissions to distant tertiary care centers. In addition, VA avoids the cost of maintaining and operating the leased property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	County of Butler, Pennsylvania	1.30 acres	▪ 2 of 16 beds reserved on a priority basis for VA referred Veterans	2003 *(Operations began: 2006)*	50 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$24,569	$7,827	$7,200
	Avoided Cost of Vet Encounters	$1,225,125	$46,767	$42,697
Cost Savings	Rental Savings	$0	$0	$0
	Parking Savings	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$1,249,694**	**$54,593**	**$49,897**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Special Services	$17,356,001	$1,502,500	$1,604,138
Total Consideration	**Fiscal Year Grand Total**	**$18,605,695**	**$1,557,093**	**$1,654,034**

Direct Services to Veterans

Special Services

TUSCALOOSA, ALABAMA

Hospice

MOTIVATION: Prior to this lease becoming operational, hospice services were not available in western Alabama. Under this EUL, the lessee financed, constructed, operates, and maintains a Hospice Facility with 10 beds on the Tuscaloosa VAMC campus. This EUL provides safe, supportive, and affordable hospice in-patient services. It targets the most under-served Veterans – those who live alone and whose care is complex or those whose caregivers are too frail or elderly to care for them at home.

Benefits to Veterans: Five (5) of the total ten (10) hospice beds are reserved for VA-referred Veterans on a priority basis. In addition, Veterans benefit from enhanced services associated with the project.

Benefits to VA: This project helps VA avoid costs associated with Veteran patient encounters by reducing the length of hospital stays for Veterans requiring hospice in-patient beds. In addition, VA avoids the cost of maintaining the leased property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Hospice of West Alabama (HOWA)	3.17 acres	▪ VA-referred Veterans given priority for 5 of the total 10 beds	2002 *(Operation began: 2004)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$59,911	$19,085	$17,557
	Avoided Cost of Vet Encounters	$8,895,977	$1,677,350	$557,685
Cost Savings	Rental Savings	$0	$0	$0
	Parking Savings	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$8,955,888**	**$1,696,434**	**$575,242**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Special Services	$41,956,005	$2,877,120	$3,715,146
Total Consideration	**Fiscal Year Grand Total**	**$50,911,893**	**$4,573,555**	**$4,290,388**

Direct Service to Veterans

Special Services

VANCOUVER, WASHINGTON

Crisis Triage Center

MOTIVATION: One priority identified by a community redesign process examining Clark County's crisis care system was the development of a Crisis Triage Center to integrate mental health crisis and detoxification services and to operate as an alternative to the emergency room. Under this EUL, Clark County financed, constructed, operates and maintains a 175,000 square foot, 4-story Crisis Triage Center, as well as 350 parking spaces, on land leased on the Vancouver Division of the VA Portland Health Care System, thereby filling a significant gap in mental health and substance abuse services for Veterans and non-Veterans in the Vancouver area.

Benefits to Veterans: Eligible Veterans receive priority placement into all of the services and programs offered within the Center. In addition, co-locating the Center on the Vancouver Division of the VA Portland Healthcare System facilitates Veteran patient referrals for services.

Benefits to VA: The lessee provides 23,696 square feet of rentable space on the fourth floor of the facility at no cost, as well as 350 of the parking spaces, allowing VA to achieve cost savings. VA also avoids the costs associated with each Veteran encounter at the Center.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Clark County, WA	6.10 acres	▪ 100% priority placement for Veterans for all services and programs ▪ 23,696 rentable sq. ft. available to VA	2004 *(Operation began: January 2006)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$115,286	$36,724	$33,785
	Avoided Cost of Vet Encounters	$7,807,136	$495,858	$437,090
Cost Savings	Rental Savings	$7,903,384	$655,635	$639,698
	Parking Savings	$4,373,927	$540,713	$527,569
VA Expense	Utilities & Labor	$658,959	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$19,540,774**	**$1,728,930**	**$1,638,142**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Special Services	$99,572,485	$5,345,981	$4,240,907
Total Consideration	**Fiscal Year Grand Total**	**$119,113,258**	**$7,074,911**	**$5,879,049**

Improved VA Operations

Energy

CHICAGO, ILLINOIS (JESSE BROWN)

Energy Center

MOTIVATION: This project was executed in order to reduce the Jesse Brown (formerly known as Chicago "Westside") VAMC's energy costs. Under the EUL, 1.07 acres of property is leased to a Trust, which engaged a private-sector partner, the Energy Systems Group, LLC, to construct, develop, operate, and maintain a state-of-the-art energy center to produce and sell energy (electricity, steam, and chilled water) to the VAMC.

Benefits to VA: VA can receive energy cost savings over the term of the lease based on market rates for energy and avoids the cost of maintaining the leased property. VA pays a fixed amount for energy for short periods of time, so if market rates increase, VA has cost savings; however if rates go down, VA would pay a premium until the fixed rate is renegotiated. In addition, VA receives a portion of any energy sales made by the Center to third party, non-VA users.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Chicago West Side Energy Trust	1.07 acres, 2 Buildings (24,402 sq. ft.)	▪ Developer to supply VA with electricity, steam, and chilled water ▪ Developer may sell energy to non-VA users ▪ VA receives 50% of the balance of excess electricity sales to grid; 100% of steam, chilled water sold to 3rd parties, after management expenses paid	2002	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$3,254,603	$245,828	$213,877
	Avoided Property Maint. Costs	$20,222	$6,442	$5,926
Cost Savings	Energy Savings	-$2,495,748	-$1,733,700	-$53,606
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$779,078**	**-$1,481,430**	**$166,197**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	N/A	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$779,078**	**-$1,481,430**	**$166,197**

Improved VA Operations

Energy

MOUNTAIN HOME, TENNESSEE

Energy Center

MOTIVATION: This project was executed to reduce the James H. Quillen VAMC's energy costs. Under this EUL, VA leases 1.00 acre of property to a Trust, which engaged a private-sector partner, the Energy Systems Group LLC. The lessee developed, constructed, and now operates and maintains a state-of-the-art energy center that produces and sells energy (electricity, steam, and chilled water) to the VAMC and East Tennessee State University (ETSU) Medical School's Basic Sciences Research Facility.

Benefits to VA: VA receives significant energy cost savings over the term of the lease and avoids the cost of maintaining the leased property. In addition, VA receives a portion of any energy sales made by the Center to third party and non-VA users.

Terms

Lessee	Property	Key Terms	Awarded	Term
Mountain Home Energy Trust	1.00 acre	▪ Developer to supply VA with electricity, steam, and chilled water ▪ Developer may sell energy to non-VA users ▪ VA receives 100% of the balance of any excess electricity sales to grid, 66% of the steam sales, and 63% of chilled water sales after management expenses are paid	1999	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$18,899	$6,020	$5,538
Cost Savings	Energy Savings	$18,226,388	$1,602,894	$1,396,888
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$18,245,288**	**$1,608,914**	**$1,402,427**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	100% Power Backup	$367,767	$0	$0
Total Consideration[1]	**Fiscal Year Grand Total**	**$18,613,055**	**$1,608,914**	**$1,402,427**

[1] Energy savings for FY 2018 included additional electricity purchased from a local utility entity; the FY 2018 and Cumulative values have been revised to only include electricity purchased through the EUL in FY 2019 Report.

Improved VA Operations

Energy

NORTH CHICAGO, ILLINOIS

Energy Center (Phases I & II)

MOTIVATION: This project was executed to reduce the North Chicago VAMC's energy costs. Under the EUL, VA leases 1.07 acres to a private developer, who financed, designed, constructed, owns, operates, and maintains a cogeneration energy center. The energy center maintains a state-of-the-art energy facility and supplies all of the North Chicago VAMC's electric and thermal energy, as well as all of the energy required to operate the joint VA/DOD Federal Hospital in the North Chicago area.

Benefits to VA: VA avoids the cost of maintaining the leased property. In addition, VA receives a portion of any energy sales made by the Center to third-party, non-VA users.

Note: North Chicago energy center project was executed as two (2) separate EULs, Phase I and Phase II.

Terms

Lessee	Property	Key Terms	Awarded	Term
North Chicago Energy	1.07 acres	▪ Developer to supply VA and joint VA/DOD Federal Hospital with electric and thermal energy ▪ Developer may sell energy to non-VA users ▪ VA receives 50% of balance of any excess electricity sales to grid, 100% of any 3rd party energy sales after management expenses paid	Phase I: 2002 Phase II: 2003	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$20,222	$6,442	$5,926
Cost Savings	Energy Savings	$31,701,432	$3,415,368	$3,374,261
VA Expense	Electric System Upgrade	$349,475	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$31,372,179**	**$3,421,810**	**$3,380,188**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	N/A	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$31,372,179**	**$3,421,810**	**$3,380,188**

Improved VA Operations

Regional Offices & Parking

ALBANY, NEW YORK
Regional Offices & Parking

MOTIVATION: VA recognized the need for additional space at the Samuel S. Stratton VAMC. In addition, the VISN 2 operations were previously located in an outdated and dysfunctional space. Under this EUL, VA leases 2.41 acres of VAMC land to Albany Medical Center and completed, at its own cost and expense, the removal and abatement of all asbestos and hazardous substances from the property, which included the demolition of three buildings, utility trenches, and a block garage. Following these lease-mandated improvements, the EUL obligated the lessee to design, develop, construct, and then operate and maintain a new, state-of-the-art VA office building to serve as a setting for VISN 2 operations, including a parking facility and an optional commercial facility.

Benefits to Veterans: Veterans receive better access to and improved services from the VISN 2 network as a result of this project.

Benefits to VA: VA receives consideration from this project in the form of avoided property maintenance costs and savings on rent (no cost for the office building space) and parking costs (30 free spots daily).

Terms

Lessee	Property	Key Terms	Awarded	Term
Albany Medical Center	2.41 Acres	▪ Lessee to develop and construct a new office building (30,351 sq. ft.) for VA after VA completes the demolition of structures on the designated property ▪ Lessee has the option to develop, construct, operate and maintain a parking facility within 10 years of the effective date and a commercial facility within 2 years of the commencement of construction ▪ Minimum of 30 free daily parking spots for VAMC use over the term of the EUL	2009	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$42,315	$14,533	$13,370
Cost Savings	Rental Savings	$4,692,793	$553,993	$544,718
	Parking Savings	$455,510	$53,655	$52,757
VA Expense	Demolition, Abatement Monitor	$553,500	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$4,637,119**	**$622,181**	**$610,845**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$16,455,025	$1,806,336	$1,806,336
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$21,092,144**	**$2,428,517**	**$2,417,181**

Improved VA Operations

Regional Offices & Parking

ATLANTA, GEORGIA

Regional Office Co-location

MOTIVATION: Space and parking deficiencies at the Atlanta VA Regional Office (VARO) led VA to collocate the VARO on the Atlanta VAMC campus. Under this EUL, the lessee financed, developed, constructed, operates, and maintains a new state-of-the-art VARO facility, as well as 484 parking spaces on 5.90 acres of leased VAMC property. The lessee acquired appropriate financing services to enable the Department to benefit from the low-cost financing for the lessee's development of the VARO, providing lower ongoing lease costs to VA.

Benefits to Veterans: Veterans receive better access to services and improved claims processing time as a result of the improved layout and accessibility of the VARO located conveniently on the VAMC campus.

Benefits to VA: For VA, this EUL has achieved and continues to yield cost savings for the office space and parking spots available, as well as cost avoidance for the property associated with the lease.

Terms

Lessee	Property	Key Terms	Awarded	Term
Development Authority of DeKalb County, GA	5.90 acres	▪ Developer to finance, design, construct, operate & maintain 179,328 rentable sq. ft. of VARO space and necessary parking ▪ Parking, data, and equipment are included in the lease costs	1997	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$111,582	$35,544	$32,699
Cost Savings	Rental Savings	$12,445,773	$456,382	$396,969
	Parking Savings	$5,244,540	$453,965	$446,365
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$17,801,895**	**$945,891**	**$876,032**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration[1]	**Fiscal Year Grand Total**	**$17,801,895**	**$945,891**	**$876,032**

[1] Previous Consideration Report (FY 2016) overstated the parking savings by double counting the number of spaces at the facility.

Improved VA Operations

Regional Offices & Parking

CHICAGO, ILLINOIS (JESSE BROWN)

Regional Office & Parking

MOTIVATION: The Chicago Regional Office (VARO) and Parking projects were executed in order to collocate the delivery of VA benefit and health care services as well as to correct a long-standing parking deficiency at the Jesse Brown VA Medical Center (VAMC) - formerly "Chicago Westside". Under this EUL, VA leases 2.37 acres for the VARO and 2.58 acres for the parking garage to a Trust. The Trust then engaged a private-sector partner to construct, develop, operate and maintain a state-of-the-art VARO used by the Veterans Benefit Administration as well as a parking structure in close proximity to the Jesse Brown VAMC. The leased properties provide 93,700 square feet of rentable offices space and 1,620 parking spaces.

Benefits to Veterans: Veterans benefit from better access to services and reduced claim processing times as a result of the improved layout and accessibility of the VARO. In addition, free parking spaces help maintain access to the Jesse Brown VAMC, which serves a majority of the poorest Veteran patients in greater Chicago. Demand for services at Jesse Brown VAMC has dramatically increased, as four nearby community hospitals have closed in the five years preceding this project.

Benefits to VA: Obtaining space through this EUL allowed cost-effective project financing with no capital cost to VA. This deal also achieves cost savings for the parking spots available, as well as cost avoidance for the properties associated with the lease.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Chicago West Side Enhanced-Use Trust	2.37 acres (Office) 2.58 acres (Parking)	▪ VA pays for turnkey delivery of 93,700 rentable sq. ft. ▪ Lessee provides parking structure of no less than 1,620 parking spaces (with 64 free spaces for VA) and assumes operation and maintenance of the building and all parking	2002	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	93,530	$29,792	$27,408
Cost Savings	Rental Savings	$6,006,839	$710,863	$635,071
	Parking Savings[1]	$29,930,777	$1,383,319	$1,234,332
VA Expense	Security and Maintenance	$3,184,247	$274,713	$269,591
Direct Budget Impact	**Fiscal Year Subtotal**	**$32,846,899**	**$1,849,261**	**$1,627,220**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$32,846,899**	**$1,849,261**	**$1,627,220**

[1] Revised to include actual VA payments from FY 2014 and FY 2015.

Improved VA Operations

Regional Offices & Parking

COLUMBIA, SOUTH CAROLINA

Co-location/Mixed-Use Project

MOTIVATION: VA had determined a portion of its Columbia, South Carolina William Jennings Bryan Dorn VAMC campus to be underutilized. Under this EUL, VA leases 25.00 acres of land, which include 6 buildings, to the Keenan Development Associates of South Carolina. The lessee constructed a three-story, 107,000 square foot Class-A office building, in which VBA secured office space through a separate, direct-market lease. In addition to the direct-market lease, VA is provided 10,000 square feet of office space at no cost. After the execution of the initial EUL, the office building was expanded by an additional 30,000 sq. ft. for VA use.

Benefits to Veterans: Veterans receive better access to services as a result of the improved layout and accessibility of the VARO, which was located more than 5 miles from the VAMC before co-locating.

Benefits to VA: VA receives revenue from upfront and ongoing lease payments as well as rental cost savings via the 10,000 sq. ft. at no cost and below market rate rent on the additional 30,000 sq. ft., and avoids the costs associated with maintaining the leased buildings and property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Keenan Development Associates of South Carolina	14.75 acres;	▪ Lessee to design, construct, operate and maintain a 107,000 sq. ft. office building and public safety facility (10,000 sq. ft. provided exclusively to VA at no cost) ▪ $100,000 payment to VA at lease signing ▪ Ongoing lease payments to VA after the 22nd yr. ▪ Additional 30,000 sq. ft. for VA use	2007 *(Operation began: 2009)*	55 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$100,000	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$2,045,811	$0	$0
	Avoided Property Maint. Costs	$329,007	$88,801	$81,692
Cost Savings	Rental Savings	$6,993,566	$884,885	$870,071
	Parking Savings	$239,566	$29,063	$28,577
VA Expense	Maintenance	$973,060	$72,000	$72,000
	Building Expansion Expenditure	$9,334,782	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**-$599,892**	**$930,749**	**$908,340**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$2,292,017	$271,828	$271,629
	Value of Other Services	$0	$0	$0
Total Consideration[1]	**Fiscal Year Grand Total**	**$1,692,125**	**$1,202,577**	**$1,179,969**

[1] A 2016 Amendment reduced acreage from 25 to 15 and building square footage from 42,812 SF to 0 SF, reducing the amount of consideration.

Improved VA Operations

Regional Offices & Parking

HOUSTON, TEXAS
Co-location Project

MOTIVATION: VA sought to collocate its Houston VARO and VAMC in order to improve operations and increase convenience for Veterans. Under this EUL, VA leased 15.82 acres of property on the Houston VAMC campus to Amelang Partners, Inc., who designed, constructed, operates and maintains a new, 123,000 square foot VARO office building and 500 parking spaces for VA's exclusive use, as well as a 17,000 square foot retail center. Through the Lease-Purchase agreement, the VARO and parking were reverted back to VA one year after the completion of construction.

Benefits to Veterans: Veterans receive better access to services due to the improved layout and accessibility of the Houston VARO and VAMC.

Benefits to VA: VA receives ongoing lease payments and avoids property maintenance costs.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Amelang Partners, LLC	15.82 acres	▪ VARO reverted back to VA one year after construction through Lease-Purchase Agreement ▪ $75,000 payment to VA upon lease signing ▪ VA receives ongoing lease payments ▪ Additional payment: VA receives 50% of rent recovered from tenants	1993	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$2,372,578	$179,797	$169,575
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$298,987	$95,243	$87,619
Cost Savings	Rental Savings	$0	$0	$0
	Parking Savings	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$2,671,566**	**$275,040**	**$257,194**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$2,671,566**	**$275,040**	**$257,194**

Improved VA Operations

Regional Offices & Parking

MILWAUKEE, WISCONSIN

Regional Office & Parking Co-location

MOTIVATION: The Milwaukee VARO was located in a severely antiquated building on a site located three quarters (¾) of a mile from the Milwaukee VAMC, requiring Veterans to use a shuttle to and from the hospital and the VARO. Under this EUL, 5.00 acres of property on the Milwaukee VAMC campus is leased to a Trust, who, by engaging private-sector partner Keenan Development Associates of Milwaukee, LLC, constructed, developed, operates, and maintains a new, 96,304 square foot office building and 196-space surface parking facility used by the Milwaukee VARO.

Benefits to Veterans: Providing a new regional office enhances the processing center's service to Veterans through the convenience of continued co-location with the VAMC.

Benefits to VA: This EUL reduces VA operating costs through savings on rent and parking expenses, as well as by providing for the maintenance of the leased property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Milwaukee Enhanced-Lease Development Trust	5.00 acres	▪ Lessee to finance, design, construct, manage and operate state-of-the-art office space (96,304 rentable sq. ft.) and parking (196 spots) for the Milwaukee VARO ▪ VA receives discount from market rate on full service rent, after Trust fees	2003	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$94,497	$30,102	$27,692
Cost Savings	Rental Savings	-$1,086,803	-$419,355	-$454,913
	Parking Savings	$3,580,396	$283,542	$278,795
VA Expense	Security, Maintenance, LEED Certification	$3,004,977	$191,295	$195,507
Direct Budget Impact	**Fiscal Year Subtotal**	**-$416,888**	**-$297,005**	**-$343,932**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**-$416,888**	**-$297,005**	**-$343,932**

Improved VA Operations

Regional Offices & Parking

SALT LAKE CITY, UTAH

Regional Office

MOTIVATION: VA sought to obtain office space for its regional office activities in Salt Lake City. Under this EUL, 4.76 acres of land on the Salt Lake City VAMC campus are leased to Boyer Red Butte Creek 1, L.C., who developed, constructed, manages and maintains a building and related improvements for the purpose of providing rentable space to accommodate the Veterans' Benefits Association (VBA), Veterans' Health Administration (VHA), and the VA Chief Information Officer (CIO), as well as 310 parking spaces for VA's use.

Benefits to Veterans: Veterans receive better access to services as a result of the new Salt Lake City Regional Office.

