

**U.S. Department of Veterans Affairs (VA)
Federal Advisory Committee
National Academic Affiliations Council (NAAC)
Meeting Minutes for June 18, 2025**

Attendance: See Appendix

Welcome and Announcements

Ms. Mitchell called the meeting to order at 1:00 p.m. and reviewed meeting procedures.

Welcome and Introduction of Members

Dr. German, NAAC Chair, welcomed NAAC members, VA staff, and members of the public. She recognized rotating member Meredith Kazer for her six years of service on the NAAC and thanked her for her commitment to Veterans. Dr. Kazer extended a warm message to all remaining members.

Dr. Tiriyaki thanked NAAC members for their participation and commented on the importance of NAAC's mission.

SECVA Priority Discussion Updates

Dr. Tiriyaki acknowledged the video prepared by Secretary Collins that was viewed at the last meeting and his "Veterans-first approach". She outlined the Secretary's priorities – timely access to care; culture of caring, customer service, and accountability; supporting vulnerable Veterans; implementing key legislation; and modernization efforts. Dr. Tiriyaki briefed on how OAA supports each priority and the various initiatives that align with Secretary Collins' direction for the VA.

VA has established partnerships with over 1,450 academic institutions to train the best and brightest professionals in advanced programs at medical facilities nationwide. VA's 122,000 health professions trainees, who constitute approximately one-third of VA's clinical workforce, work alongside clinical teams in VA medical centers, ensuring access to medical appointments for Veterans.

OAA ensures that trainees receive high-quality training experiences, which promote the highest levels of competence in care, customer service, and accountability. A recent survey indicated that 91% of Health Professions Trainees (HPTs) were satisfied or very satisfied with their training experience at the VA. Additionally, before their training, only 54% of HPTs expressed an interest in working for the VA; this number rose to 73% after they completed their training.

The STRONG Veterans Act highlights current initiatives and encourages the VA to take further steps to improve mental health and suicide prevention programs. To date, OAA has added 177 new positions in disciplines such as social work, licensed

professional mental health counselor, marriage and family therapist, mental health nurse practitioner, and psychiatry. Ultimately, this program is enhancing VA's commitment to promoting Veterans' mental health and ensuring that all Veterans have equal access to vital resources that can save lives.

MISSION Act, Section 403, establishes the Pilot Program on Graduate Medical Education and Residency (PPGMER). This program aims to enhance health care access for Veterans and individuals living in rural and underserved areas. It provides funding to support resident physician rotations and new graduate medical education (GME) programs at high-priority locations, including facilities operated by the Indian Health Service, Indian Tribes, or Tribal organizations. Facilities for this program have been selected, and 61 residents will begin their first rotations in July in a total of 15 different sites with various clinical specialty programs to include: psychiatry, emergency medicine, internal medicine, family medicine, internal medicine-pediatrics, and pulmonary-critical care.

OAA has launched a virtual onboarding system known as the Account Provisioning and Deprovisioning System (APDS). This system streamlines the process for HPTs to check in at their local VA facility, allowing them to start providing care for veterans much sooner. Designed to replace manual processes, this online tool enables all onboarding tasks to be completed digitally, even from trainees' phones, resulting in a quicker and more accurate onboarding experience. The use of APDS became mandatory for onboarding HPTs in April 2024.

Dr. Tiryaki provided an update on the recent executive orders, including the hiring freeze of January 2025, which placed temporary restrictions on new hires in federal agencies. Funded HPTs are exempt. This hiring freeze is projected to be lifted on July 15, 2025. The VA had discussed reduction-in-force efforts to optimize resources, improve operational efficiency, and align personnel with mission-critical needs. Currently, there are no updates.

The Reforming Accreditation to Strengthen Higher Education Executive Order focuses on enhancing transparency, accountability, and performance among accrediting agencies that oversee postsecondary educational institutions. The executive order specifically mentions health professions education accrediting agencies, such as ACGME and LCME. The implications of this order for VA health professions education are unknown, but OAA is monitoring the situation closely.

Administrative Updates

Ms. Mitchell identified Minneapolis as the NAAC face-to-face meeting location for August. She mentioned logistical information for planning.

VHA Background, Suitability, Recruitment/Replacement Issues with Trainees

Edward (Skip) Walton, MD, Director, Medical Informatics Unit (MIU), began his

presentation by emphasizing Day One readiness, which means that every HPT is onboarded, trained, provisioned, and ready to care for Veterans on Day One of their experience. To mitigate lengthy timelines for onboarding, MIU developed the automated APDS.

Dr. Walton explained that the APDS included 145,000 Without Compensation (WOC) HPT profiles to date. They are launching a new pilot to include VA-paid HPTs. This aligns all HPTs under one onboarding process.

Secretary Collins made it clear that he wants to resurrect the go-live Electronic Health Record Modernization (EHRM) schedule at a more rapid pace. Deployments are restarting, with the first sites scheduled for April 2026. OAA understands that issues may arise with onboarding and provisioning timelines with go-live sites, causing delays for HPTs. They are raising awareness of resource requirements to support HPTs, providing a Congressional update in June 2025.

Dr. Walton outlined new requirements for screening HPTs. Enhanced security vetting for US citizens allows identification cards to last three years. Identification cards for non-US citizens will only last six months. APDS is an electronic onboarding system, while personnel security has manual processes. OAA established a reporting system with IT to help identify any gaps.