Benefits to VA: VA receives consideration from this project in the form of ongoing rental payments, cost savings for rent and parking, and avoided property maintenance costs.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Boyer Red Butte Creek 1, L.C.	4.76 acres	▪ Developer provides VA 101,564 sq. ft. of rentable space ▪ Developer permitted to build commercial office complex, including compatible private uses ▪ Developer pays annual rent to VA according to lease schedule	2001 *(Operations began: 2006)*	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$2,330,961	$205,474	$198,289
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$89,999	$28,669	$26,374
Cost Savings	Rental Savings	$17,278,961	$1,292,892	$1,223,617
	Parking Savings	$4,708,312	$326,892	$321,419
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$24,408,232**	**$1,853,926**	**$1,769,699**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$24,408,232**	**$1,853,926**	**$1,769,699**

Improved VA Operations

Regional Offices & Parking

SIOUX FALLS, SOUTH DAKOTA

Affiliated Parking

MOTIVATION: This EUL between the VA and Children's Care Hospital and School (CCHS) originated due to the need for additional parking to accommodate CCHS operations, as the lessee had no additional available space. VA had the land but it required capital funding to convert it into a parking lot. Through this EUL, VA leases 2.60 acres, on which the developer constructed and maintains a surface parking lot of 169 parking spaces, with 86 of those spaces designated for VA use.

Benefits to the Community: As a community service to CCHS, VA leased space for the construction of a two-level parking lot which will alleviate CCHS's parking problems, as well as accommodate VA's parking overflow, at no capital cost.

Benefits to the VA: VA avoids maintenance costs associated with the leased property and receives savings on the cost of parking.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Children's Care Hospital and School (CCHS)	2.60 acres	▪ 86 of 169 parking spaces for use by VA (at no cost) ▪ VA responsible for snow removal and non-construction utility costs, including electricity ▪ Developer responsible for all construction costs and ongoing maintenance ▪ At lease termination, parking lot becomes property of VA	1999	20 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$43,921	$10,435	$14,400
Cost Savings	Rental Savings	$0	$0	$0
	Parking Savings	$865,029	$46,700	$68,877
VA Expense	Non-Reimbursable Ancillary Services (snow removal, electricity, etc.)	$90,990	$7,000	$7,000
Direct Budget Impact	**Fiscal Year Subtotal**	**$817,960**	**$50,135**	**$76,277**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$835,753	$42,496	$63,744
	Value of Other Services	$0	$0	$0
Total Consideration[1]	**Fiscal Year Grand Total**	**$1,653,713**	**$92,631**	**$140,021**

[1] Project's lease term expired May 31, 2019. Consideration is prorated to reflect only the months project was operational in FY 2019

Improved VA Operations

Consolidation

CLEVELAND, OHIO

Mixed-Use (Office & Parking)

MOTIVATION: VA initially leased all of the Brecksville Division of the Louis Stokes VAMC ("Brecksville Site") to Veterans Development, LLC for redevelopment, and VAMC functions were relocated to the Cleveland Wade Park VAMC campus. Under this EUL, the lessee provides 6,962 square feet of office space at no cost to VA, as well as 75 parking spaces per day for 240 months following the execution of the EUL. VA entered into three service agreements with the lessee related to the Wade Park Site: the Wade Park Office Services Agreement, the Wade Park Parking Services Agreement, and the Wade Park Residential Services Agreement. VA pays for the following through these service agreements: administrative computer office space (127,365 rentable sq. ft.), 1,925 structured parking spots, and domiciliary services. As February 14, 2018, CGA LSVA Residential, LLC has been assigned all rights, title to, and interest of the original agreement.

Benefits to Community: This EUL will result in substantial short and long-term economic stimulus for the City of Brecksville and the local economy due to additional tax revenues, sales, and job creation.

Benefits to VA: VA received revenue from the upfront lease payment and avoids the costs associated with maintaining the leased buildings and property that would be incurred in the absence of this EUL.

Terms	Lessee	Property	Key Terms	Awarded	Term
	CGA LSVA Residential, LLC	100.73 acres; 27 Buildings (796,439 sq. ft.)	▪ Lessee paid VA $2 million of direct consideration upon lease execution ▪ Lessee provides rentable office space and parking spaces at no cost to VA	2009 *(Operation began: May 2011)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$2,000,000	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$25,733,066	$0	$2,827,358
	Avoided Property Maint. Costs	$871,670	$0	$278,942
	Avoided Cost of Veteran Encounters	$87,573,972	$11,435,583	$12,085,430
Cost Savings	Rental Savings	-$25,474,862	-$3,992,717	-$3,156,199
	Parking Savings	-$10,760,507	-$1,741,998	-$1,958,575
VA Expense	Domiciliary Services	$48,898,298	$5,305,487	$5,663,288
	Tenant Improvements	$10,838,415	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$20,206,625**	**$395,381**	**$4,413,669**
	Estimated Value of Enhanced Services (Budget Neutral)			
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$11,160,409	$3,334,024	$1,998,214
Total Consideration[1]	**Fiscal Year Grand Total**	**$31,367,033**	**$3,729,405**	**$6,411,883**

[1]As of FY 2019, there is no longer any conveyed square footage or acreage at the Cleveland EUL, therefore this project no longer receives Consideration through Avoided Building Maintenance Costs and Avoided Property Maintenance Costs.

Improved VA Operations

Consolidation

DURHAM, NORTH CAROLINA

Parking

MOTIVATION: Under this EUL, VA planned to secure necessary space and services to address the VAMC's primary care, research, and parking space deficiencies by also allowing the property to be used for commercial development by the lessee, and therefore established a Trust to execute the lease for VA and non-VA use in phases. However, due to weak financial market conditions at the time, planned development has not proceeded and all of the development options expired in January 2009. The lessee has the Right of First Offer for the next 10-13 years, but has lost development rights on all tracts. Currently, parking is the only site-specific EUL. Under this project, VA leases 5.45 acres on the VAMC campus, which originally included a parking garage and parking lot with a total of 1,251 parking spaces. Under the lease, the lessee is completely responsible for the management, protection, preservation, maintenance, and repair of the parking property.

Benefits to Veterans: Veterans benefit from increased access to parking in close proximity to the VAMC.

Benefits to VA: VA currently receives consideration in the form of upfront lease payments, and cost avoidance associated with the maintenance and repair of the property. Further, VA employees receive priority and discounted parking.

Terms	Lessee	Property	Key Terms	Awarded	Term
	LCOR Durham Parking, LLC	5.45 acres, 1 Parking Facility & parking lot (331,056 sq. ft.)	▪ After 35 years following lease execution date lessee pays 30% of net proceeds to VA ▪ Lessee to develop additional parking spaces, including 100 dedicated for VA use	2002	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$20,000	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$16,161,216	$2,107,951	$1,960,150
	Avoided Property Maint. Costs	$102,987	$32,811	$30,185
Cost Savings	Rental Savings	$0	$0	$0
	Parking Savings	$890,976	$108,000	$92,002
VA Expense	Maintenance, Third Party Report – Parking Deck Survey	$1,091,418	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$16,083,761**	**$2,248,762**	**$2,082,337**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$4,762,147	$779,400	$663,945
	Value of Other Services	$0	$0	$0
Total Consideration[1]	**Fiscal Year Grand Total**	**$20,845,909**	**$3,028,162**	**$2,746,282**

[1] Previous Consideration Reports incorrectly attributed a portion of the total parking spaces to Cost Savings instead of Enhanced Services.

Improved VA Operations

Consolidation

INDIANAPOLIS, INDIANA

Consolidation Project

MOTIVATION: VA identified the need to consolidate its Indianapolis Richard L. Roudebush VAMC operations to lessen the redundancy of services and space between the Cold Spring Road Division and the VAMC itself. The VAMC was comprised of 2 divisions located on separate campuses - the West 10th Street (WTS) division and the Cold Spring Road (CSR) division. The State-owned Larue D. Carter Memorial Hospital (LCH), adjacent to the VAMC's WTS division, contained approximately 1.8 acres of land, a 17,100 square feet, single story structure, and surface parking. Under this EUL, VA leases 22.29 acres of the 30-acre Cold Spring Road VAMC campus, which includes 9 buildings, to facilitate its redevelopment by the State into a replacement acute psychiatric facility.

Benefits to VA: This EUL yields revenue, property and building maintenance cost avoidance, rental and parking cost savings, and enhanced services consideration (upgraded site to higher EPA standard) to VA.

Terms

Lessee	Property	Key Terms	Awarded	Term
State of Indiana	22.29 acres, 9 Buildings (352,216 sq. ft.)	▪ Upfront rental payment to VA ▪ State provides grass cutting, landscaping and snow removal to 7.7 acres used only by VA ▪ VA will have use of 20 parking spaces, 17,000 sq. ft. building, and 1.86 acre parcel at existing State psychiatric hospital ▪ State to establish a Trust to fund acquisition of construction, facilities and other services for Indiana Veterans	1996	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$7,357,692	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$26,287,864	$2,982,809	$2,823,583
	Avoided Property Maint. Costs	$759,156	$149,194	$138,453
Cost Savings	Rental Savings	$3,867,797	$234,443	$230,518
	Parking Savings	$2,073,052	$244,566	$240,471
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$40,345,561**	**$3,611,012**	**$3,433,024**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$150,000	$0	$0
Total Consideration[1]	**Fiscal Year Grand Total**	**$40,495,561**	**$3,611,012**	**$3,433,024**

[1] Previous Consideration Reports incorrectly reported 38,500 sq ft of storage space rented by VA affecting the total Cost Savings. The correct square footage is 33,468 sq ft. The current figures reflect the correct amount.

Improved VA Operations

Consolidation

SALT LAKE CITY, UTAH

Mixed-Use

MOTIVATION: Prior to the execution of this EUL, several buildings on the leased property were over 50 years old, poorly insulated and had high energy bills. Under the terms of this EUL, VA leases 6.60 acres of property, which included several buildings, to Boyer Red Butte Creek, the developer that constructed the Salt Lake City VA Regional Office. The lessee demolished 6 unusable buildings, remodeled the existing "Building 4" to house the VA staff who worked in the old buildings, and constructed an 115,000 square foot commercial office building with 320 parking spaces for VA use.

Benefits to Veterans: Space that will likely be used (at least in part) for medical research may ultimately benefit Veterans, as well as potentially provide research and training opportunities for VA staff.

Benefits to VA: VA receives consideration from this EUL in the form of ongoing lease payments, avoided building and property costs, and rental and parking savings.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Boyer Red Butte Creek 2, L.C.	6.65 acres; 6 buildings (44,107 sq. ft.)	▪ Developer pays annual rent to VA according to lease schedule ▪ Developer to construct at least 115,000 sq. ft. commercial office/research/retail space with 320 parking spots	2006 *(Operations began: April 2009)*	45 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$1,903,173	$260,035	$301,819
Cost Avoidance	Avoided Building Maint. Costs	$3,754,910	$433,155	$317,756
	Avoided Property Maint. Costs	$124,148	$40,060	$36,853
Cost Savings	Rental Savings	$3,303,564	$379,817	$417,080
	Parking Savings[1]	$3,484,625	$321,602	$316,218
VA Expense	Asbestos Removal	$350,000	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$12,220,421**	**$1,434,668**	**$1,389,727**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$12,220,421**	**$1,434,668**	**$1,389,727**

[1] The previous Consideration Report (FY 2017) overstated the FY 2017 Parking Cost savings associated with this project. This has been corrected in subsequent versions.

Improved VA Operations

Other

HILLSBOROUGH, NJ

Somerville Asset Management Facility

MOTIVATION: In 2003, VA was using only one (1) of four (4) major warehouses on its 165.00 acre Somerville site, and overall property maintenance costs were high. This project leases VA's site, which includes four (4) buildings, to Somerville Business Park, LLC, for the purpose of developing and managing an Asset Management Facility located on VA property. The lessee is responsible for all development, construction, operations, maintenance, repair, improvements, and renovations of the property and existing buildings. In addition, through two Facility Use Agreements (FUAs), VA leases 86,400 sq. ft. of warehouse space for no rent, paying only operating costs.

Benefits to VA: Through this lease, VA receives revenue in the form of ongoing rent payments from the lessee. In addition, VA avoids the cost of maintaining the leased building and property and achieves rental savings from warehouse space.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Somerville Business Park, LLC	165.00 acres, 4 Buildings (1,061,988 sq. ft.)	Lessee to pay: ▪ VA receives annual ongoing lease payments ▪ VA to receive 15% of Net Operating Income (assuming income is positive) ▪ Cost Avoidance for building maintenance and property maintenance	2003	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$5,117,683	$340,000	$680,000
Cost Avoidance	Avoided Building Maint. Costs[1]	$36,493,015	$2,495,672	$2,458,502
	Avoided Property Maint. Costs	$3,118,390	$993,364	$913,848
Cost Savings	Rental Savings	$7,305,832	$0	$0
	Parking Savings	$0	$0	$0
VA Expense	Operations & Maintenance	$1,733,953	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$50,300,967**	**$3,829,035**	**$4,052,351**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration[2]	**Fiscal Year Grand Total**	**$50,300,967**	**$3,829,035**	**$4,052,351**

[1] Approximately half of the sq. ft. for this EUL was destroyed in a 2016 fire, decreasing the amount of consideration.

[2] On December 17th, 2019, VA executed the first Amendment to the EUL with Somerville Business Park, which revised the Participation payments. The payments were received in December 2019 and will appear as revenue in the next Consideration Report.

Improved VA Operations

Other

MEMPHIS, TENNESSEE
Child Advocacy Center

MOTIVATION: The Memphis Child Advocacy Center EUL project will repurpose and renovate the underutilized Building 8 on the Memphis VAMC campus. Through this EUL, the lessee financed, designed, developed, renovated, and will operate and maintain a social service agency for the purpose of providing prevention, intervention and treatment for child sexual abuse victims and non-offending family members. The lessee's use of Building 8 will allow for an expanded professional environment for the support of the main campus of the Memphis Child Advocacy Center. The leased property will provide VA 25 parking spaces at no cost.

Benefits to Veterans: This EUL will expand the administrative capacity of the lessee to provide child advocacy services to Veterans and their families.

Benefits to VA: The EUL allows VA to avoid the maintenance costs associated with the Memphis VAMC campus. This EUL also provides in-kind consideration of 25 parking spaces to VA at no cost.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Memphis Child Advocacy Center	0.43 acres, 1 Building (5,800 sq ft)	▪ VA receives cost avoidance ▪ Expanded administrative capacity of child advocacy services available to Veterans ▪ VA receives 25 parking spaces at no-cost	2011 *(Operations began: 2018)*	23 years (Two 20-year extension options)

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$67,077	$63,178	$3,898
	Avoided Property Maint. Costs	$2,787	$2,589	$198
Cost Savings	Rental Savings	$0	$0	$0
	Parking Savings	$37,092	$37,092	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$106,956**	**$102,859**	**$4,097**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration[1]	**Fiscal Year Grand Total**	**$106,956**	**$102,859**	**$4,097**

[1] As of October 2018, Lessee provides 25 parking spaces to VA Employees per the terms of the EUL.

Improved VA Operations

Other

MINNEAPOLIS, MINNESOTA
Credit Union

MOTIVATION: VA had the opportunity to relocate the Fort Snelling Federal Credit Union (FSFCU) from the Minneapolis VAMC campus to an underutilized parcel of VA land. Under this EUL, VA leases 0.5 acres of land to the lessee, who constructed a new 3,000 square foot building. This project allowed for an expansion in the quality of credit union services and the return of the previously leased space to the VAMC for patient and staff purposes.

Benefits to Community: Expanded FSFCU services include a more convenient 24-hour drive-up ATM, extended hours, better privacy measures for financial transactions, and improved access to the credit union by car.

Benefits to VA: Through this EUL, VA receives ongoing lease payments from the lessee and avoids the cost of maintaining the leased property.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Fort Snelling Federal Credit Union	0.50 acres	▪ Lessee builds 3,000 sq. ft. building, with 1,120 sq. ft. four-unit drive-up canopy to house the credit union ▪ VA receives ongoing lease payments	2004	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$107,780	$8,000	$9,260
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$9,450	$3,010	$2,769
Cost Savings	Rental Savings	$0	$0	$0
	Parking Savings	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$117,229**	**$11,010**	**$12,029**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$117,229**	**$11,010**	**$12,029**

Improved VA Operations

Other

MOUND CITY, ILLINOIS
Visitor Center

MOTIVATION: As a national shrine, Mound City National Cemetery lacked the order and appearance to set it apart from its civilian counterparts. This EUL allowed for VA to improve the overall appearance of the Cemetery by leasing the caretaker's center, along with 0.50 acres, to the Mound City National Cemetery Preservation Committee. The lessee rehabilitated the existing building, which had declined in condition, into an Interpretive/Visitor Center.

Benefits to Veterans: This agreement helps increase visitation to the site and ensures the preservation of Mound City National Cemetery as a National Shrine.

Benefits to VA: This project saves VA ongoing building and property maintenance costs.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Mound City National Cemetery Preservation Committee	0.50 acres, 1 building (2,316 sq. ft.)	▪ Lessee to develop, finance, and operate the visitor center and adjacent facilities ▪ Lessee to obtain utilities for the facilities	2003 *(Operations began: 2006)*	25 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$88,050	$24,258	$22,712
	Avoided Property Maint. Costs	$9,450	$3,010	$2,769
Cost Savings	Rental Savings	$0	$0	$0
	Parking Savings	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$97,500**	**$27,268**	**$25,481**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$97,500**	**$27,268**	**$25,481**

Improved VA Operations

Other

WEST PALM BEACH, FLORIDA

Public Safety Building

MOTIVATION: The City of Riviera Beach, Florida, sought to construct a satellite public safety facility to service the growing Western portion of the city. VA and the City saw mutual benefit in locating the facility on VA property. Under the EUL, VA provided 0.84 acres of unused land to the City rent free to be used for the construction of the 6,000 square foot facility. In exchange, the City provides 900 square feet of long-term storage space to house VA-owned oversized maintenance equipment, as well as safety training for its 1,600 employees on an as-needed basis.

Benefits to VA: VA receives consideration under this EUL from property maintenance cost avoidance, storage space rental cost savings, and value from the fire and safety training provided by the lessee.

Terms	Lessee	Property	Key Terms	Awarded	Term
	City of Riviera Beach, FL (CRB)	0.84 acres	▪ CRB to construct 6,000 sq. ft. building to house fire and police stations, including 900 sq. ft. to house VA-owned grounds maintenance equipment ▪ CRB to provide fire and safety training to VA's 1,600 employees	1994	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$15,875	$5,057	$4,652
Cost Savings	Rental Savings	$117,728	$10,051	$9,883
	Parking Savings	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$133,604**	**$15,108**	**$14,535**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$10,000	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$143,604**	**$15,108**	**$14,535**

Community Benefits

Research/Medical Facility

CHARLESTON, SOUTH CAROLINA

Affiliate Partnering

MOTIVATION: The Medical University of South Carolina (MUSC) has long-term plans to expand its facility to include a new patient bed tower, an associated low-rise diagnostic and treatment facility, roadways and parking facilities adjacent to the VAMC. This EUL project leases a one block segment of Doughty Street, a primary VAMC access road, to MUSC to facilitate these development plans.

Benefits to VA: VA receives consideration from this EUL in the form of upfront and ongoing lease payments, as well as avoided property maintenance costs. In addition, the agreement helps to secure the existing, strong affiliate relationship between VA and MUSC while improving surrounding roadways.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Medical University of South Carolina (MUSC)	0.49 acres	▪ Lump sum payment of $342,000 when project closes street for construction-related purposes ▪ VA receives ongoing lease payments, ending in 2014	2004 *(Operation began: April 2006)*	75 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$342,000	$0	$0
	Ongoing Lease Payments	$1,368,000	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$9,261	$2,950	$2,714
Cost Savings	Rental Savings	$0	$0	$0
	Parking Savings	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$1,719,261**	**$2,950**	**$2,714**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$1,719,261**	**$2,950**	**$2,714**

Community Benefits

Research/Medical Facility

MOUNTAIN HOME, TENNESSEE

Medical School

MOTIVATION: Previous to the EUL, East Tennessee State University (ETSU)'s short-term leases of land on the James H. Quillen VAMC campus left VA responsible for providing and funding all maintenance and capital improvements on behalf of ETSU. This EUL transfers long-term legal and financial responsibility for the operation, maintenance, repair and improvement of the property to ETSU, and has provided for the construction of a new building on the campus to improve medical and research capabilities, the renovation of existing structures, as well as the demolition of unused structures.

Benefits to VA: This EUL achieves cost avoidance to VA for both building and property maintenance.

Terms	Lessee	Property	Key Terms	Awarded	Term
	East Tennessee State University (ETSU)	31.00 acres, 8 Buildings (383,566 sq. ft.)	▪ ESTU assumes all financial responsibility for the maintenance and capital improvements of all leased buildings and grounds within the EUL in accordance with State historical preservation requirements ▪ VA receives rent free use of approximately 7,000 sq. ft. in Building 2	1998	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$27,637,745	$2,965,606	$2,750,168
	Avoided Property Maint. Costs	$585,879	$186,632	$171,693
Cost Savings	Rental Savings	$1,545,154	$119,234	$117,238
	Parking Savings	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$29,768,778**	**$3,271,472**	**$3,039,099**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$29,768,778**	**$3,271,472**	**$3,039,099**

Community Benefits

Child Care

DALLAS, TEXAS
Child Development Center

MOTIVATION: A 1996 survey at the Dallas VAMC identified a child care need for approximately 80 VAMC employees' dependents, ages five and younger. Although Dallas has over 100 child care centers within a five-mile radius of the Medical Center, many of these centers operate at or near capacity and do not offer a full range of services. VA pursued an EUL to finish out and furnish a community center building shell to be operated as a child development center, thereby acquiring high-quality child care services.

Benefits to the Community: This project provides high-quality, on-site child care to both VA and non-VA affiliated children and offers a full range of services, including care for infants. Services are provided at a reduced cost for VA employees.

Benefits to VA: VA continues to avoid the costs of building and property maintenance associated with the Center.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Just 4 Kids Learning Center	4.00 acres, 1 Building (8,706 sq. ft.)	▪ Lessee to finish out, furnish, operate and maintain a child development center ▪ Discount of child care services to children of VA employees	1999	20 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$1,030,789	$111,922	$81,076
	Avoided Property Maint. Costs	$75,597	$24,082	$22,154
Cost Savings	N/A	$0	$0	$0
VA Expense	Utilities	$136,241	$14,209	$13,972
Direct Budget Impact	**Fiscal Year Subtotal**	**$970,146**	**$121,794**	**$89,259**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of VA Child Care Provided	$3,479,397	$231,000	$202,500
	Value of Non-VA Child Care Available	$2,693,444	$385,000	$397,500
Total Consideration[1]	**Fiscal Year Grand Total**	**$7,142,988**	**$737,794**	**$689,259**

[1] Previous Consideration Reports overstated the utility cost for Fiscal Year 2017. The amount has been corrected in the current consideration.

Community Benefits

Child Care

DAYTON, OHIO

Child Development Center—Building 401

MOTIVATION: Prior to the execution of this project, the deteriorating condition of the plumbing and electrical systems in "Building 401" on the Dayton VAMC campus jeopardized the day care services provided by the lessee via short-term leases. This EUL allowed for a longer term commitment and provided for the renovation of the building as well as the expansion of the Center to include infant care services.

Benefits to the Community: This project provides high-quality, on-site child care to both VA and non-VA affiliated children.

Benefits to VA: VA receives rent from Catholic Social Services of the Miami Valley ("CSS") and avoids the costs of building and property maintenance associated with the Center.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Catholic Social Services of the Miami Valley	1.40 acres, 1 Building (23,600 sq. ft. in Building 401 and 11,500 sq. ft. in abutting playground)	▪ Lessee to construct, renovate, refurbish and operate an existing child daycare center ▪ At least 60 child care slots made available for VA employees ▪ VA receives annual ongoing lease payments	2004	20 years *(plus options for two 20 year extensions)*

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$363,611	$37,820	$27,763
Cost Avoidance	Avoided Building Maint. Costs	$1,339,045	$233,911	$120,407
	Avoided Property Maint. Costs	$26,459	$8,429	$7,754
Cost Savings	N/A	$0	$0	$0
VA Expense	Maintenance	$19,841	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$1,709,275**	**$280,160**	**$155,924**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of VA Child Care Provided	$4,437,182	$212,500	$400,000
	Value of Non-VA Child Care Provided	$11,516,844	$900,000	$1,112,500
Total Consideration	**Fiscal Year Grand Total**	**$17,663,301**	**$1,392,660**	**$1,668,424**

Community Benefits

Child Care

WASHINGTON, DC
Child Development Center

MOTIVATION: The Washington, DC VAMC identified a need for increased child care options for its 1,700 full and part-time employees. This EUL provides for a Child Development Center, including a playground, associated parking, and drop-off spaces, on the VAMC campus which was constructed and is now managed, operated and maintained by the lessee.

Benefits to the Community: This EUL provides a high-quality, low cost option for child care to VA and non-VA employees.

Benefits to VA: In addition to improved employee access to on-site child care at a reduced rate, VA also avoids property maintenance costs associated with the leased land.

Terms	Lessee	Property	Key Terms	Awarded	Term
	La Petite Academy	1.30 acres	▪ Lessee to finance, design, build, and manage an on-site, quality child care center for 100 children ▪ Priority enrollment and a reduced user fee is provided for children of VA employees	1993	35 years

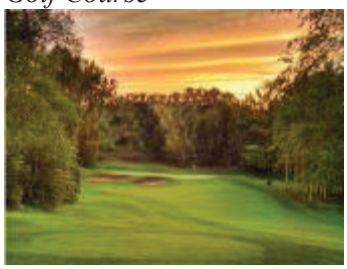
Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$24,569	$7,827	$7,200
Cost Savings	N/A	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$24,569**	**$7,827**	**$7,200**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of VA Child Care Provided	$2,135,203	$171,480	$201,488
	Value of Non-VA Child Care Available	$27,859,405	$3,058,060	$3,079,888
Total Consideration	**Fiscal Year Grand Total**	**$30,019,178**	**$3,237,367**	**$3,288,576**

Community Benefits

Golf Course

ST. CLOUD, MINNESOTA

Golf Course



MOTIVATION: This project was pursued to allow the City of Saint Cloud, Minnesota to, as the lessee, make significant capital improvements to the existing St. Cloud golf course and therefore increase the value of the property and potential revenue. Since the City has assumed management and operations of the golf course, it has redesigned the course and made significant improvements to the property including landscaping, installation of a security fence, and the design and construction of a baseball stadium.

Benefits to Veterans: Veterans receive free rounds of golf.

Benefits to VA: VA receives consideration in the form of annual payments from the lessee and property maintenance cost avoidance.

Terms

Lessee	Property	Key Terms	Awarded	Term
City of St. Cloud	45 acres	▪ City provides an offsetting water/sewer credit to VA equal to: ▪ $5,000 per year; ▪ 5% of golf gross revenues during first 20 years; ▪ 7% of golf gross revenues plus 1% of baseball stadium gross revenues over last 15 years of the EUL ▪ Up to 2,000 rounds per year free to VA, along with reserved tee times	1997 *(Operations began: 1998)*	35 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$0	$0	$0
	Annual Consideration Payments	$88,970	$0	$0
Cost Avoidance	Avoided Building Maint. Costs	$0	$0	$0
	Avoided Property Maint. Costs	$850,503	$270,917	$249,231
Cost Savings	Water/Sewer Credit	$91,217	$16,722	$13,567
VA Expense	Third Party Reports – Appraisal	$5,500	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$1,025,190**	**$287,639**	**$262,799**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Services to Veterans	$236,720	$16,020	$13,600
	Value of Services to Non-Veterans	$0	$0	$0
Total Consideration	**Fiscal Year Grand Total**	**$1,261,910**	**$303,659**	**$276,399**

Community Benefits

Other

CHILLICOTHE, OHIO

Stadium

MOTIVATION: VA determined that repairs and upgrades were necessary to maintain the integrity of the VA Memorial Stadium at Chillicothe. This EUL project provides for the maintenance and improvement of the property by the lessee, as well as for the preservation of the stadium as a testament and memorial to Veterans.

Benefits to Veterans: Improvements to the stadium provide Veterans with a venue for activities such as concerts, ball games, etc.

Benefits to VA: This VA Memorial Stadium multi-purpose facility project provides VA ongoing lease payments, use of the stadium two days per year at no cost, and property and building maintenance cost avoidance.

Terms	Lessee	Property	Key Terms	Awarded	Term
	Ross County Board of Commissioners	4.27 acres, 1 stadium building (5,800 sq. ft.)	▪ Lessee to preserve, operate, manage, and maintain the property, which includes VA Memorial Stadium and its accessory facilities ▪ Lessee is responsible for utilities for the multipurpose Memorial Stadium facilities ▪ VA receives annual ongoing payments	2008	30 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$38,047	$0	$5,045
Cost Avoidance	Avoided Building Maint. Costs	$209,055	$24,045	$29,344
	Avoided Property Maint. Costs	$76,132	$25,707	$23,649
Cost Savings	Rental Savings	$0	$0	$0
	Parking Savings	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$323,234**	**$49,752**	**$58,038**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$448,000	$40,000	$34,000
Total Consideration	**Fiscal Year Grand Total**	**$771,234**	**$89,752**	**$92,038**

Community Benefits

Other

PERSHING HALL, PARIS, FRANCE

Hotel

MOTIVATION: Beginning in 1928, the Pershing Hall building was used to accommodate American Veterans from World War I and World War II in the form of a club for members of the American Expeditionary Forces, known now as the American Legion. The costs of maintaining this historical landmark, as well as the distance from VA's normal operational realm coupled with the deteriorating conditions of the building, generated interest in leasing the property to a developer to convert the building to a hotel with basic rent. Since the developer assumed management and operations of the hotel under this EUL, the building has been redesigned and significant improvements have been made to the property.

Benefits to VA: VA receives consideration in the form of ongoing rent payments and avoided significant building maintenance costs, as well as free meeting space for up to 50 people 3 times annually.

Terms	Lessee	Property	Key Terms	Awarded	Term
	LA Partners	0.13 acres, 1 Building (34,444 sq. ft.)	▪ Use of building never to counter the USA's interest ▪ Lessee to improve, manage and operate a hotel and restaurant ▪ Lessee to display commemorative plaques and bronzes, original paintings, and bronze bust sculptures ▪ VA receives annual ongoing lease payments	1998	99 years

Outcomes	Description	Cumulative (2006-2019)	2019	2018
Revenue	Upfront Lease Payments	$0	$0	$0
	Ongoing Lease Payments	$3,764,165	$571,385	$252,859
Cost Avoidance	Avoided Building Maint. Costs	$3,061,001	$360,773	$337,775
	Avoided Property Maint. Costs	$2,457	$783	$720
Cost Savings	Rental Savings	$0	$0	$0
	Parking Savings	$0	$0	$0
VA Expense	N/A	$0	$0	$0
Direct Budget Impact	**Fiscal Year Subtotal**	**$6,827,623**	**$932,941**	**$591,354**
Estimated Value of Enhanced Services (Budget Neutral)				
Enhanced Services	Value of Additional Parking Services	$0	$0	$0
	Value of Other Services	$187,743	$0	$14,421
Total Consideration	**Fiscal Year Grand Total**	**$7,015,096**	**$932,941**	**$605,775**

Alphabetical Index of EULs

Active Projects

Albany, New York – Regional Offices & Parking
Atlanta, Georgia – Regional Office Co-location
Augusta, Georgia (I) – Permanent Supportive Housing
Augusta, Georgia (II) – Permanent Supportive Housing
Barbers Point, Hawaii – Transitional Supportive Housing
Batavia, New York – Congregate Living
Batavia, New York – Transitional Supportive Housing
Battle Creek, Michigan – Permanent Supportive Housing
Bedford, Massachusetts – Permanent Supportive Housing - SRO
Bedford, Massachusetts– Permanent Supportive Housing
Brockton, Massachusetts – Permanent Supportive Housing
Butler, Pennsylvania – Transitional Supportive Housing
Butler, Pennsylvania – Mental Health Facility
Canandaigua, New York – Permanent and Transitional Supportive Housing
Charleston, South Carolina – Affiliate Partnering
Chicago, Illinois (Jesse Brown) – Energy
Chicago, Illinois (Jesse Brown) – Regional Office & Parking Co-location
Chillicothe, Ohio – Stadium
Chillicothe, Ohio– Permanent Supportive Housing
Cleveland, Ohio – Mixed-Use (Office & Parking, Residential)
Columbia, South Carolina – Co-location/Mixed-Use Project
Dallas, Texas – Child Development Center
Danville, Illinois – Independent Living
Danville, Illinois– Permanent Supportive Housing
Dayton, Ohio – Child Development Center (Building 401)
Dayton, Ohio – Permanent Supportive Housing (Building 412)
Dayton, Ohio – Transitional Supportive Housing (Building 400)
Dayton, Ohio – Transitional Supportive Housing (Building 402)
Dayton, Ohio (I) (St. Mary Development) - Senior Supportive Housing (Building 415)
Durham, North Carolina – Parking
Fort Snelling/Minneapolis, Minnesota – Permanent Supportive Housing
Ft. Harrison, Montana – Permanent Supportive Housing
Grand Island, Nebraska– Permanent Supportive Housing
Hillsborough, New Jersey – Somerville Asset Management Facility
Hines, Illinois– Permanent Supportive Housing (Building 578)
Hines, Illinois – Transitional Supportive Housing (Building 14)
Hines, Illinois – Assisted Living (Building 53)
Houston, Texas – Co-location Project
Indianapolis, Indiana – Consolidation Project
Kerrville, Texas – Permanent Supportive Housing
Leavenworth, Kansas – Mixed Housing
Lincoln, Nebraska – Permanent Supportive Housing
Los Angeles, California – Permanent Supportive Housing (Building 209)
Lyons, New Jersey– Permanent Supportive Housing
Memphis, Tennessee – Child Advocacy Center
Menlo Park, California– Permanent Supportive Housing
Milwaukee, Wisconsin – Regional Office & Parking Co-location
Minneapolis, Minnesota – Credit Union
Minneapolis, Minnesota – Permanent Supportive Housing
Minneapolis, Minnesota (II) – Permanent Supportive Housing
Mound City, Illinois – Visitor Center
Mountain Home, Tennessee – Energy Center
Mountain Home, Tennessee – Medical School

Newington, Connecticut (I) – Permanent Supportive Housing
North Chicago, Illinois – Energy Phase I & Phase II
Northampton, Massachusetts– Permanent and Transitional Supportive Housing
Perry Point, Maryland– Permanent Supportive Housing
Pershing Hall, France – Hotel
Roseburg, Oregon – Transitional Supportive Housing (Orchard Knoll)
Roseburg, Oregon – Permanent Supportive Housing (Eagle Landing)
Salt Lake City, Utah – Mixed-Use
Salt Lake City, Utah – Regional Office
Salt Lake City, Utah – Transitional Supportive Housing
Sepulveda, California – Permanent Supportive Housing
Sepulveda, California – Permanent Supportive Housing
Sioux Falls, South Dakota – Affiliated Parking
St. Cloud, Minnesota – Golf Course
St. Cloud, Minnesota – Permanent Supportive Housing
St. Cloud, Minnesota (II) – Permanent Supportive Housing
Togus, Maine– Permanent Supportive Housing
Tuscaloosa, Alabama – Hospice
Tuscaloosa, Alabama– Permanent Supportive Housing
Vancouver, Washington – Crisis Triage Center
Vancouver, Washington– Permanent Supportive Housing
Vancouver, Washington – Transitional Supportive Housing
Viera (Brevard County), Florida – Assisted Living Housing
Walla Walla, Washington – Permanent Supportive Housing
Washington, DC – Child Development Center
West Palm Beach, Florida – Public Safety Building

Terminated/Disposed EULs

Batavia – Single Room Occupancy
Bay Pines – Child Development Center
Big Spring, Texas – Parking
Chicago, Illinois (Lakeside) – Realignment
Fort Howard, Maryland – Life Care Community
Indianapolis – Nursing Home
North Chicago, Illinois – Medical School
North Little Rock, Arkansas – Golf Course
West Haven – Child Development Center

Expired EUL's

Alexandria, Louisiana – Transitional Housing Facility
Bath, New York – Permanent Housing Facility
Cheyenne, Wyoming– Permanent Housing Facility
Dayton, Ohio (II) – Permanent Housing Facility
Fort Howard, Maryland- Mixed Use – Clinic / Housing
Knoxville, Iowa – Transitional Housing Facility
Memphis, Tennessee (II) – Parking Structure / Mixed Use
Newington, Connecticut (II) – Assisted Living / Extended Care Housing Facility
Northport, New York– Permanent and Transitional Housing Facility
Sacramento, California – Nursing Care Facility
Salem, Virginia– Permanent Housing Facility
Topeka, Kansas– Permanent Housing Facility

1. **Revenue**: New cash (both upfront payments and ongoing payments) receipts received by VA. Revenue does not include reimbursement to VA for services rendered.

   Examples of Revenue:
   - One-time lump sum payment
   - Ongoing lease payments paid to VA

2. **Cost Avoidance**: The portion of the value of goods or services provided by the lessee that VA would have otherwise paid in the absence of the lease. Cost avoidance does not include investment or expenses incurred by the lessee that are over and above what VA was paying or would have to pay. For example, where VA was originally paying to maintain underutilized buildings on VA property and through an EUL, those underutilized buildings were conveyed to a Lessee, VA would be avoiding the building maintenance costs associated with those buildings. Similarly, if a Lessee provides two (2) new services to Veterans, one of which substitutes for a service a VAMC was providing, only the service that substituted for the VA program would be recorded as cost avoidance. (The service that was provided over and above what VA provides would be recorded as an "Enhanced Service.")

   Examples of Cost Avoidance:
   - Avoided cost of bed days of care (calculated as the average Number of Veteran Residents utilizing EUL housing per day[1] times the Percent Decrease in Bed Days of Care[2] times the Average Cost of a Bed Day of Care[3] times the Average Number of Days that a Homeless Veteran Spends in Acute Care Per Year[4]) The Average Cost of a Bed Day of Care uses data specific to each fiscal year. Based on reports produced by the VA, it is estimated that housing homeless Veterans leads to a 22% decrease of days spent in acute care, resulting in cost avoidance to VA of approximately 12.2 days of acute care per year per Veteran at a facility. It is assumed that this marginal decrease would be realized by nearby VAMC facilities. Note that housing a homeless Veteran does not completely eliminate the cost of acute care. The value captured in this calculation is the reduction in services required by a Veteran that has been housed in one of these facilities.
   - Avoided building and property maintenance calculated using data from VA's FRPC system, which reports actual fiscal year costs per square foot and per acre for VA's facilities and land, respectively. Building maintenance is calculated by multiplying the annual cost per square foot by the square footage of any conveyed facility. Property maintenance is calculated by multiplying the annual cost per acre acreage of any property conveyed.

3. **Cost Savings**: Market price of goods or services supplied to VA through the lease minus VA's current cost to procure these goods or services (including Trust or associated fees) or savings associated with process improvements. All cost savings in this report relate to necessary commodity purchases, such as office space, parking, or energy.

   Examples of Cost Savings:
   - The difference in cost between the comparable market rate for office space, energy, or parking provided for Veterans, VA employees, and VA visitors (additional parking not assumed to be paid by VA in the absence of an EUL is valued as an Enhanced Service); and the amount paid by VA for those purchases.
   - In order to estimate the value of Cost Savings achieved through energy projects, VA compared actual VA payments for energy to the estimated market price for VA energy use. It is possible, by this methodology, to have positive or negative savings, depending on the market rate. However, VA pays fixed rates that can be adjusted periodically, which are intended to be below market rate.

4. **Enhanced Services**: A service expansion or improvement resulting from the lease with quantifiable value that does not directly affect VA's operating budget. Enhanced Services include services that do not substitute for VA services, either because the service is not available in quantities to meet demand or because the service falls outside the scope of services currently provided by the local VAMCs (e.g. transitional housing and hospice services provided to augment services provided by VA programs). Similarly, Enhanced Services include discounts on market services that might not otherwise be available (e.g. recreational therapy, child care). Benchmarks for Enhanced Services are obtained using best available market rate (e.g. VA Homeless Per Diem Rate, actual parking or stadium use rates at the EUL facility, or other sources). Added to the calculation of Enhanced Services is the value of services rendered for the Veteran and non-Veteran community alike, such as child care services and the value of units made available by Supportive Housing projects

   Examples of Enhanced Services:
   - Housing units or child care services made available to the community
   - Services provided by the Lessee such as educational training and job placement

5. **Expenses:** A cost in part or in whole attributed to the enhanced-use lease (excluding EUL program overhead costs) which is not already subtracted in a calculation of cost savings.