With the current travel bans and the State Department's hold on interviews for new visa applicants, starting the onboarding process early is imperative. The goal is to start 120 days before the start date, with all onboarding requirements complete 30-days out. In the meantime, the Educational Commission for Foreign Medical Graduates is leading advocacy efforts for non-citizen HPTs.

Dr. German questioned the short-term identification card approval for non-US citizens and how that will change the way the VA hires. Dr. Walton explained that non-US citizens cannot work for the federal government unless there is approval from the Undersecretary for Health (USH), which is an extensive process. The only way we can have non-US citizens do rotations at the VA is because they are managed by the affiliates and are not VA employees. OAA is not involved with the credentialing or management of employees.

Dr. Tiryaki reported that advocacy from groups outside of government is in progress. Organizations are looking into national interest waivers for physicians since there is a shortage.

Dr. Kowalski expressed concern about the balance between available staff to serve Veterans and the HPTs that augment the workforce. Dr. Tiryaki explained that there is a difference between service and education, and while trainee numbers may fluctuate, facilities adjust their staffing models to ensure there is no change to Veteran care.

Open Discussion

Dr. German asked about the staffing direction for the VA. Dr. Tiriyaki explained that a reduction in staffing is anticipated, but it is not the Secretary's intent to affect Veteran care. Dr. German is concerned about delays in the partnership collaborations included in the PACT Act. Dr. Byrne explained that there is an increased scrutiny in engagements with external entities, but OAA is not aware of any impact on that aspect of the PACT Act.

Public Comments

There were no public comments.

Final Comments and Adjournment

Dr. German thanked the staff for organizing the meeting and the members for attending. The meeting adjourned at 2:16 p.m.

Prepared By: **Nellie Mitchell, Designated Federal Officer, NAAC**

Verified By: **/s/ Deborah German, MD, Chair, NAAC**
Date: June 25, 2025

Appendix: Attendance Records

Council Member Attendance:

Arthur Evans, Jr., PhD, Chief Executive Officer and Executive Vice President, American Psychological Association; Deborah German, MD, Vice President for Health Affairs, Founding Dean, UCF College of Medicine; David Henderson, MD, Vice President for Equity, Diversity and Belonging, Medical Education, American Medical Association; Meredith Kazer, PhD, CNL, APRN, A/GNP-BC, FAAN, Professor and Dean, Marion Peckham Egan School of Nursing and Health Studies; Timothy Kowalski, DO, D. FACN, Vice Provost for Professional and Public Relations, American Osteopathic Association; Christopher Loyke, DO, FACOFP, Dean and Chief Academic Officer, Lincoln Memorial University - DeBusk College of Osteopathic Medicine (LMU-DCOM); Christopher Robinson, MS, MBA, CPO, ATC, FAAOP (D), Clinical Resource Director, The National Commission on Orthotic & Prosthetic Education, Assistant Professor of Physical Medicine and Rehabilitation, Northwestern University's Prosthetics Orthotics Center; Olga Rodriguez de Arzola, MD, FAAP, Dean of the School of Medicine, Ponce Health Sciences University; and Anthony Stazzone, MD, MBA, FACP, Chief Medical Officer, MidSouth Healthcare Network (VISN 19).

Council members unable to attend:

Monique Butler, MD, President, Graduate Medical Education, HCA Healthcare; Loretta Christensen, MD, MBA, MSJ, FACS (Ex-Officio) Chief Medical Officer, Indian Health Services; Deborah Deas, MD, MPH, Vice Chancellor for Health Sciences & Dean, Mark and Pam Rubin Dean of the School of Medicine, University of California – Riverside; Eric Elster, MD, FACS, FRCSEng (Hon.), (Ex-Officio), CAPT, MC, USN (Ret.), Dean, School of Medicine, Professor of Surgery, Uniformed Services University; Mark Henderson, MD, Associate Dean, Admissions, Vice Chair for Education, Department of Internal Medicine, University of California – Davis; Ryan Lilly, MPA, (Ex-Officio), Network Director, VA New England Healthcare System, Veterans Health Administration; Thomas O'Toole, MD, Deputy Assistant Under Secretary for Health for Clinical Services, Quality and Field Operations, VA; Wizzard Seide, MD, FAAP, Chief, Graduate Medical Education Branch, Division of Medicine and Dentistry, Health Resources and Services Administration (HRSA); and Alison Whelan, MD, Chief Medical Education Officer, Association of American Medical Colleges.

VHA Staff attending (all are OAA staff unless specified otherwise):

John M. Byrne, DO, FACP, Senior Advisor; Larissa A. Emory, PMP, CBP, MS, Management and Program Analyst (Alternate Designated Federal Officer (ADFO) for NAAC); Nellie Mitchell, MS, RHIA, Program Analyst (Designated Federal Officer for NAAC); Shaun Shenk, Health Systems Specialist, (ADFO for NAAC); Ezgi Tiryaki, MD, FAAN, ACC, Acting Chief Academic Affiliations Officer; Edward (Skip) Walton, MD,

MHPE, Director, Medical Informatics Unit; and Cheryl Whitney, Public Affairs Specialist.

Members of the Public attending:

A representative from the American Psychological Association and a representative from the Association of American Medical Colleges.