---

[1] According to EUL facility occupancy data

[2] According to Kasprow, Wesley J., and Timothy Cuerdon. Special Needs Grant and Per Diem Programs Final Report. Department of Veterans Affairs, 2010.

[3] Average of MED-GENERAL ACUTE, CLC-LS MAINT NUR, and RES-MH DOMICILIARY from Cost by Treating Specialty report from DSS as reported by fiscal year. This average was used because it is assumed that the reduction in Veteran encounters would occur across a variety of services, and not all Veteran encounters would rise to the level of acute services.

[4] According to Hines VA Spinal Cord Injury/Disorders Center Annual Report FY 2010

Examples of Expenses

- Ancillary services VA provides to lessee that are not reimbursed
- VA construction costs for the project that are not reimbursed (e.g. VA demos three buildings)
- VA Capital Contributions

Chapter 9.2
Communities Helping Invest through Properties and Improvements Needed (CHIP-IN) for Veterans Act of 2016

Background

Public Law 114-294, the Communities Helping Invest through Property and Improvements Needed for Veterans Act of 2016, also referred to as the CHIP IN for Veterans Act of 2016, authorizes the Department to carry out a pilot program under which it may accept up to five donations from specified non-federal entities of: (1) real property that includes a constructed facility or that is to be used as the site of a facility constructed by the donor, and (2) a facility to be constructed by the donor on real property of the VA. The VA's authority to accept donations under the program expires five years after the date of the bill's enactment (12/16/2021).

The VA is eligible to accept donations after they meet the following conditions:

- Property meets a VA Strategic Capital Investment Planning (SCIP) Process need;
- Included in the SCIP priority list, in the most recent budget submission; or
- Funds have been previously appropriated for the VA facility project

Donors must:

- Independently donate the real property, improvements, goods, or services for the VA facility project in an amount acceptable to the VA and at no additional cost to the federal government.
- Conduct all necessary environmental and historic preservation due diligence; comply with all local zoning requirements (except for federally required studies and consultations).
- Obtain all permits required in connection with the construction of the facility; use construction standards required of the VA when designing and building the facility.
- Provide the real property, improvements, goods, or services in a manner sufficient to complete the construction of the facility, at no additional cost to the federal government.

The Government Accountability Office is required to report to Congress, at least biennially, on the donation arrangements entered into under the pilot program.

VA can carry out a pilot program to accept up to five donations for VA facility projects; two have been identified:

1. Omaha, NE: A project/donation in Omaha, NE, for an ambulatory care center has already been approved and is planned to begin seeing patients at the end of FY2020.

2. Tulsa, OK: A project/donation to construct an inpatient facility to support the Muskogee Veterans Affairs Medical Center (VAMC)'s projected workload in the Tulsa, OK, market. VA received a proposal from The Board of Regents for the Oklahoma Agricultural and Mechanical Colleges (Oklahoma State University (OSU)/A&M Regents) to donate a site with a building that will be renovated and a parking garage constructed to support the VAMC's requirements as detailed in the project's SCIP Business Case. The proposal requires a capital contribution of $120 million to execute the donation. As can be seen by VA's FY2021 Budget Request, VA is requesting $120 million in Major Construction funding to support OSU/A&M Regents' proposal to allow the Secretary of VA to accept this donation. A prospectus outlining the Tulsa project's scope and cost as submitted and approved through SCIP is included below, however the project does not need authorization to be eligible as a CHIP-IN donation project.

Additional sites for the pilot program can be any of the SCIP 2021 prioritized projects listed in Table 7-1. Similar to the Tulsa and Omaha capital initiatives, SCIP provides VA's capital requirements, and donors can submit proposals to fund these initiatives to help mitigate these gaps for VAMCs.

Tulsa's Prospectus (Also listed in *Volume 4, Chapter 2)*:

Tulsa, Oklahoma
Construct Inpatient Facility

I. Budget Authority:

Total Estimated Cost	Available Through 2020 Request	2021 Request	Future Request
$220,900,000	$0	$120,000,000	N/A

II. Priority Score: FY 2021 – 0.2735
Major Construction projects are funded based on their priority ranking and on their ability to award construction contracts in the current fiscal year.

III. Description of Project:
This project includes the development of an approximately 260,000 gross square feet (GSF) inpatient facility for 58 medical/surgical, intensive care unit, and medical rehab beds; an emergency department; operating rooms; radiology; and the ancillary and support services needed to maintain these services. With the development of this facility, all medical, surgical, and rehabilitation beds would be moved from the Jack C. Montgomery VAMC in Muskogee to Tulsa, which is closer to the majority of Veterans served by the Eastern Oklahoma VA Health Care System (EOVAHCS). As an added benefit of the relocation to Tulsa, it is expected that recruiting and retention of providers, nurses, and hospital staff would become easier and that existing affiliate partnerships with OSU, could be

strengthened and new affiliate partnerships with other higher education entities and community partners could be forged. Upon completion of this project, space will be available for backfill at the Jack C. Montgomery VAMC and VA plans to convert the previous inpatient and surgical spaces to a community living center (CLC) and expand the existing inpatient mental health services through a subsequent project.

The intent is to execute this project as a public-private partnership, made possible by Public Law 114-294, the Communities Helping Invest through Property and Improvements Needed (CHIP-IN) for Veterans Act of 2016. The CHIP IN Act is further detailed in Chapter 9.2 of *Volume IV: Construction, Long Range Capital Plan and Appendix*. In this partnership, VA would contribute this year's funding request amount, $120 million, to the overall development of the inpatient facility described above.

IV. Alternatives to Construction Considered

Status Quo:

This alternative would continue providing inpatient services in Muskogee. A majority of Eastern Oklahoma Veterans reside in and around Tulsa. This alternative would require this large number of Veterans to continue to travel nearly an hour from the surrounding Tulsa area to Muskogee to receive care. In addition, this alternative would require VA's continued reliance on community resources for a large percentage of services and would not improve the recruitment and retention of providers and nurses. Further, the status quo alternative would continue to provide inpatient services in an outdated hospital. For these reasons, this is not the preferred alternative.

Alternative 1: New Construction (Preferred Alternative)

This alternative proposes to move inpatient services from Muskogee to Tulsa into a new, state-of-the-art inpatient-focused facility. This would locate services closer to a large percentage of Eastern Oklahoma Veterans, provide opportunities for enhancing affiliations with the Tulsa medical community, improve recruitment and retention of staff, and ultimately allow for the eventual backfill of spaces at Muskogee for the introduction of a CLC and the expansion of inpatient mental health services. There is an opportunity for VA to receive a generous donation from community partners in the Tulsa area which may provide for a portion of the cost of the project. For these reasons, this is the preferred alternative.

Alternative 2: Renovation of VA-Owned Facility

This alternative proposes to renovate a vacant or underutilized VA-owned facility for the inpatient services being proposed. For this alternative to be successful, VA would need to own a building within the same geographical area as the proposed donated building, with a floor plan able to accommodate the requirements proposed in this project. In addition, as part of the 2021 SCIP process, the EOVAHCS identified an existing large space gap (deficit) for the market that would not be resolved through renovating space. Therefore, this option is not viable and has been excluded from the quantitative analysis below.

Alternative 3: Lease
This alternative proposes to lease an approximately 192,600 net usable square foot (NUSF) (equivalent to approximately 260,000 GSF) inpatient facility. The lease would provide for expanded inpatient services in the Tulsa area in the same manner as the preferred alternative, but may not be able to generate the same level of operational efficiencies and opportunities with affiliates and community partners as the preferred alternative. Therefore, this is not the preferred alternative.

Alternative 4: Contract Out
This alternative assumes that all services proposed in the project would be contracted out to fee-basis providers in the Tulsa area. However, there may not be sufficient, qualified private health care providers in the Tulsa market area to absorb all of the current and projected Veteran workload. In addition, this alternative is more costly and could result in a loss of quality and control over Veteran health care. Therefore, this alternative is not optimal and is the least preferred.

Alternative 5: Acquisition of an Existing Facility through Purchase
This alternative proposes that VA purchases an existing facility that is suitable for renovation and able to accommodate all project requirements in the same manner as the preferred alternative. However, high-level market research has indicated that a suitable facility for possible acquisition and subsequent renovation that would meet all project requirements in the same manner as the preferred alternative is not currently available for sale in the delineated market area of the proposed project. Therefore, this option is not viable and has been excluded from the quantitative analysis below.

Alternative 6: Collaboration with DoD for a Joint Facility
This alternative proposes to construct a new joint facility, in collaboration with the Department of Defense (DoD), in the vicinity of the downtown Tulsa area to provide expanded inpatient services in the Tulsa area. However, according to VHA's Office of Interagency Health Affairs - Office of VA-DoD Coordination, there are currently no facility sharing opportunities in the vicinity of the proposed project. Therefore, this alternative has been excluded from the quantitative analysis below.

V. Analysis of Costs (discounted dollars in thousands)

	Acquisition*	Ancillary Services**	Equipment and Other Items	Total Life Cycle	Total # of FTEE	Net New FTEE
Status Quo	$-	$2,465,910	$-	$2,465,910	0	N/A
New Construction	$248,056	$2,429,227	$60,671	$2,737,954	574	574
Renovation	N/A	N/A	N/A	N/A	N/A	N/A
Lease	$77,757	$2,491,828	$60,671	$2,630,256	574	574
Contract Out	$23,451	$3,485,165	$-	$3,508,616	0	0
Acquire an Existing Facility	N/A	N/A	N/A	N/A	N/A	N/A
VA/DoD Collaboration	N/A	N/A	N/A	N/A	N/A	N/A
Other (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A

*This is the total estimated cost for construction/renovation projects or build-out (special purpose renovations) for leases, in discounted dollars.
**This is defined as operating expenses and supplies (recurring costs from the cost-effectiveness analysis template)

VI. Analysis of Benefits

The preferred alternative, New Construction, would deliver the best benefit to VA compared to all other alternatives. As discussed in the previous section, the Status Quo would not address concerns regarding long travel times for Tulsa area Veterans to VA services in Muskogee, and the Renovation, Acquire an Existing Facility and VA/DoD Collaboration alternatives are not viable. The New Construction alternative, with total life cycle costs of approximately $2.74 billion would be the best solution to support VA's strategic goals and objectives and close gaps identified by the SCIP process in a timely and efficient manner to provide high-quality, reliable and efficient care for Veterans.

VII. Demographic Data*

	2017	2022	2027	2037	Change (2017-2037)
Veteran Population	108,999	98,846	88,972	71,560	-34.3%
Enrollees	51,391	52,949	52,548	47,678	-7.2%

*Data reflects the VISN 19, Eastern Oklahoma Market.

VIII. Workload*

	2017	2022	2027	2037	Change (2017-2037)
Ambulatory Procedures	47,019	52,740	55,117	56,046	19.2%
Ambulatory Services	1,124,841	1,333,193	1,476,857	1,573,416	39.9%
Inpatient Bed Days of Care	29,185	28,148	26,154	21,234	-27.2%

*Data reflects workload for the VISN 19, Eastern Oklahoma Market, and excludes Pharmacy and Laboratory and Pathology stops.

IX. Schedule – This Phase

Award Construction Documents	TBD
Award Construction Contract	TBD
Complete Construction	TBD

X. Project Cost Summary of the Chosen Option

New Construction:	260,000 GSF	$120,141,000
Renovation:	0 GSF	$0
Demolition:	0 GSF	$0
Surface Parking:	895 Spaces	$3,438,000
Other Construction Costs:		
Pre-Design Development Allowance		$15,856,000
Total Other Costs (Utilities, etc.)		$34,981,000
Subtotal Estimated Base Construction Cost		**$174,416,000**
Other Non-Construction Costs:		
Construction Contingency		$8,230,000
Technical Services		$8,230,000
Impact Costs		$0
Construction Management		$4,938,000
Site Acquisition		$9,000,000
Utility Agreements		$1,750,000
Subtotal Estimated Base Costs		**$206,564,000**
Inflation Allowance / Locality Adjustment		$14,336,000
Total Estimated Cost		**$220,900,000**

IX. Operating Costs of the Chosen Option

Present Facility		
Square Footage Involved	N/A	
Current FTE	1,451	
Total Operating Costs[1]	**$149,088,854**	
Ancillary Services		*$16,022,670*
Personnel Services		*$133,066,185*
Other Recurring Costs		*N/A*
Proposed Project		
Square Footage Involved	New Construction – 260,000 GSF	
Net New FTE	574	
Incremental Operating Costs[2]	**$58,977,948**	
Ancillary Services		*$6,338,396*
Personnel Services		*$52,639,552*
Other Recurring Costs		*N/A*
Total Operating Costs[1]	**$208,066,803**	
Non-Recurring Activations	**$61,870,039**	
Furniture, Fixtures & Equipment (FF&E)		*$49,496,031*
Non-Recurring Support		*$12,374,008*

[1]Operating costs recur on an annual basis for resources (including staff) necessary to support services to be provided from the space being built or remodeled.
[2]Incremental operating costs are net of present facility. These are not indicative of the total operating costs for the project at completion.

Page Intentionally Left Blank

10. Appendices

Table of Contents

		Page #
A –	Strategic Capital Investment Planning Process Decision Criteria Definitions for Major and Minor Construction Business Cases..…….……	3
B	Strategic Capital Investment Planning Process Decision Criteria Definitions for Major and Minor Lease (New and Expansion) Business Cases……..	7
C –	Strategic Capital Investment Planning Process Decision Criteria Definitions for VHA Non-recurring Maintenance Projects……...…….	9
D –	Disposal and Reuse Reports……...…….	11
E –	Awarded Enhanced-Use Lease Projects…….…….....	27
F –	History of VHA Projects Update…….....	31
G –	History of Non-VHA Projects Update…….…….…….……....	37

Page Intentionally Left Blank.

Appendix A – Strategic Capital Investment Planning Process Decision Criteria Definitions for Major and Minor Construction Business Cases

Administration & Staff Office Priority: Capital asset planning often begins at the facility level where VA staff identifies needs at their origin – the facility. Corporate capital planning must include that ground-level knowledge to be an inclusive process. This criterion incorporates local priorities into the corporate planning process, allowing those local priorities to have a critical impact to individual project scores.

Projects submitted to the Strategic Capital Investment Planning (SCIP) planning process for budget year funding consideration will be prioritized by VHA, VBA, NCA, OIT, and Staff Offices. Those individual project priorities will be included in each project's total score for ranking on the SCIP list.

Improve Safety, Compliance, and Security: VA is dedicated to ensuring Veterans and their family members, community partners, other visitors, and VA Staff are being served and/or work in a safe and secure environment. Mitigating the destruction and injury caused by natural or manmade disasters (including hurricanes, floods, blasts, etc.); ensuring VA mission critical buildings are able to provide service in the wake of seismic events; avoiding problems or injuries caused by the potential failure of critical building systems; modernizing the OIT infrastructure by making IT systems commercially viable and cloud-based solutions to the maximum extent possible, including systems for processing vendor claims, updating scheduling, and financial and loan reporting; improving compliance with safety and security laws, Federal Information Security Management Act (FISMA) standards; modernizing the real property infrastructure to assure the continuance of VA's multiple missions by complying with building codes, regulations (including operating room, supply processing and distribution, inpatient privacy standards, PACT (including women Veterans healthcare space), Research functional deficiencies for VHA; continuation of burial options at existing cemeteries for NCA (depletion date data); counselor offices, hearing rooms, and public/non-public separation for VBA; hardening access to equipment/server rooms and IT data systems for OIT; reducing reliance on interruptible sources of energy including the electric grid and delivered fuels; improving compliance with emergency preparedness standards resulting in an improved ability to maintain operations during an emergency; mitigating threats to persons (physical security) on a VA facility (e.g., duress alarms for VBA, mitigating identified site security vulnerabilities) are of paramount importance.

The three sub-criteria that projects are measured against with respect to Improving Safety and Security are:

- Safety/Compliance (Excludes Seismic)
- Physical and Building Security/Emergency Preparedness
- Seismic

Modernize Infrastructure (making the most of current infrastructure/extending useful life): VA is committed to managing its properties in order to minimize the extent to which deficiencies in infrastructure (including IT infrastructure) and other areas impact the delivery of benefits and services to Veterans. Efforts such as VHA studies of market utilization, plans to dispose of vacant and underutilized buildings, 3-year rolling facility condition assessments (FCAs) contribute to the Modernize Infrastructure priority. For infrastructure deficiencies, FCAs evaluate the condition of VA buildings using scores A through F and the criticality of building sub-systems.

The two sub-criteria projects are measured against with respect to Modernize Infrastructure are:

- Reduce Facility Condition Assessment Deficiencies (critical)
- Reduce Facility Condition Assessment Deficiencies (non-critical)

Increasing Access: Serving Veterans is at the core of VA's mission. We strive to increase access for Veterans by ensuring they have access to national cemeteries, providing virtual access to benefits (Click 2 Benefit Rooms); by supporting our ability to handle increasing workload, especially in the fields of primary care, mental health care (including the provision of emergency mental health care to less than honorably discharged Veterans, and the prevention of Veteran suicide); and by enabling Internal VA Staff to work more efficiently, by ensuring our IT Infrastructure and the tools that rely on that infrastructure are available and working properly.

The three sub-criteria that projects are measured against with respect to increasing access are:

- Veteran and Internal VA Staff Access to Services
- Support Structures (including parking deficiencies)
- Utilization/Workload

Streamline Capital Assets: In order to provide the highest quality service to Veterans at the right time and in the right place, VA is managing its space inventory by removing excess VA-owned space via demolition, sale or transfer, building new space, converting underutilized space of one type to another type, to better suit its mission, renovating space to sustain its function, and using space efficiency strategies such as but not limited to collocating (VHA, VBA, NCA, and Staff Offices using the vacant or underutilized space of another office), teleworking, cubicle reconfiguration to new space standards, expanding office hours to reduce the need for space.

The three sub-criteria projects are measured against with respect to Streamline Capital Assets are:

- Space – New Construction/Renovation/Conversion
- Space – Disposal (via demolition, sale, or transfer only)
- Space – Space Efficiency (includes Collocation)

Strategic Plan Alignment: For improved management and performance across the Department, capital projects should contribute to the four main Strategic Goals from the Department's 2018 – 2024 Strategic Plan (found at: http://www.va.gov/performance/), including enhancing Veteran access to all VA services and providing them more ways to get services, improving the timeliness and integration of care, earning Veterans' trust by being accountable and transparent, modernizing our systems while using resources more t efficiently, increasing joint VA/DoD collaboration projects, and complying with established energy standards. For more information on energy management go to https://www.fedcenter.gov/programs/eo13693/ for Executive Order 13693, Planning for Federal Sustainability Over the Next Decade.

The six sub-criteria that projects are measured against with respect to Strategic Plan Alignment are:

- Strategic Goal 1: Easy Access and Greater Choice – Veterans choose VA for easy access, greater choices, and clear information to make informed decisions
- Strategic Goal 2: Reliable and Integrated Care and Support – Veterans receive highly reliable and integrated care and support and excellent customer service that emphasizes their well-being and independence throughout their life journey
- Strategic Goal 3: Improved Trust, Accountability, and Transparency – Veterans trust VA to be consistently accountable and transparent
- Strategic Goal 4: Transform Business Operations – VA will transform business operations by modernizing systems and focusing resources more efficiently to be competitive and to provide world class customer service to Veterans and its employees
- DoD Collaboration
- Energy Standards

Page Intentionally Left Blank.

Appendix B – Strategic Capital Investment Planning Process Decision Criteria Definitions for Major and Minor (New and Expansion) Lease Business Cases

Administration & Staff Office Priority: Capital asset planning often begins at the facility level where VA staff identifies needs at their origin – the facility. Corporate capital planning must include that ground-level knowledge to be an inclusive process. This criterion incorporates local priorities into the corporate planning process, allowing those local priorities to have a critical impact to individual project scores.

Projects submitted to the Strategic Capital Investment Planning (SCIP) planning process for budget year funding consideration will be prioritized by VHA, VBA, NCA, OIT, and Staff Offices. Those individual project priorities will be included in each project's total score for ranking on the SCIP list.

Improve Safety, Compliance, and Security: VA is dedicated to ensuring Veterans and their family members, community partners, other visitors, and VA Staff are being served and/or work in a safe and secure environment. Mitigating the destruction and injury caused by natural or manmade disasters (including hurricanes, floods, blasts, etc.); avoiding problems or injuries caused by the potential failure of critical building systems; modernizing the OIT infrastructure by making IT systems commercially viable and cloud-based solutions to the maximum extent possible, including systems for processing vendor claims, updating scheduling, and financial and loan reporting; improving compliance with safety and security laws, Federal Information Security Management Act (FISMA) standards; modernizing the real property infrastructure to assure the continuance of VA's multiple missions by complying with building codes, regulations (including operating room, supply processing and distribution, inpatient privacy standards, PACT (including women Veterans healthcare space), Research functional deficiencies for VHA; continuation of burial options at existing cemeteries for NCA (depletion date data); counselor offices, hearing rooms, and public/non-public separation for VBA; hardening access to equipment/server rooms and IT data systems for OIT; reducing reliance on interruptible sources of energy including the electric grid and delivered fuels; improving compliance with emergency preparedness standards resulting in an improved ability to maintain operations during an emergency; mitigating threats to persons (physical security) on a VA facility (e.g., duress alarms for VBA, mitigating identified site security vulnerabilities) are of paramount importance

The two sub-criteria that projects are measured against with respect to Improving Safety and Security are:

- Safety/Compliance (Excludes Seismic)
- Physical and Building Security/Emergency Preparedness

Increasing Access: Serving Veterans is at the core of VA's mission. We strive to increase access for Veterans by ensuring they have access to national cemeteries, providing virtual access to benefits (Click 2 Benefit Rooms); by supporting our ability to handle increasing workload, especially in the fields of primary care, mental health care (including the provision of emergency mental health care to less than honorably discharged Veterans, and

the prevention of Veteran suicide; and by enabling Internal VA Staff to work more efficiently, by ensuring our IT Infrastructure and the tools that rely on that infrastructure are available and working properly.

The two sub-criteria that projects are measured against with respect to increasing access are:

- Veteran and Internal VA Staff Access to Services
- Utilization/Workload

Streamline Capital Assets: In order to provide the highest quality service to Veterans at the right time and in the right place, VA is managing its space inventory by leasing new space or replacing/expanding current leased spaces to sustain its function, and using space efficiency strategies, such as but not limited to collocating (VHA, VBA, NCA, and Staff Offices using the vacant or underutilized space of another office), teleworking, cubicle reconfiguration to new space standards, expanding office hours to reduce the need for space.

The two sub-criteria projects are measured against with respect to Streamline Capital Assets are:

- Space – New or Replacement Lease/Renovation/Conversion of Leased Space
- Space – Space Efficiency (includes Collocation)

Strategic Plan Alignment: For improved management and performance across the Department, capital projects should contribute to the four main Strategic Goals from the Department's 2018 – 2024 Strategic Plan (found at: http://www.va.gov/performance/), including enhancing Veteran access to all VA services and providing them more ways to get services, improving the timeliness and integration of care, earning Veterans' trust by being accountable and transparent, modernizing our systems while using resources more efficiently, increasing joint VA/DoD collaboration projects, and complying with established energy standards. For more information on energy management go to https://www.fedcenter.gov/programs/eo13693/ for Executive Order 13693, Planning for Federal Sustainability Over the Next Decade.

The five sub-criteria that projects are measured against with respect to Strategic Plan Alignment are:

- Strategic Goal 1: Easy Access and Greater Choice – Veterans choose VA for easy access, greater choices, and clear information to make informed decisions
- Strategic Goal 2: Reliable and Integrated Care and Support – Veterans receive highly reliable and integrated care and support and excellent customer service that emphasizes their well-being and independence throughout their life journey
- Strategic Goal 3: Improved Trust, Accountability, and Transparency – Veterans trust VA to be consistently accountable and transparent
- Strategic Goal 4: Transform Business Operations – VA will transform business operations by modernizing systems and focusing resources more efficiently to be competitive and to provide world class customer service to Veterans and its employees
- DoD Collaboration

Appendix C – Strategic Capital Investment Planning Process Decision Criteria Definitions for VHA Non-Recurring Maintenance (NRM) Projects

VISN Priority: Capital asset planning often begins at the facility level where VHA staff identifies needs at their origin – the medical center campus. This criterion represents local priorities for the VHA-wide planning process. A project's VISN priority rank is the measure used for this criterion.

Facility Condition: VA is committed to managing its properties in order to minimize the extent to which deficiencies in infrastructure (including IT infrastructure) and other areas impact the delivery of health care services to Veterans. Facility Condition Assessments (FCAs) evaluate the condition of VHA buildings using scores A through F and the criticality of building sub-systems.

The two sub-criteria that projects are measured against with respect to Facility Condition are:

- Reduce Facility Condition Assessment Deficiencies (critical)
- Reduce Facility Condition Assessment Deficiencies (non-critical)

Planning Priorities: VHA has developed project-specific planning guidance to support the increased use of community care, focus on providing foundational services, and maintenance of physical infrastructure. The overarching strategic priorities that projects are required to support are:

- Projects that Focus Resources with an emphasis on modernization of facilities for delivery of VA Foundational Services (e.g., primary care, mental health care, VA Care Coordination, etc.);
- Projects that Improve the Timeliness of Services and projects that support Suicide Prevention; along with its impact on other foundational services;
- Projects that enhance the Department's ability to provide Greater Choice for Veterans; and
- Projects that Modernize Systems by providing needed infrastructure improvements (i.e. life, safety, or code upgrades focused).

The Planning Priorities for 2021 NRM projects support the overarching strategic priorities and are operationalized by the four sub-criteria shown in the decision model above. Data to operationalize the overarching strategic priorities will be refined and better aligned with the strategic priorities for 2021.

Page Intentionally Left Blank.

Appendix D – Disposal and Reuse Reports

FY 2019 Disposal and Reuse Report

For these reporting purposes, VA defines "disposal" as inclusive of enhanced use leases, even though these are not reported as disposals under the Federal Real Property Profile.

Admin	VISN/ MSN	Station Name	Building Number	Disposal Type	Disposal Complete Date
NCA	2	Bay Pines, FL	S-001	Demolition	5/7/2019
NCA	2	Beaufort, SC	SS-02	Demolition	8/6/2019
NCA	2	Beaufort, SC	SS-03	Demolition	8/6/2019
NCA	2	Knoxville, TN	HA-6	Demolition	3/15/2019
NCA	2	Memphis, TN	3001	Demolition	10/1/2018
NCA	2	Memphis, TN	SB-001	Demolition	10/1/2018
NCA	2	Memphis, TN	SB-002	Demolition	10/1/2018
NCA	3	Rock Island, IL	HA-42	Demolition	3/27/2019
NCA	3	Rock Island, IL	HA-43	Demolition	3/27/2019
NCA	3	Rock Island, IL	HA-56	Demolition	3/27/2019
NCA	3	Rock Island, IL	HA-6	Demolition	3/27/2019
NCA	5	Ft. Rosecrans, CA	5001	Demolition	2/28/2019
NCA	5	Ft. Rosecrans, CA	5002	Demolition	2/28/2019
NCA	5	Ft. Rosecrans, CA	6002	Demolition	2/28/2019
NCA	5	Roseburg, OR	HA-3	Demolition	3/6/2019
NCA	5	Santa Fe, NM	4801	Demolition	3/26/2019
NCA	5	Willamette, OR	2001	Demolition	3/4/2019
NCA	5	Willamette, OR	3003	Demolition	3/4/2019
NCA	5	Willamette, OR	3004	Demolition	6/28/2019
VHA	1	Northampton	40	Demolition	10/8/2018
VHA	1	Northampton	41	Demolition	10/6/2018
VHA	1	Togus	MB1	Demolition	10/1/2018
VHA	1	Togus	MB3	Demolition	3/1/2019
VHA	2	Buffalo	14	Demolition	8/1/2019
VHA	2	Canandaigua	2	Demolition	8/23/2019
VHA	2	Canandaigua	111	Demolition	8/1/2019
VHA	2	Canandaigua	133	Demolition	8/23/2019
VHA	2	Montrose	8	Demolition	10/26/2018
VHA	4	Erie	9	Public Sale	7/19/2019
VHA	5	Perry Point	22	Demolition	5/15/2019
VHA	5	Perry Point	102	Demolition	5/15/2019
VHA	6	Durham	3	Deconstruction	3/25/2019
VHA	6	Hampton	115	Demolition	1/23/2019
VHA	10	NIHCS, Marion	7	Demolition	8/16/2019
VHA	12	Danville	48	Legislated Transfer	7/15/2019
VHA	12	Danville	T116	Demolition	10/8/2018
VHA	12	Danville	T117	Demolition	10/8/2018
VHA	12	North Chicago	215	Demolition	1/11/2019
VHA	12	North Chicago	217	Demolition	1/11/2019

Admin	VISN/ MSN	Station Name	Building Number	Disposal Type	Disposal Complete Date
VHA	15	Kansas City	42	Negotiated Sale	6/21/2019
VHA	15	Kansas City	827	Negotiated Sale	6/21/2019
VHA	15	St Louis, Jefferson Barracks	4	Demolition	7/1/2019
VHA	15	St Louis, Jefferson Barracks	5	Demolition	7/1/2019
VHA	15	St Louis, Jefferson Barracks	7	Demolition	7/1/2019
VHA	15	St Louis, Jefferson Barracks	8	Demolition	7/1/2019
VHA	15	St Louis, Jefferson Barracks	48	Demolition	7/1/2019
VHA	15	St Louis, Jefferson Barracks	4T	Demolition	7/1/2019
VHA	15	St Louis, John Cochran	30	Demolition	4/1/2019
VHA	17	Amarillo	38	Demolition	11/14/2018
VHA	17	Temple	HELI	Demolition	8/5/2019
VHA	17	Temple	SS1	Deconstruction	8/17/2019
VHA	19	Cheyenne	442HK	Federal/State Transfer	10/1/2018
VHA	19	Denver	T-C	Demolition	1/15/2019
VHA	20	Anchorage	100A	Demolition	9/26/2019
VHA	20	Anchorage	3001C	Demolition	9/26/2019
VHA	20	Portland	SM-1	Demolition	7/25/2019
VHA	21	Reno	138	Demolition	2/19/2019
VHA	21	Reno	15A	Demolition	3/1/2019
VHA	21	Reno	15B	Demolition	3/1/2019
VHA	21	Reno	F	Demolition	2/19/2019
VHA	21	Reno	K	Demolition	3/1/2019
VHA	22	Long Beach	3	Demolition	1/31/2019
VHA	22	Long Beach	6	Demolition	3/1/2019
VHA	22	Long Beach	11	Demolition	1/31/2019
VHA	22	Long Beach	40	Demolition	4/1/2019
VHA	22	Long Beach	47	Demolition	1/31/2019
VHA	22	Long Beach	92	Demolition	1/31/2019
VHA	22	Long Beach	123	Demolition	3/1/2019
VHA	22	Long Beach	154	Demolition	3/1/2019
VHA	23	Fargo	437GM	Enhanced Use Lease	12/13/2018

Summary of Potential Disposals and Enhanced-Use Leases (EUL) FY 2020-2024

VISN /MSN	Location	Description	Bldg #	Total GSF	Total Acres	Disposal Type
FY 2020						
2	Barrancas, FL	Committal Shelter A	Shelter A	-	0.00	Demolition
2	Mill Springs, KY	Committal Shelter	MS New1	-	0.00	Demolition
1	Manchester	Vacant - Director's Quarters	2	2,766	0.00	Demolition
1	Manchester	Fiscal	3	3,907	0.00	Demolition
1	Manchester	Human Resources	4	3,732	0.00	Demolition
1	Manchester	Vacant - Administrative	5	5,210	0.00	Demolition
1	Manchester	Storage/Garage	13	565	0.00	Demolition
1	Manchester	Storage/Garage	14	565	0.00	Demolition
1	Northampton	Transportation	17	4,690	0.00	Demolition
1	Northampton	Vacant	18	4,690	0.00	Demolition
1	Northampton	Vacant	19	4,690	0.00	Demolition
1	Northampton	Vacant	21	6,490	0.00	Demolition
1	Northampton	Vacant	23	6,490	0.00	Demolition
1	Newington	Vacant	4	14,045	0.00	Demolition
1	Newington	PRRP	6	6,643	0.00	Demolition
1	Newington	Housing	7	7,147	0.00	Demolition
1	Newington	PRRP	8	4,879	0.00	Demolition
1	Newington	Vacant	44T	2,630	0.00	Demolition
2	Albany	Day Hospital	5	6,050	0.00	Enhanced Use Lease
2	Bath	Quarters	50	2,491	0.00	Demolition
2	Bath	Quarters	51	2,516	0.00	Demolition
2	Bath	Quarters	52	3,458	0.00	Demolition
2	Bath	3-Car Garage	53	1,859	0.00	Demolition
2	Bath	Quarters	54	3,148	0.00	Demolition
2	Bath	Quarters	55	1,899	0.00	Demolition
2	Bath	Quarters	56	2,023	0.00	Demolition
2	Bath	3-Car Garage	57	2,559	0.00	Demolition
2	Buffalo	Engineering/Grounds Storage	4	1,104	0.00	Demolition
2	Canandaigua	Boiler Plant Emergency Generator	13	1,282	0.00	Demolition
2	Canandaigua	Nursing Home	33	71,443	0.00	Deconstruction
2	Canandaigua	SPD, AMMS, & Storage	34	71,660	0.00	Deconstruction
2	Northport	Vacant	1	25,098	0.00	Demolition
2	Northport	Vacant	2	74,125	0.00	Demolition
2	Northport	Vacant	18	20,886	0.00	Demolition
2	Northport	Vacant	37	21,468	0.00	Demolition
4	Butler	Main Building	1	222,977	0.00	Demolition
4	Butler	Domiciliary	3	26,982	0.00	Demolition
4	Butler	Connecting Corridors	CC	3,150	0.00	Demolition
4	Lebanon	Non-Housekeeping Qtrs.	26	64,554	0.00	Demolition
4	Lebanon	Office	27	43,512	0.00	Demolition
4	Lebanon	Engineering Office Trailer	154	480	0.00	Demolition
4	Pittsburgh, Highland Drive	Clinical/Inpatient Psych	1	210,701	0.00	Transfer - GSA Disposal Authority

VISN /MSN	Location	Description	Bldg #	Total GSF	Total Acres	Disposal Type
4	Pittsburgh, Highland Drive	Clinical/Inpatient Psych	2	128,563	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	SAC/Administration	4	124,430	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	Vacant	5	65,710	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	Eng/EMS/Vacant	6	46,240	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	Dietetics	7	48,600	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	Rec Hall	8	61,800	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	Gym	9	24,900	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	Chapel	10	5,691	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	Vacant Admin Offices - ORM	11	2,960	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	Research/Admin	13	8,680	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	Vacant	14	6,730	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	Engineering	15	44,760	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	Vacant	16	6,836	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	Enclosed Substation/High Voltage	18	337	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	FMS/EMS Storage	33	768	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	Security/Vacant	12A	4,490	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, Highland Drive	Vacant	12B	4,600	0.00	Transfer - GSA Disposal Authority

VISN /MSN	Location	Description	Bldg #	Total GSF	Total Acres	Disposal Type
4	Pittsburgh, Highland Drive	Connecting Corridors	CC	17,584	0.00	Transfer - GSA Disposal Authority
4	Pittsburgh, University Drive	Research	6	19,385	0.00	Deconstruction
5	Perry Point	Patient Restrooms	317	500	0.00	Demolition
5	Perry Point	Village House/Vacant (switch to CHEP)	1173	2,746	0.00	Demolition
6	Durham	Administrative	8	9,692	0.00	Deconstruction
6	Fayetteville	Health Admin Services	8	5,557	0.00	Demolition
6	Salem	Pump House	23	240	0.00	Deconstruction
6	Salem	Engineering Storage	34	1,378	0.00	Deconstruction
6	Salem	Engineering Storage	35	1,360	0.00	Deconstruction
6	Salem	Engineering/Recreation Storage	46	1,184	0.00	Deconstruction
6	Salem	Engineering Storage	72	1,344	0.00	Deconstruction
6	Salem	Storage	116	228	0.00	Deconstruction
6	Salem	Storage	117	2,426	0.00	Deconstruction
6	Salem	Golf Clubhouse	133	171	0.00	Deconstruction
7	Augusta, Uptown	Administrative and Canteen	19	50,138	0.00	Enhanced Use Lease
7	Augusta, Uptown	Vacant Administrative	20	41,482	0.00	Enhanced Use Lease
7	Tuscaloosa	Green House	101	3,599	0.00	Deconstruction
8	Miami	ARF Lab	8	13,026	0.00	Demolition
8	Miami	ARF Lab	9	23,886	0.00	Demolition
8	Tampa	Unassigned Pending Demo	19	2,398	0.00	Demolition
8	Tampa	Smoking Shelter	T43	259	0.00	Demolition
9	Lexington, Leestown	Engineering Lock Shop	41	828	0.00	Demolition
10	Chillicothe	Vacant CU & Offices	10	6,750	0.00	Demolition
10	Chillicothe	Vacant Offices	11	7,180	0.00	Demolition
10	Chillicothe	Smoking Shelter (Enclosed)	SS-1	1,200	0.00	Demolition
10	Chillicothe	Smoking Shelter (Enclosed)	SS-12	768	0.00	Demolition
10	Chillicothe	Smoking Shelter (Enclosed)	SS-15	1,200	0.00	Demolition
10	Chillicothe	Smoking Shelter (Enclosed)	SS-4	1,200	0.00	Demolition
10	Marion	Vacant (Ward Building)	25	32,892	0.00	Demolition
10	Marion	Quarters (Vacant)	35	4,490	0.00	Demolition
10	Marion	Quarters	36	5,400	0.00	Demolition
10	Marion	Quarters	37	3,170	0.00	Demolition
10	Marion	Quarters	38	3,040	0.00	Demolition
10	Marion	Vacant (Supply Service Building)	42	5,025	0.00	Demolition
10	Marion	Vacant Sewage Plant Lab.	75	350	0.00	Demolition
10	Marion	Single Garage	94	400	0.00	Demolition
10	Marion	Single Garage	95	400	0.00	Demolition
10	Marion	2 Car Garage	96	400	0.00	Demolition
10	Marion	Storage (Chemical)	118	1,020	0.00	Demolition
10	Marion	Vacant (Mess Hall & Kitchen)	122	37,135	0.00	Demolition
10	Marion	Transformer Bldg. (Abandoned)	149	59	0.00	Demolition
12	Danville	Club House	92	1,365	0.00	Deconstruction
12	Hines	Boiler Plant	5	17,556	0.00	Demolition
12	Iron Mountain	South Smoking Shelter	17	468	0.00	Demolition

VISN /MSN	Location	Description	Bldg #	Total GSF	Total Acres	Disposal Type
12	Iron Mountain	West Smoking Shelter	18	630	0.00	Demolition
12	Milwaukee	Vacant Historic on EUL List	1	17,600	0.00	Enhanced Use Lease
12	Milwaukee	Vacant Chapel Historic on EUL	12	7,316	0.00	Deconstruction
12	Milwaukee	Personnel Quarters on EUL	14	3,630	0.00	Enhanced Use Lease
12	Milwaukee	Personnel Quarters on EUL	18	7,370	0.00	Enhanced Use Lease
12	Milwaukee	Personnel Quarters on EUL	19	7,640	0.00	Enhanced Use Lease
12	Milwaukee	Vacant Ward Memorial Theater on EUL	41	21,986	0.00	Enhanced Use Lease
12	Milwaukee	Old Power Plant	45	20,920	0.00	Demolition
12	Milwaukee	Personnel Quarters on EUL	62	7,316	0.00	Enhanced Use Lease
12	Milwaukee	Garage	64	1,243	0.00	Enhanced Use Lease
12	North Chicago	Engineering Storage	63	2,620	0.00	Demolition
15	Kansas City	Magnetic Resonance Imaging	39	1,640	0.00	Demolition
15	Kansas City	MRI #2	39A	825	0.00	Demolition
15	Poplar Bluff	MRI Building	14	890	0.00	Demolition
15	Poplar Bluff	Emergency Generator	16	247	0.00	Demolition
15	Poplar Bluff	Medium Voltage Switchgear	18	420	0.00	Demolition
15	Topeka	Chapel	23	4,946	0.00	Demolition
15	Topeka	Gymnasium/Pool	25	17,483	0.00	Demolition
15	Topeka	Incinerator	44	935	0.00	Demolition
15	Topeka	Athletic Field Facility	251	181	0.00	Demolition
16	Biloxi	Interior Design / CFM Office	8	5,000	0.00	Deconstruction
16	Biloxi	Facilities Management Office	51	1,500	0.00	Deconstruction
16	Biloxi	Canteen	57	8,669	0.00	Demolition
16	Biloxi	Admin	T102	20,000	0.00	Negotiated Sale
16	Biloxi	Mental Health	T104	1,900	0.00	Negotiated Sale
16	Biloxi	Mental Health	T105	1,900	0.00	Negotiated Sale
17	Dallas	CWT Homeless Temp Housing 2 Pleasant	PRRTP 2	1,748	0.00	Public Sale
17	Kerrville	Two Car Garage	32	409	0.00	Deconstruction
17	Kerrville	Personnel Quarters	49	2,898	0.00	Deconstruction
17	Kerrville	Personnel Quarters	50	2,754	0.00	Deconstruction
17	Kerrville	Personnel Quarters	51	2,754	0.00	Deconstruction
17	Kerrville	Two Car Garage	85	409	0.00	Deconstruction
17	Kerrville	Two Car Garage	87	409	0.00	Deconstruction
17	Kerrville	Two Car Garage	88	409	0.00	Deconstruction
17	Waco	Vacant	19	7,164	0.00	Demolition
17	Waco	QTRS/Vacant	20	5,336	0.00	Demolition
17	Waco	Vacant Quarters (vacant, historical, no plans)	21	6,105	0.00	Demolition
19	Fort Harrison	Vacant Storage	43	28,188	0.00	Demolition
19	Fort Harrison	Misc Storage	54	2,880	0.00	Demolition
19	Fort Harrison	Vacant Boiler Plant	142	32,562	0.00	Demolition
19	Miles City	Administration Bldg/CBOC	1	672,072	0.00	Legislative Transfer

VISN /MSN	Location	Description	Bldg #	Total GSF	Total Acres	Disposal Type
19	Miles City	Quarters	2	30,240	0.00	Legislative Transfer
19	Miles City	Miles City Police Outlease	3	15,475	0.00	Legislative Transfer
19	Miles City	Vacant Quarters	4	15,720	0.00	Legislative Transfer
19	Miles City	Vacant Quarters	5	21,504	0.00	Legislative Transfer
19	Miles City	Vacant Quarters	6	21,504	0.00	Legislative Transfer
19	Miles City	Garages MC	7	28,296	0.00	Legislative Transfer
19	Miles City	Auditorium MC	8	55,956	0.00	Legislative Transfer
19	Miles City	Boiler Plan MC	10	53,142	0.00	Legislative Transfer
19	Miles City	Meter House	14	8,280	0.00	Legislative Transfer
19	Miles City	Community Living Center	15	106,254	0.00	Legislative Transfer
19	Miles City	Rehab & EMS Building	20	25,158	0.00	Legislative Transfer
20	American Lake	Maintenance Office	27	889	0.00	Demolition
20	American Lake	Maintenance Shops	50	5,619	0.00	Demolition
20	American Lake	Storage	86	469	0.00	Demolition
20	American Lake	Storage	112	320	0.00	Demolition
20	American Lake	Canteen	132	12,879	0.00	Demolition
20	American Lake	Research	T3	1,746	0.00	Demolition
20	American Lake	Storage	T97	932	0.00	Demolition
20	Roseburg	Storage	T15	22,675	0.00	Deconstruction
20	Roseburg	Storage	T20	320	0.00	Deconstruction
20	Vancouver	Mental Health Offices	T2143	4,640	0.00	Deconstruction
20	White City	Domiciliary Bed	208	18,595	0.00	Deconstruction
20	White City	Elec. Shop. Warehouse	225	13,428	0.00	Deconstruction
20	White City	Logistics Warehouse	226	13,413	0.00	Deconstruction
21	Menlo Park	Administration	324	80,300	0.00	Demolition
21	Menlo Park	Garage	T45	3,500	0.00	Demolition
21	Martinez	Engineering	AB4	2,150	0.00	Deconstruction
21	Martinez	Pharmacy/CBHC (office)	AB6	7,920	0.00	Demolition
21	Martinez	BDMS/Engineering/Social Work	AB7	12,960	0.00	Demolition
21	Sacramento	Dermatology	801	2,880	0.00	Demolition
21	San Francisco	NCIRE / Research	14	6,480	0.00	Demolition
21	San Francisco	Medicine Research & Admin	18	9,711	0.00	Demolition
21	San Francisco	Storage	20	2,373	0.00	Demolition
21	San Francisco	Animal Facility	21	1,725	0.00	Demolition
21	San Francisco	Mental Health Trailer	31	1,508	0.00	Demolition
22	Loma Linda	Eye Clinic	51	9,942	0.00	Demolition
22	Long Beach	Education/Clinical Offices	8	36,020	0.00	Demolition
22	Long Beach	Wards, Psych Admin.	128	93,939	0.00	Demolition
22	Long Beach	Nursing Homecare Unit	133	58,760	0.00	Demolition
22	Long Beach	Recreation, Rehab	136	1,049	0.00	Demolition

VISN /MSN	Location	Description	Bldg #	Total GSF	Total Acres	Disposal Type
22	Phoenix	Research (Annex)	21B	4,932	0.00	Demolition
22	Prescott	Garage (Residential	99	300	0.00	Demolition
22	Sepulveda	Garage Vacant	72	315	0.00	Demolition
22	West Los Angeles	Vacant	207	46,640	0.00	Enhanced Use Lease
23	Minneapolis	Storage	18	80	0.00	Demolition
23	Minneapolis	Storage, general	217	2,650	0.00	Enhanced Use Lease
23	Minneapolis	Storage, general	218	1,796	0.00	Enhanced Use Lease
23	Minneapolis	Storage, vacant	219	1,728	2.00	Enhanced Use Lease
23	Minneapolis	Storage, general	225	2,201	0.00	Enhanced Use Lease
23	Omaha	Administrative	4	22,704	0.00	Demolition
23	Omaha	Administrative	5	22,428	0.00	Demolition
23	Omaha	Day Hospital	8	22,020	0.00	Demolition
23	Omaha	Storage Building	22	6,216	0.00	Demolition
23	Omaha	Staff Smoking Shelter	27	900	0.00	Demolition
23	Omaha	Patient Smoking Shelter	28	900	0.00	Demolition
23	Omaha	Administrative	C	30,708	0.00	Demolition
Sub-Total FY 2020				**3,787,631**	**2.00**	
		FY 2021				
1	Northampton	Personnel Garage	34	1,620	0.00	Demolition
1	Northampton	Paint Storage	42	736	0.00	Demolition
1	Northampton	Greenhouse	63	961	0.00	Demolition
1	Northampton	Salt Shed	S	288	0.00	Demolition
1	Northampton	Storage	T11	2,716	0.00	Demolition
1	Northampton	Engineering Storage	T12	832	0.00	Demolition
1	Northampton	Carpenters Shop	T13	1,702	0.00	Demolition
1	Northampton	Lock Shop	T15	840	0.00	Demolition
1	Northampton	CWT Storage	T7	2,110	0.00	Demolition
1	West Haven	Administration	11	5,412	0.00	Demolition
1	West Haven	AM&M/Center of Excellence	12	5,413	0.00	Demolition
1	West Haven	Research	7	6,608	0.00	Demolition
2	Canandaigua	Single Quarters	20	4,784	0.00	Enhanced Use Lease
2	Canandaigua	SubsAbuse Clinic	6	51,747	0.00	Enhanced Use Lease
2	Canandaigua	Nursing Home	7	60,156	0.00	Enhanced Use Lease
2	Canandaigua	Nursing Home	8	64,067	0.00	Enhanced Use Lease
2	St. Albans	Vacant Radiation Therapy	90	6,122	0.00	Demolition
4	Wilmington	Home-Based Primary Care	2	3,430	0.00	Demolition
4	Wilmington	Offices	3	4,952	0.00	Demolition
4	Wilmington	Logistics	4	4,952	0.00	Demolition
4	Coatesville	Hoptel	18	52,506	0.00	Demolition
4	Coatesville	Tenant	19	32,988	0.00	Demolition
4	Coatesville	Administration	26	31,500	0.00	Demolition
4	Coatesville	Administration	27	32,976	0.00	Demolition

VISN /MSN	Location	Description	Bldg #	Total GSF	Total Acres	Disposal Type
4	Coatesville	Administration	28	32,988	0.00	Demolition
4	Lebanon	MOVE! Program and Clinics	144	1,408	0.00	Demolition
4	Lebanon	Modular Building	99	16,672	0.00	Deconstruction
5	Martinsburg	Motor Pool Storage	354	167	0.00	Demolition
6	Fayetteville	Mental Health Outpatient Clinic	52T	4,770	0.00	Deconstruction
6	Hampton	NVCC and Swing Space	50	139,416	0.00	Demolition
10	Battle Creek	Incinerator Building	154	480	0.00	Deconstruction
10	Battle Creek	Engineering Storage	155	252	0.00	Deconstruction
10	Battle Creek	Rental Quarters	16	5,820	0.00	Deconstruction
10	Battle Creek	Rental Quarters	17	5,820	0.00	Deconstruction
10	Battle Creek	Rental Quarters	18	5,820	0.00	Deconstruction
10	Battle Creek	Rental Quarters Garages	23	1,420	0.00	Deconstruction
10	Battle Creek	Engineering Storage	77	3,171	0.00	Deconstruction
10	Battle Creek	Incinerator Building	97	465	0.00	Deconstruction
10	Cincinnati	Administration	3	18,140	0.00	Demolition
10	Marion	Vacant (Canteen)	50	10,765	0.00	Demolition
12	Danville	Boiler plant & incinerator	100	14,211	0.00	Demolition
12	North Chicago	To Be Demolished	33	9,000	0.00	Deconstruction
12	Hines	Quarters	23	3,108	0.00	Demolition
12	Hines	Quarters	24	8,141	0.00	Demolition
12	Hines	Quarters	25	7,299	0.00	Demolition
12	Hines	Quarters	26	7,299	0.00	Demolition
12	Hines	Quarters	27	4,442	0.00	Demolition
12	Hines	Quarters	28	7,299	0.00	Demolition
12	Hines	Quarters	29	7,299	0.00	Demolition
12	Iron Mountain	Administrative	3	25,014	0.00	Demolition
15	Kansas City	Helicopter Pad	43	-	0.00	Deconstruction
15	Topeka	Student Housing	254	1,639	0.00	Demolition
15	Topeka	Quarters	257	1,631	0.00	Demolition
15	Topeka	Student Housing	259	1,633	0.00	Demolition
15	Topeka	Quarters	261	1,369	0.00	Demolition
15	Topeka	Quarters	263	1,376	0.00	Demolition
15	Topeka	Quarters	265	1,526	0.00	Demolition
15	Topeka	Quarters	267	1,595	0.00	Demolition
23	Des Moines	Main Administration/ Directors Office	3	3,557	0.00	Demolition
16	Houston	Modular Building	121	15,181	0.00	Demolition
17	Temple	Medical Admin (Modular Bldg)	208	5,660	0.00	Negotiated Sale
17	Temple	AFGE Union (Modular Bldg)	209	5,660	0.00	Negotiated Sale
17	Temple	Administration (Modular Bldg)	210	5,660	0.00	Negotiated Sale
17	Temple	SAMS	211	5,660	0.00	Negotiated Sale
17	Temple	Nursing Education	212	5,660	0.00	Negotiated Sale
17	Temple	Police	214	5,660	0.00	Negotiated Sale
17	Temple	Social Work	215	4,120	0.00	Negotiated Sale
17	Waco	F.M.S./Shops	24	10,630	0.00	Demolition
17	Waco	FMS Shops	99	13,168	0.00	Demolition
19	Muskogee	Community Care Service	10	2,302	0.00	Demolition
19	Muskogee	Community Care Service	9	2,894	0.00	Demolition
20	Walla Walla	Vacant - VA Police HQ	7	1,720	0.00	Demolition
20	White City	Theater, Canteen Retail	220	19,810	0.00	Deconstruction
21	San Francisco	Medical Offices/Cardiology	T-24	1,056	0.00	Demolition

VISN /MSN	Location	Description	Bldg #	Total GSF	Total Acres	Disposal Type
22	Prescott	Credit Union	T5	4,916	0.00	Deconstruction
22	West Los Angeles	Vacant Annex Theater	264	9,603	0.00	Demolition
Sub-Total FY 2021				**853,790**	**0.00**	
		FY 2022				
2	Canandaigua	Halfway House (outleased)	18	7,190	0.00	Enhanced Use Lease
2	Canandaigua	Garage/Storage	39	3,027	0.00	Enhanced Use Lease
2	Canandaigua	Gate House	40	308	0.00	Enhanced Use Lease
2	Canandaigua	Storage	70	300	0.00	Enhanced Use Lease
2	Canandaigua	Single Quarters	73	1,541	0.00	Enhanced Use Lease
2	Canandaigua	Storage	77	3,151	0.00	Enhanced Use Lease
2	Canandaigua	Personnel Garage	94	3,216	0.00	Enhanced Use Lease
2	Canandaigua	Golf Course Land Parcel	900	-	0.03	Enhanced Use Lease
2	Canandaigua	Canandaigua Academy Land Parcel	901	-	0.4	Enhanced Use Lease
2	Syracuse	MAS Business Office	1E-Mod-ular	5,218	0.00	Demolition
2	Albany	Smoking Shelter	53	900	0.00	Demolition
2	Northport	Vacant	23	6,932	0.00	Demolition
5	Perry Point	Administration	15	17,277	0.00	Demolition
5	Perry Point	NCCC Dormitory	9H	54,515	0.00	Demolition
5	Martinsburg	HBPC/Community Health	413	5,097	0.00	Demolition
6	Fayetteville	Engineering Shops/Garages	9	6,073	0.00	Demolition
9	Lexington, Leestown	Greenhouse – Vacant	46	826	0.00	Demolition
10	Chillicothe	Quarters – Vacant	13	4,325	0.00	Enhanced Use Lease
10	Chillicothe	Quarters – Vacant	14	4,343	0.00	Enhanced Use Lease
10	Chillicothe	Storage	17	3,571	0.00	Enhanced Use Lease
10	Chillicothe	Vacant	205	1,520	0.00	Demolition
10	Chillicothe	Vacant	206	1,716	0.00	Demolition
10	Chillicothe	Vacant	207	337	0.00	Demolition
10	Chillicothe	Vacant	250	1,200	0.00	Demolition
10	Chillicothe	Vacant	4	15,418	0.00	Demolition
10	Chillicothe	Vacant	5	13,558	0.00	Demolition
10	Chillicothe	Vacant	8	12,772	0.00	Demolition
10	Marion	Tool Shed	156	120	0.00	Deconstruction
12	Danville	Quarters	31	9,140	0.00	Demolition
12	Danville	Quarters	32	7,708	0.00	Demolition
12	Danville	Quarters	33	7,162	0.00	Demolition
12	Danville	Quarters	34	4,942	0.00	Demolition
12	Danville	Quarters	37	6,161	0.00	Demolition

VISN /MSN	Location	Description	Bldg #	Total GSF	Total Acres	Disposal Type
12	Danville	Quarters	38	5,722	0.00	Demolition
12	Tomah	Recycling & AFGE	25	7,171	0.00	Demolition
15	Leavenworth	Admin.-Gnds/Trans	53	4,499	0.00	Demolition
15	St Louis (JC)	Main Hospital	1	565,152	0.00	Demolition
15	St Louis (JC)	Garage and Motorpool	14	3,339	0.00	Demolition
15	St Louis (JC)	Engineering	16	12,052	0.00	Demolition
15	St Louis (JC)	IRM and Hypertension Office	3	13,779	0.00	Demolition
15	St Louis (JC)	Engineering Office	4	6,266	0.00	Demolition
15	St Louis (JC)	OEF/OIF Clinic	5T	3,024	0.00	Demolition
15	St Louis (JC)	Research	6	7,287	0.00	Demolition
15	St Louis (JC)	Research	6A	7,722	0.00	Demolition
15	St Louis (JC)	Research	7	6,399	0.00	Demolition
15	St Louis (JC)	Research	7A	2,367	0.00	Demolition
15	St Louis (JB)	Recreation/Auditorium	61	26,000	0.00	Demolition
15	St Louis (JB)	Gymnasium/Pool	63	16,938	0.00	Demolition
16	Biloxi	Quarters	6	3,000	0.00	Deconstruction
16	Biloxi	Quarters	7	5,000	0.00	Deconstruction
20	Seattle	Med. Specialties/Facilities	18	21,226	0.00	Demolition
20	Seattle	Mental Health	24	26,459	0.00	Demolition
20	Walla Walla	Storage	40	461	0.00	Demolition
20	White City	Swing, DAV and CRD Storage	222	18,883	0.00	Deconstruction
20	White City	Shop, Swing, and Recreation	223	18,883	0.00	Deconstruction
20	White City	Carpenter Shop, Grounds	227	13,413	0.00	Deconstruction
20	White City	Domiciliary Bed, BOS, PRRC	239	16,953	0.00	Deconstruction
20	White City	Psychology	240	17,436	0.00	Deconstruction
21	Martinez	Day Treatment Center	AB5	1,440	0.00	Demolition
21	Martinez	Biomedical Engineering	BM1	1,300	0.00	Demolition
21	Sacramento	Eye Clinic	720	6,434	0.00	Demolition
21	Sacramento	Social Services	800	3,552	0.00	Demolition
21	Sacramento	Social Work	802	1,443	0.00	Demolition
21	Sacramento	Admin	803	1,147	0.00	Demolition
21	Sacramento	Social Work	805	1,328	0.00	Demolition
21	Sacramento	Prosthetics	806	1,417	0.00	Demolition
21	Sacramento	Research admin	807	1,417	0.00	Demolition
21	Sacramento	OIT combined with 810	811	1,473	0.00	Deconstruction
21	Palo Alto	Diagnostic Radiology Center	102	16,400	0.00	Demolition
21	Palo Alto	Animal Research Facility	54	18,100	0.00	Demolition
21	Palo Alto	Modular Building	MB1	14,900	0.00	Demolition
21	Palo Alto	Modular Building	MB2	14,900	0.00	Demolition
21	Palo Alto	Modular Building	MB3	19,500	0.00	Demolition
21	Livermore	Resident housing	30	1,035	0.00	Enhanced Use Lease
21	Livermore	Boiler House	6	6,300	0.00	Enhanced Use Lease
21	Livermore	Clinical/Inpatient Med	62	102,534	1.12	Enhanced Use Lease
21	Livermore	Incinerator building	63	600	0.00	Enhanced Use Lease
21	Livermore	Support Administration	64	27,400	0.00	Enhanced Use Lease
21	Livermore	Administration	65	19,200	0.00	Enhanced Use Lease

VISN /MSN	Location	Description	Bldg #	Total GSF	Total Acres	Disposal Type
21	Livermore	Water Treatment Plant	69	900	0.00	Enhanced Use Lease
21	Livermore	Police Service	74	883	0.00	Enhanced Use Lease
21	Livermore	Administration	88	19,900	0.00	Enhanced Use Lease
21	Livermore	Nursing Home Care Unit	90	48,700	0.00	Enhanced Use Lease
21	Livermore	Connecting Corr 62/64	CC	4,000	0.00	Enhanced Use Lease
21	Livermore	Engineering	T10	1,200	0.00	Enhanced Use Lease
21	Livermore	Engineering Storage	T12	1,200	0.00	Enhanced Use Lease
21	Livermore	Engineering	T16	5,100	0.00	Enhanced Use Lease
21	Livermore	Temporary Bldg	T34	3,600	0.00	Enhanced Use Lease
21	Livermore	Flagpole	FP	-	0	Enhanced Use Lease
21	Livermore	Water Reservoir	26	-	0	Enhanced Use Lease
21	Livermore	Water Reservoir	52	-	0	Enhanced Use Lease
21	Livermore	AST 10k gal	62ast	-	0	Enhanced Use Lease
21	Livermore	AST 1k gal	64ast	-	0	Enhanced Use Lease
21	Livermore	Water Filter System	70	-	0	Enhanced Use Lease
21	Livermore	Secondary Water Tank	71	-	0	Enhanced Use Lease
21	Livermore	Sludge containment	72	-	0	Enhanced Use Lease
21	Livermore	Encl 2-ASTs 20k galea	77ast	-	0	Enhanced Use Lease
21	Livermore	AST 1k and 500 gal	79ast	-	0	Enhanced Use Lease
21	Livermore	AST 1k gal	88ast	-	0	Enhanced Use Lease
21	Livermore	AST 4k gal	90ast	-	0	Enhanced Use Lease
21	Livermore	Smoking shelters (3)	SS	-	0	Enhanced Use Lease
21	San Francisco	Medical Research / VMU	12	38,910	0.00	Demolition
22	Tucson	Grounds Shop/Storage	51	480	0.00	Demolition
22	Sepulveda	Vacant (Animal Research)	80	1,400	0.00	Deconstruction
22	Sepulveda	Vacant Garage	81	1,405	0.00	Deconstruction
Sub-Total FY 2022				**1,428,493**	**1.55**	
		FY 2023				
2	Canandaigua	Recreation Storage	115	231	0.00	Demolition
5	Martinsburg	PRRP Lodging, Baker House	21	2,764	0.00	Demolition

VISN /MSN	Location	Description	Bldg #	Total GSF	Total Acres	Disposal Type
8	Gainesville	MAS	T10	3,600	0.00	Demolition
8	Gainesville	HRMS	T1A	4,320	0.00	Demolition
8	Gainesville	HRMS	T1B	2,160	0.00	Demolition
8	Gainesville	Nursing Service	T3	2,894	0.00	Demolition
8	Gainesville	Police/Security	T7	2,200	0.00	Demolition
8	Gainesville	Directors Suite/ Tenant	T8	1,440	0.00	Demolition
8	Gainesville	Multi- Services Trailer	T9	3,600	0.00	Demolition
9	Lexington, Leestown	Engineering Electrical Shop	20	2,539	0.00	Demolition
9	Lexington, Leestown	EMS Office & Equip/Furniture Staging	22	7,376	0.00	Deconstruction
9	Lexington, Leestown	Grounds/Transportation	48	1,182	0.00	Demolition
9	Lexington, Leestown	Furniture Repair Shop	T112	1,773	0.00	Demolition
10	Chillicothe	Vacant Offices	2	16,000	0.00	Demolition
10	Chillicothe	Vacant Offices	6	16,000	0.00	Demolition
10	Chillicothe	Engineering Shop	38	5,916	0.00	Demolition
10	Chillicothe	Engineering Shop	39	862	0.00	Demolition
10	Chillicothe	Engineering Shop	40	1,324	0.00	Demolition
10	Chillicothe	Engineering Shop	41	1,391	0.00	Demolition
10	Chillicothe	Engineering Shop	228	24,924	0.00	Demolition
10	Marion	Vacant (Ward Building)	1	20,287	0.00	Deconstruction
10	Marion	Vacant (Ward Building)	3	20,550	0.00	Deconstruction
10	Marion	Vacant (Ward Building)	4	20,572	0.00	Deconstruction
10	Marion	Quarters	26	6,232	0.00	Enhanced Use Lease
10	Marion	Quarters	27	6,232	0.00	Enhanced Use Lease
10	Marion	Quarters	28	6,232	0.00	Enhanced Use Lease
10	Marion	Quarters	29	6,232	0.00	Enhanced Use Lease
10	Marion	Quarters	30	6,232	0.00	Enhanced Use Lease
10	Marion	Quarters	31	6,232	0.00	Enhanced Use Lease
10	Marion	Quarters	32	6,668	0.00	Enhanced Use Lease
10	Marion	Quarters	33	3,824	0.00	Enhanced Use Lease
10	Marion	Quarters (Director)	34	7,030	0.00	Enhanced Use Lease
10	Marion	Pump House, Well No. 1	78	178	0.00	Demolition
10	Marion	Single Garage	91	400	0.00	Enhanced Use Lease
10	Marion	Single Garage	93	400	0.00	Enhanced Use Lease
10	Marion	Vacant INCINERATOR	119	815	0.00	Demolition
10	Marion	Vacant Pump House, Well No. 3	120	169	0.00	Demolition
10	Marion	12 Car Garage	123	1,200	0.00	Enhanced Use Lease

VISN /MSN	Location	Description	Bldg #	Total GSF	Total Acres	Disposal Type
10	Marion	2-Car Garage	125	420	0.00	Enhanced Use Lease
10	Marion	Transformer Bldg. (Abandoned)	128	24	0.00	Deconstruction
10	Marion	Shelterhouse	153	3,750	0.00	Deconstruction
12	Tomah	Vacant	2	26,756	0.00	Enhanced Use Lease
19	Sheridan	FMS/Paint shop	55	1,800	0.00	Demolition
21	Menlo Park	Boiler House	114	6,200	0.00	Demolition
21	Sacramento	Derm Trailer	801A	1,440	0.00	Demolition
21	Sacramento	Dermatology	801B	1,440	0.00	Deconstruction
Sub-Total FY 2023				**263,811**	**0.00**	
		FY 2024				
1	Togus	Housekeeping Qtrs Single	15	3,048	0.00	Demolition
1	Togus	Housekeeping Qtrs Single	16	3,030	0.00	Demolition
1	Togus	Housekeeping Qtrs Single	17	3,030	0.00	Demolition
1	Togus	Housekeeping Qtrs Single	18	3,024	0.00	Demolition
1	Togus	Housekeeping Qtrs Single	19	3,024	0.00	Demolition
1	Togus	Housekeeping Qtrs Single	20	3,130	0.00	Demolition
1	Togus	Fire Station	211	3,571	0.00	Demolition
1	Togus	Mothballed	222	2,184	0.00	Demolition
1	Togus	Sewage Treatment Plant	245	2,013	0.00	Demolition
1	Togus	Housekeeping Qtrs Single	33	3,457	0.00	Demolition
1	Togus	Housekeeping Qtrs Single	34	2,930	0.00	Demolition
5	Perry Point	Mental Health Nursing Unit	25H	51,887	0.00	Demolition
5	Perry Point	Greenhouse	41	4,230	0.00	Demolition
10	Dayton	11 Car Garage	209	2,225	0.00	Demolition
12	Danville	Garage (1 car)	75	335	0.00	Deconstruction
12	Danville	Garage (2 car)	81	653	0.00	Deconstruction
12	Danville	Garage (2 car)	83	653	0.00	Deconstruction
12	Danville	Engineering quonset hut - storage	T110	1,162	0.00	Demolition
12	Danville	Engineering quonset hut - storage	T111	1,298	0.00	Demolition
12	Danville	Engineering quonset hut - storage	T112	1,162	0.00	Demolition
12	Danville	Engineering quonset hut - storage	T113	1,298	0.00	Demolition
12	Danville	Engineering quonset hut - storage	T114	1,162	0.00	Demolition
12	Milwaukee	Quonset Hut	T105	2,085	0.00	Demolition
12	Milwaukee	Quonset Hut	T106	1,047	0.00	Demolition
12	Milwaukee	Quonset Hut	T107	1,047	0.00	Demolition
12	Milwaukee	Quonset hut	T114	980	0.00	Demolition
15	Poplar Bluff	Garage/Storage	10	350	0.00	Demolition
15	Poplar Bluff	Quality/Risk Management	3	3,554	0.00	Demolition
15	Poplar Bluff	Homeless Care/Police Training/ Contracting	4	3,554	0.00	Demolition
16	N. Little Rock	Rock house at compound	158	4,542	0.00	Deconstruction
16	N. Little Rock	Small bldg. at compound	162	320	0.00	Deconstruction
16	N. Little Rock	Vacant Animal Facility	75	14,294	0.00	Deconstruction
17	Dallas	Boiler Plant	10	4,530	0.00	Deconstruction
17	Dallas	Laundry	12	28,270	0.00	Deconstruction
17	Dallas	Storage – Engineering	27	2,106	0.00	Deconstruction
17	Dallas	Warehouse	44	30,051	0.00	Deconstruction
17	Dallas	Fiscal/MCCR	45	11,924	0.00	Deconstruction
17	Dallas	Human Resources PIV ID Offices	5	3,419	0.00	Deconstruction
17	Dallas	Day Treatment/Day Hosp.	6	12,871	0.00	Deconstruction

VISN /MSN	Location	Description	Bldg #	Total GSF	Total Acres	Disposal Type
17	Dallas	ACQ & MAT Managt	8	8,129	0.00	Deconstruction
17	Dallas	Engineering Service (Admin)	9	9,396	0.00	Deconstruction
17	Dallas	VA Police/Administration	T46	1,052	0.00	Deconstruction
17	Dallas	Fiscal	T47	1,112	0.00	Deconstruction
17	Dallas	Recreation Svc	T48	1,002	0.00	Deconstruction
17	Dallas	MISC//Safety Admin	TT49	4,196	0.00	Deconstruction
17	Dallas	CWT Admin	TT50	2,077	0.00	Deconstruction
19	Muskogee	Engineering Storage	20	370	0.00	Demolition
19	Muskogee	Engineering Storage	37	81	0.00	Demolition
19	Muskogee	HRMS Administration	7	2,894	0.00	Demolition
19	Muskogee	HRMS Administration	8	2,894	0.00	Demolition
20	White City	Rehab Med, Gym, and Admin	209	19,516	0.00	Deconstruction
20	White City	Library/IRM	210	18,883	0.00	Deconstruction
20	White City	Clinical Supp., Dental, Specialty Care (Various)	211	23,623	0.00	Deconstruction
20	White City	Eye Clinic, BOS, Education, and Prosthetics	212	18,883	0.00	Deconstruction
20	White City	Domiciliary Bed/BOS	213	18,308	0.00	Deconstruction
20	White City	Domiciliary Bed, SPD	214	18,308	0.00	Deconstruction
20	White City	Safety Offices	228	2,706	0.00	Deconstruction
20	White City	Facilities Management Off.	229	3,725	0.00	Deconstruction
20	White City	Plumbing Shop	234	9,592	0.00	Deconstruction
20	White City	Paint Shop, Refr Shop	235	13,242	0.00	Deconstruction
20	White City	PAP Supplies, Baggage	241	16,953	0.00	Deconstruction
20	White City	Facilities Management Stor.	242	16,953	0.00	Deconstruction
20	White City	Recreation	243	16,953	0.00	Deconstruction
20	White City	Chapel	248	5,841	0.00	Deconstruction
20	White City	Vacant, C&P	250	22,188	0.00	Deconstruction
20	White City	Dispatch	262	2,331	0.00	Deconstruction
20	White City	Green house	264	2,915	0.00	Deconstruction
20	White City	FMS Storage	270	499	0.00	Deconstruction
20	White City	FMS Emer. Equip	272	494	0.00	Deconstruction
21	Sacramento	Occup Health	722a	1,440	0.00	Demolition
22	West Los Angeles	Radiation Therapy	345	14,217	0.00	Demolition
22	West Los Angeles	Administration & Mental Health	401	31,076	0.00	Demolition
22	West Los Angeles	Comprehensive Homeless Center	402	26,538	0.00	Demolition
Sub-Total FY 2024				**561,837**	**0.00**	

Page Intentionally Left Blank.

Appendix E – Awarded Enhanced-Use Lease Projects
(as of September 30, 2019; Sorted by Status, by State)

	Location	ST	EUL Type Housing Type	Lease Awarded	Status
1	Tuscaloosa I	AL	Hospice	9/19/2002	Operational Housing
2	Tuscaloosa II	AL	Permanent	12/27/2011	Operational Housing
3	North Little Rock	AR	Golf Course	10/1/1998	Terminated
4	Menlo Park	CA	Permanent	12/27/2011	Operational Housing
5	Sacramento	CA	Nursing Care (Never Operational)	12/27/2011	Terminated
6	Sepulveda I	CA	Permanent	12/21/2007	Operational Housing
7	Sepulveda II	CA	Permanent	12/21/2007	Operational Housing
8	West LA Bldg. 209	CA	Permanent	5/18/2017	Operational Housing
9	Newington I	CT	Permanent	12/27/2011	Operational Housing
10	Newington II	CT	Assisted Living (Never Operational)	12/27/2011	Transferred/Expired
11	West Haven	CT	Child Development Center	12/1/1994	Terminated
12	Washington	DC	Child Development Center	4/20/1993	Operational Non-Housing
13	Bay Pines	FL	Child Development Center	5/22/1997	Terminated
14	Viera	FL	Assisted Living	12/13/2011	Operational Housing
15	West Palm Beach	FL	Office	11/14/1994	Operational Non-Housing
16	Paris	France	Hotel	10/16/1998	Operational Non-Housing
17	Atlanta	GA	Office	12/18/1997	Operational Non-Housing
18	Augusta I	GA	Permanent	12/27/2011	Operational Housing
19	Augusta II	GA	Permanent	12/30/2011	Operational Housing
20	Barbers Point	HI	Permanent and Transitional	3/17/2003	Operational Housing
21	Knoxville	IA	Transitional (Never Operational)	12/27/2011	Terminated
22	Chicago (Lakeside)	IL	Consolidation	1/18/2005	Transferred/Expired
23	Chicago (Westside) I	IL	Office / Parking	4/22/2002	Operational Non-Housing
24	Chicago (Westside) II	IL	Energy	8/12/2002	Operational Non-Housing
25	Danville I	IL	Senior	4/27/1999	Operational Housing
26	Danville II	IL	Permanent	12/30/2011	Operational Housing
27	Hines I	IL	Transitional	8/22/2003	Operational Housing
28	Hines II	IL	Senior	7/30/2004	Operational Housing
29	Hines III	IL	Permanent	12/27/2011	Operational Housing

	Location	ST	EUL Type Housing Type	Lease Awarded	Status
30	Mound City	IL	Office	11/6/2003	Operational Non-Housing
31	North Chicago I	IL	Energy	5/21/2002	Operational Non-Housing
32	North Chicago II	IL	Medical School	4/10/2002	Transferred/Expired
33	Indianapolis	IN	Mixed Use	9/23/1996	Operational Mixed Use
34	Leavenworth	KS	Permanent and Transitional	8/5/2005	Operational Housing
35	Topeka	KS	Permanent (Never Operational)	12/30/2011	Terminated
36	Lexington	KY	Permanent	12/19/2018	Construction - Housing
37	Alexandria	LA	Transitional (Never Operational)	12/27/2011	Terminated
38	Bedford I	MA	Permanent	9/10/2004	Operational Housing
39	Bedford II	MA	Permanent	12/27/2011	Operational Housing
40	Brockton	MA	Permanent	12/27/2011	Operational Housing
41	Northampton	MA	Permanent and Transitional	12/27/2011	Operational Housing
42	Fort Howard I	MD	Mixed Use - Senior Housing / Clinic (Never Operational)	9/28/2006	Terminated
43	Fort Howard II	MD	Permanent	12/27/2011	Construction - Housing
44	Perry Point	MD	Permanent	12/30/2011	Operational Housing
45	Togus	ME	Permanent	12/27/2011	Operational Housing
46	Battle Creek	MI	Transitional	12/22/2008	Operational Housing
47	Minneapolis I	MN	Credit Union	8/17/2004	Operational Non-Housing
48	Minneapolis II	MN	Permanent	9/1/2005	Operational Housing
49	Minneapolis III	MN	Permanent	12/27/2011	Operational Housing
50	Minneapolis IV	MN	Permanent	6/2/2016	Operational Housing
51	St. Cloud I	MN	Golf Course	7/28/1997	Operational Non-Housing
52	St. Cloud II	MN	Permanent	5/24/2005	Operational Housing
53	St. Cloud III	MN	Permanent	12/27/2011	Operational Housing
54	Fort Harrison	MT	Permanent	8/31/2017	Construction - Housing
55	Durham	NC	Mixed Use	1/3/2002	Operational Mixed Use
56	Grand Island	NE	Permanent	12/30/2011	Operational Housing
57	Lincoln	NE	Permanent	12/30/2011	Operational Housing
58	Lyons	NJ	Permanent	12/27/2011	Operational Housing *
59	Somerville	NJ	Mixed Use	9/5/2003	Operational Mixed Use
60	Albany	NY	Parking	8/5/2009	Operational Non-Housing
61	Batavia I	NY	Transitional	5/24/2002	Operational Housing
62	Batavia II	NY	SRO/Transitional	5/24/2002	Terminated
63	Batavia III	NY	Senior	12/22/2008	Operational Housing

	Location	ST	EUL Type Housing Type	Lease Awarded	Status
64	Bath	NY	Permanent (Never Operational)	12/27/2011	Terminated
65	Canandaigua	NY	Permanent and Transitional	12/27/2011	Operational Housing
66	Northport	NY	Assisted Living (Never Operational)	12/27/2011	Transferred/Expired
67	Chillicothe I	OH	Mixed Use	12/22/2008	Operational Mixed Use
68	Chillicothe II	OH	Permanent	12/30/2011	Operational Housing
69	Cleveland	OH	Mixed Use	10/1/2009	Transferred/Expired
70	Dayton I	OH	Permanent	12/30/2004	Operational Housing
71	Dayton II	OH	Child Development Center	12/30/2004	Operational Non-Housing
72	Dayton III	OH	Transitional	4/19/2007	Operational Housing
73	Dayton IV	OH	Transitional	11/5/2008	Operational Housing
74	Dayton V	OH	Senior	12/30/2011	Operational Housing *
75	Dayton VI	OH	Permanent (Never Operational)	12/30/2011	Terminated
76	Roseburg I	OR	Transitional	8/1/2000	Operational Housing
77	Roseburg II	OR	Permanent	12/27/2011	Operational Housing
78	Butler I	PA	Mental Health Facility	12/18/2003	Operational Non-Housing
79	Butler II	PA	Transitional	4/17/2007	Operational Housing
80	Charleston	SC	Driveway	5/18/2004	Operational Non-Housing
81	Columbia	SC	Mixed Use	11/19/2007	Operational Mixed Use
82	Sioux Falls	SD	Parking	4/1/1999	Operational Non-Housing
83	Memphis I	TN	Parking / Child Advocacy Center	12/30/2011	Operational Non-Housing
84	Memphis II	TN	Parking / Mixed Use (Never Operational)	12/30/2011	Terminated
85	Mountain Home I	TN	Medical School	12/17/1998	Operational Non-Housing
86	Mountain Home II	TN	Energy	12/2/1999	Operational Non-Housing
87	Big Spring	TX	Parking	3/8/1996	Terminated
88	Dallas	TX	Child Development Center	12/20/1999	Operational Non-Housing
89	Houston	TX	Mixed Use	8/23/1993	Operational Mixed Use *
90	Kerrville	TX	Permanent	12/27/2011	Operational Housing
91	Salt Lake City I	UT	Office	5/9/2001	Operational Non-Housing
92	Salt Lake City II	UT	Mixed Use	9/20/2006	Operational Mixed Use
93	Salt Lake City III	UT	Transitional	8/30/2011	Operational Housing

	Location	ST	EUL Type Housing Type	Lease Awarded	Status
94	Salem	VA	Permanent (Never Operational)	12/30/2011	Terminated
95	Vancouver I	WA	Permanent	7/14/1998	Operational Housing
96	Vancouver II	WA	Crisis Triage Center	2/13/2004	Operational Non-Housing
97	Vancouver III	WA	Permanent	12/27/2011	Operational Housing
98	Walla Walla	WA	Permanent	12/30/2011	Operational Housing
99	Milwaukee I	WI	Office	7/17/2003	Operational Non-Housing
100	Milwaukee II	WI	Permanent	11/9/2018	Construction - Housing
101	Cheyenne	WY	Permanent (Never Operational)	12/30/2011	Terminated

* Additional Phase Under Construction

Appendix F – History of VHA Projects Update (dollars in thousands)

City	ST	Project Description	Total Est. Cost	FY 04 – 16 Actual	FY17 Actual	FY18 Actual	FY19 Actual	FY20 Planned	FY21 Request	Future	Status
Alameda	CA	Community Based Outpatient Clinic and National Cemetery	$310,500	$87,332	$0	$0	$0	$26,000	$152,868	$44,300	CD
American Lake[1]	WA	Seismic Corrections - NHCU & Dietetics	$36,200	$36,200	$0	$0	$0	$0	$0	$0	PC
American Lake[2]	WA	Construction of New Specialty Care Building 201	$110,600	$16,260	$0	$0	$0	$0	$94,340	$0	CO
Anchorage[1]	AK	Outpatient Clinic/Regional Office	$74,806	$75,265	$0	($459)	$0	$0	$0	$0	PC
Atlanta[1]	GA	Modernize Patient Wards	$18,308	$18,308	$0	$0	$0	$0	$0	$0	FC
Bay Pines	FL	Inpatient/Outpatient Improvements	$188,200	$158,200	$0	$0	$0	$30,000	$0	$0	AP-CD
Biloxi[1,3,4]	MS	Restoration Of Hospital/Consolidation of Gulfport	$319,000	$297,000	$0	$15,000	$7,000	$0	$0	$0	CO
Brockton	MA	Long-Term Care Spinal Cord Injury	$188,000	$24,040	$0	$0	$0	$0	$0	$163,960	NFYDP
Bronx	NY	Spinal Cord Injury Center	$225,900	$8,179	$0	$0	$0	$0	$0	$217,721	NFYDP
Canandaigua[5]	NY	Construction and Renovation	$443,900	$158,980	$0	$3,000	$191,761	$0	$30,000	$60,159	CO
Chicago[1]	IL	Bed Tower (Modernize Inpatient Space)	$96,387	$96,387	$0	$0	$0	$0	$0	$0	PC
Cleveland[1]	OH	Cleveland-Brecksville Consolidation	$100,098	$100,162	($64)	$0	$0	$0	$0	$0	PC
Columbia[1]	MO	Operating Suite Replacement	$23,913	$23,913	$0	$0	$0	$0	$0	$0	PC
Columbus[1]	OH	Outpatient Clinic	$93,042	$93,081	$0	($39)	$0	$0	$0	$0	PC
Dallas	TX	Clinical Expansion for Mental Health	$156,400	$15,640	$0	$0	$0	$0	$0	$140,760	DD
Dallas[1]	TX	Spinal Cord Injury	$265,600	$34,814	$0	$0	$135,686	$0	$78,500	$16,600	AP-CD
Denver[6]	CO	New Medical Center Facility	$1,675,000	$1,675,000	$0	$0	$0	$0	$0	$0	PC
Des Moines[7]	IA	Extended Care Building	$25,397	$25,397	$0	$0	$0	$0	$0	$0	PC

City	ST	Project Description	Total Est. Cost	FY 04 – 16 Actual	FY17 Actual	FY18 Actual	FY19 Actual	FY20 Planned	FY21 Request	Future	Status
Durham[1]	NC	Renovate Patient Wards	$9,055	$9,055	$0	$0	$0	$0	$0	$0	PC
Fayetteville[1,3,8]	AR	Clinical Addition	$86,910	$87,080	$0	($169)	$0	$0	$0	$0	FC
Gainesville[1,8]	FL	Correct Patient Privacy Deficiencies	$100,478	$100,499	$0	($21)	$0	$0	$0	$0	PC
Gulfport[1]	MS	Gulfport - Environmental Cleanup	$35,331	$35,331	$0	$0	$0	$0	$0	$0	PC
Indianapolis[1]	IN	7th & 8th Floor Ward Modernization Addition	$27,395	$27,395	$0	$0	$0	$0	$0	$0	PC
Las Vegas[1,3,8,9]	NV	New Medical Facility	$592,655	$584,655	$5,000	$0	$0	$3,000	$0	$0	PC
Lee County[1,3,8]	FL	Outpatient Clinic	$79,936	$80,394	$0	($458)	$0	$0	$0	$0	PC
Livermore	CA	Realignment and Closure of the Livermore Campus	$505,000	$194,430	$0	$117,300	$0	$0	$143,270	$50,000	CD
Long Beach[10]	CA	Seismic Corrections Bldgs 7 and 126	$129,545	$129,545	$0	$0	$0	$0	$0	$0	CO
Long Beach	CA	Mental Health and Community Living Center	$367,300	$287,100	$30,200	$0	$0	$0	$50,000	$0	CO
Los Angeles[1]	CA	Seismic Corrections - Bldgs. 500 and 501	$2,126	$2,126	$0	$0	$0	$0	$0	$0	CA
Louisville	KY	New Medical Facility	$860,000	$150,000	$0	$0	$300,000	$410,000	$0	$0	CD
Manhattan[11]	NY	Medical Center - Flood Recovery	$372,600	$207,000	$0	$5,000	$10,600	$150,000	$0	$0	CO
Menlo Park[1]	CA	Seismic Corrections - Geropsych Replace (Building 324)	$32,679	$32,679	$0	$0	$0	$0	$0	$0	PC
Miami[1,12]	FL	Renovation of Surgical Suite	$41,000	$12,000	$0	$0	$0	$0	$0	$0	PC
Milwaukee[1,3,8]	WI	Spinal Cord Injury Center	$27,557	$27,557	$0	$0	$0	$0	$0	$0	PC
Minneapolis[1]	MN	Spinal Cord Injury/Disease Center	$20,438	$20,438	$0	$0	$0	$0	$0	$0	PC
New Orleans[13]	LA	New Medical Facility	$1,089,500	$1,084,500	$5,000	$0	$0	$0	$0	$0	PC
North Chicago[1]	IL	Joint VA and Dept of Navy Medical Project	$11,781	$11,781	$0	$0	$0	$0	$0	$0	FC
North Chicago[12]	IL	Renovate Building 4	$15,980	$0	$0	$0	$6,000	$0	$0	$0	CD

City	ST	Project Description	Total Est. Cost	FY 04 – 16 Actual	FY17 Actual	FY18 Actual	FY19 Actual	FY20 Planned	FY21 Request	Future	Status
Oklahoma City[12]	OK	Relocation of Surgical Intensive Care/Expanding Operating Room	$29,461	$0	$0	$0	$10,800	$0	$0	$0	CD
Omaha[14]	NE	Replacement Facility	$560,000	$56,000	($56,000)	$0	$0	$0	$0	$0	CA
Omaha[14]	NE	Ambulatory Care CHIP IN ACT	$86,000	$0	$56,000	$0	$0	$0	$0	$0	CO
Orlando[1,8]	FL	New Medical Facility	$615,534	$616,158	$0	($624)	$0	$0	$0	$0	PC
Palo Alto[1]	CA	Seismic Corrections, Bldg. 2	$52,587	$54,000	$0	($1,413)	$0	$0	$0	$0	PC
Palo Alto[15]	CA	Centers for Polytrauma/Blind Rehabilitation, Ambulatory Care & Research	$716,600	$472,600	$0	$0	$0	$0	$0	$244,000	CO
Pensacola[1]	FL	Joint VA and Department of Navy OPC	$54,013	$54,013	$0	($1)	$0	$0	$0	$0	FC
Perry Point	MD	Replacement Community Living Center	$92,700	$92,700	$0	$0	$0	$0	$0	$0	P
Pittsburgh[1,8]	PA	Consolidation of Campuses	$269,969	$272,424	$0	($2,455)	$0	$0	$0	$0	CO
Reno	NV	Correct Seismic Deficiencies and Expand Clinical Services Building	$241,800	$21,380	$192,420	$0	$0	$10,000	$0	$18,000	CD
San Antonio[1]	TX	Ward Upgrades And Expansion	$20,172	$20,172	$0	$0	$0	$0	$0	$0	PC
San Antonio[1]	TX	Polytrauma Center	$48,180	$48,441	$0	($261)	$0	$0	$0	$0	PC
San Diego[1]	CA	Seismic Corrections - Bldg. 1	$47,344	$47,344	$0	$0	$0	$0	$0	$0	PC
San Diego[16]	CA	SCI and Seismic Building 11	$311,700	$205,840	$0	$0	$5,000	$20,000	$21,260	$59,600	AA
San Francisco[1]	CA	Seismic Corrections, Bldg. 203	$39,357	$39,357	$0	$0	$0	$0	$0	$0	PC
San Francisco[17]	CA	Seismic Retrofit/Replace Buildings 1, 6, 8, and 12	$346,700	$180,480	$0	$0	$0	$0	$0	$166,220	AA
San Juan	PR	Seismic Corrections Bldg. 1	$307,000	$277,000	$0	$0	$0	$30,000	$0	$0	CO
Seattle[1,18]	WA	B101 Mental Health	$203,424	$192,424	$0	$0	$11,000	$0	$0	$0	PC
Seattle[1]	WA	Correct Seismic Deficiencies B100, NT & NHCU	$37,057	$43,880	($6,000)	($823)	$0	$0	$0	$0	PC

City	ST	Project Description	Total Est. Cost	FY 04 – 16 Actual	FY17 Actual	FY18 Actual	FY19 Actual	FY20 Planned	FY21 Request	Future	Status
St. Louis (JB)	MO	Medical Facility Improvements & Cemetery Expansion	$366,500	$332,100	$0	$0	$34,400	$0	$0	$0	CO
St. Louis (JC)	MO	Replace Bed Tower, Clinical Bldg Expansion & Parking Garage	$433,400	$43,340	$0	$0	$0	$0	$0	$390,060	RQ
Syracuse[1]	NY	Construct Addition For SCI Center	$89,014	$90,469	$0	($1,455)	$0	$0	$0	$0	PC
Tampa[1,8]	FL	Upgrade Electrical Dist. Systems	$44,136	$44,136	$0	$0	$0	$0	$0	$0	PC
Tampa[15]	FL	Polytrauma and New Bed Tower	$236,500	$231,500	$0	$5,000	$0	$0	$0	$0	CO
Tampa[1]	FL	Spinal Cord Injury Center	$10,818	$10,906	$0	($88)	$0	$0	$0	$0	PC
Temple[1]	TX	Information Technology Facility	$10,228	$10,230	($2)	$0	$0	$0	$0	$0	FC
Tucson[1]	AZ	Mental Health Clinic	$13,436	$13,436	$0	$0	$0	$0	$0	$0	FC
Tulsa[19]	OK	Construct Inpatient Facility	$220,900	$0	$0	$0	$0	$0	$120,000	$0	P
Walla Walla	WA	Multi Specialty Care	$71,400	$71,400	$0	$0	$0	$0	$0	$0	CO
West Los Angeles [20]	CA	Seismic Correction of 12 Bldgs	$105,500	$105,500	$0	$0	$0	$0	$0	$0	CO
West Los Angeles[21]	CA	Build New Critical Care Center	TBD	$50,790	$0	$0	$0	$25,000	$0	TBD	P
		Total		**$9,725,742**	**$226,554**	**$137,033**	**$712,246**	**$704,000**	**$690,238**	**$1,571,380**	

Status Codes:
AP-P – Active Phase Planning
AP-DD – Active Phase Design Development
CA – Canceled
CO – Construction
FC – Financially Complete
PC – Physically Complete
AP-S/DD – Active Phase Schematics/Design Development
AP-CD – Active Phase Construction Documents
CD – Construction Documents
DD – Design Development
NFYDP – Not in Five Year Development Plan

[1] Excess funds from unused contingencies, impact items, etc., were transferred to the working reserve.
[2] American Lake, WA Part of this project is funded with the Seismic Line Item – Building 81 Seismic Corrections, Renovation of Bldg 81AC and 18.
[3] Funds were transferred to the Filipino Veterans Compensation Fund in 2010 per P.L. 111-212.
[4] Biloxi, MS, received $292.5M in emergency supplemental appropriation from P.L. 109-148 and $17.5M in appropriations in 2006. $18M was transferred to the working reserve in FY 2015. In FY 2016 $11M, and in FY 2018 $15M and in FY 2019 $7M was reprogrammed from the working reserve.
[5] Canandaigua, NY received $3M in FY 2018 and $1.761K in FY 2019 from the working reserve.
[6] Denver, CO received $5M in FY 2014 and $245M in FY 2015 reprogramming actions (P.L.114-19; P.L. 114-25). This project received an additional $625M in FY 2016 (P.L. 114-53).
[7] Des Moines, IA in FY 2011, $2K was erroneously placed on this project; it was corrected in FY 2014 with the transfer of $124K to the working reserve. In FY 2015, $21K and in FY 2016, $10K were transferred to the working reserve.
[8] Funds were transferred for use on other projects in FY 2012 per P.L. 112-37.
[9] Las Vegas, NV received $5M in FY 2017 and $3M in FY 2020 from the working reserve.
[10] Long Beach, CA, Seismic Corrections Building 7 and 126 received $2.5M from the working reserve in FY 2019. The funds were returned in FY 2019 while VHA deliberates the demolition of Buildings 7 and 8. Funds may be requested in the future based on the decisions.
[11] Manhattan, NY, received $207M in FY 2013 from the Disaster Relief Appropriations Act of 2013 (P.L. 113-2). In FY 2018 $5M and in FY 2019 $10.6M was transferred from the working reserve.
[12] Miami, FL; North Chicago, IL and Oklahoma City, OK: Total Estimated Cost includes funds from the Minor Construction and Medical Facilities programs.
[13] New Orleans, LA, was funded through two emergency supplemental appropriations in FY 2006: $75M from P.L. 109-148 and $550M from P.L. 109-234. $39.5M in FY 2015, $50M in FY 2016 and $5M in FY 2017 was reprogrammed from the working reserve.
[14] Omaha, NE, $56M transferred from the original Replacement Facility to the Ambulatory Care Clinic due to P.L. 114-294 (aka: the CHIP IN ACT). TEC includes $30M in donations from a community partner for a total of $86M.
[15] Palo Alto, CA, Ambulatory Care/Polytrauma Rehab, and Tampa, FL, Polytrauma/Bed Tower projects received funding in the FY 2008 emergency supplemental P.L. 110-252. Tampa received an additional $5M in FY 2018 from the working reserve.
[16] San Diego, CA, received $5M from the working reserve in FY 2019.
[17] San Francisco, CA, part of this project is funded with the Seismic Line item - Seismic Retrofit/Replace Buildings 1, 6, and 8 will be funded with the Seismic Line Item. Revised Scope and TEC will be published in a future submission.
[18] Seattle, WA, received $11M from the working reserve in FY 2019.
[19] Tulsa, OK, project is CHIP IN (P.L. 114-294). VA contribution is expected to be $120M, with the donor providing land, buildings and funds to complete the project.
[20] West Los Angeles, CA, Seismic Corrections to 12 Buildings, under P.L. 114-226 West Los Angeles Leasing Act of 2016, VA is allowed to use several buildings for an enhanced use lease (EUL).
[21] West Los Angeles, CA, Build New Critical Care Center, the project description was updated in FY 2020 from Construct New Essential Care Tower/B500 Seismic Correction and Renovation. The seismic retrofit and renovation of B500 were removed from scope and the project now involves building a new Critical Care Center and replacing B501. Project will use $25M appropriated in FY 2012 and $25M requested in FY 2020 for site improvements and utilities.

This Page Intentionally Left Blank.

Appendix G – History of Non-VHA Projects (dollars in thousands)

Cemetery Name	ST	Project Description	Total Est. Cost	FY04 - FY16	FY17 Actual	FY18 Actual	FY19 Actual	FY20 Planned	FY21 Request	Future	Status
Abraham Lincoln[1]	IL	Phase 2 Gravesite Expansion	22,099	$25,470	$0	($3,371)	$0	$0	$0	$0	FC
Abraham Lincoln	IL	Phase 3 Expansion	35,000	$0	$0	$35,000	$0	$0	$0	$0	CO
Barrancas	FL	Gravesite Expansion & Cemetery Improvements	27,500	$27,500	$0	$0	$0	$0	$0	$0	CO
Calverton	NY	Gravesite Development & Cemetery Improvements	50,000	$0	$0	$50,000	$0	$0	$0	$0	CO
Cape Canaveral[1]	FL	Phase 1 Development	37,741	$37,741	$0	$0	$0	$0	$0	$0	PC
Cape Canaveral	FL	Gravesite Expansion - Phase 2	38,000	$0	$0	$0	$38,000	$0	$0	$0	D
Dallas-Fort Worth	TX	Phase 4 Gravesite Development	28,000	$0	$0	$0	$0	$28,000	$0	$0	D
Florida	FL	Phase 5 Expansion	51,500	$0	$0	$51,500	$0	$0	$0	$0	CO
Fort Sam Houston[1]	TX	Gravesite Development	29,332	$29,400	$0	($68)	$0	$0	$0	$0	FC
Fort Sam Houston	TX	Ft. Sam Houston Cemetery Expansion	56,000	$0	$0	$0	$0	$0	$56,000	$0	D
Ft Jackson[1]	SC	New Cemetery- Phase 1 Development	15,824	$15,921	$0	($95)	$0	$0	$0	$0	FC
Gerald B. H. Solomon Saratoga[1]	NY	Phase II Gravesite Improvement	6,230	$6,262	$0	$0	($32)	$0	$0	$0	FC
Great Lakes	MI	Gravesite Expansion Phase 2	35,200	$0	$0	$0	$35,200	$0	$0	$0	AA
Houston	TX	Phase 5 Expansion	34,000	$0	$0	$0	$0	$34,000	$0	$0	D

Cemetery Name	ST	Project Description	Total Est. Cost	FY04 - FY16	FY17 Actual	FY18 Actual	FY19 Actual	FY20 Planned	FY21 Request	Future	Status
Jacksonville	FL	Phase 2 Gravesite Development	24,000	$0	$24,000	$0	$0	$0	$0	$0	CO
Los Angeles[2]	CA	Columbarium Expansion	27,600	$27,600	$0	$0	$0	$0	$0	$0	CO
Massachusetts	MA	Phase 4 Expansion	32,000	$0	$0	$0	$0	$32,000	$0	$0	D
Miramar	CA	Phase 2 Expansion	31,000	$0	$0	$0	$0	$0	$31,000	$0	P
Morovis[3]	PR	Gravesite Expansion - Phase 1 on New Land	59,500	$45,000	$0	$4,500	$0	$10,000	$0	$0	CO
National Cemetery of the Alleghenies	PA	Gravesite Expansion & Cemetery Improvements	39,000	$0	$0	$39,000	$0	$0	$0	$0	CO
National Memorial Cemetery of Arizona	AZ	Gravesite Expansion Phase 3	31,900	$0	$0	$31,900	$0	$0	$0	$0	CO
National Memorial Cemetery Of Pacific	HI	Columbarium & Cemetery Improvements	29,300	$29,300	$0	$0	$0	$0	$0	$0	PC
Ohio Western Reserve	OH	Gravesite Expansion Phase 3	29,000	$0	$0	$0	$29,000	$0	$0	$0	D
Omaha[1]	NE	New Cemetery	34,480	$34,480	$0	$0	$0	$0	$0	$0	PC
Pikes Peak	CO	New Cemetery	36,000	$0	$36,000	$0	$0	$0	$0	$0	CO
Puerto Rico[1]	PR	Gravesite Exp & Cemetery Improv on Remaining Land	23,400	$23,400	$0	$0	$0	$0	$0	$0	PC
Riverside	CA	Gravesite Expansion & Cemetery Improvements	43,000	$40,000	$0	$0	$0	$3,000	$0	$0	CO
Sacramento Valley	CA	Phase 2 Gravesite Expansion	35,000	$0	$0	$35,000	$0	$0	$0	$0	CO

Cemetery Name	ST	Project Description	Total Est. Cost	FY04 - FY16	FY17 Actual	FY18 Actual	FY19 Actual	FY20 Planned	FY21 Request	Future	Status
Sarasota[1]	FL	New National Cemetery - Phase I Development	19,803	$19,903	$0	($99)	$0	$0	$0	$0	FC
South Florida	FL	Phase 2 Gravesite Development	31,000	$0	$31,000	$0	$0	$0	$0	$0	CD
Tahoma[1]	WA	Cemetery Expansion	19,387	$21,230	($1,525)	$0	($319)	$0	$0	$0	FC
Tallahassee[1]	FL	New Cemetery	32,451	$33,682	$0	$0	($1,231)	$0	$0	$0	FC
Western New York	NY	New Cemetery	46,000	$0	$36,000	$0	$0	$10,000	$0	$0	CO
Willamette	OR	Gravesite Expansion - Phase 1 on New Land	$35,000	$35,000	$0	$0	$0	$0	$0	$0	CO
		Total	**$1,125,248**	**$451,888**	**$125,475**	**$243,267**	**$100,618**	**$117,000**	**$87,000**		

Status Codes:
AA – Advertise and Award
CD – Construction Documents
CO – Construction
D – Design
FC – Financially Complete
P – Planning
PC – Physically Complete

[1]Excess funds from unused contingencies, etc. were transferred to the working reserve and funds were made available for other uses in support of the major construction program.
[2]Los Angeles National Cemetery CA – Columbarium Expansion funding in the amount of $742K was removed from the project in error in FY 2015 and placed back on the project in FY 2016.
[3]Morovis National Cemetery, PR – Gravesite Expansion & Cemetery Improvements on Remaining Land, reprogrammed $4.5M in FY 2018.

This Page Intentionally Left Blank.