# POSITION DESCRIPTION

# Undersecretary for health, Department of veterans affairs

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| **OVERVIEW** |
| Senate Committee | Veterans’ Affairs |
| Agency Mission | The mission of the Department of Veterans Affairs (VA) is to serve America’s veterans and their families with dignity and compassion and to be their principal advocate in ensuring that they receive medical care, benefits, social support and lasting memorials. The VA promotes the health, welfare and dignity of all veterans in recognition of their service to this nation. |
| Position Overview | The undersecretary for health is responsible for the leadership and direction of the Veterans Health Administration (VHA), the largest integrated health care system in the country, and is responsible for assuring the delivery of timely, appropriate and cost-effective services to the nation’s eligible veterans receiving care in VA’s health care facilities or through contractor sharing agreements.[[1]](#endnote-1) |
| Compensation | Level III $165,300 (5 U.S.C. § 5314)[[2]](#endnote-2) |
| Position Reports to | Secretary of Veterans Affairs[[3]](#endnote-3) |
| **RESPONSIBILITIES** |
| Management Scope | In 2017, the undersecretary for health managed more than 326,000 personnel serving in VHA central offices and providing care in 152 VA medical centers, more than 900 outpatient clinics and 134 community living centers throughout the country.[[4]](#endnote-4) The Department of Veterans Affairs’ budget for fiscal 2018 is over $185 billion. |
| Primary Responsibilities | * Is responsible for the leadership and direction of the VHA, the nation's largest integrated health care system, which has the mission to:
	+ Develop, maintain and operate a national health care delivery system for eligible veterans
	+ Administer a program of education and training for health care personnel
	+ Conduct health care research
	+ Provide contingency support for the Department of Defense (DOD) and the Public Health Service during times of war or national emergency
* Assures the delivery of timely, appropriate and cost-effective services to the nation’s veterans receiving care in VA health care facilities or through contractor sharing agreements
* Provides care for veterans with service-connected disabilities and for those who need specialized services such as for spinal cord injury, mental illness, substance abuse and other conditions
* Is responsible for capital assets and a major construction program, and for effectively administering and allocating resources on both a programmatic and geographic basis[[5]](#endnote-5)
* Communicates VHA’s vision, principles, goals, expectations and outcomes to the Office of the Secretary, other department officials, the Office of Management and Budget (OMB), Congress, the Government Accountability Office, veterans, veterans service organizations and other federal agencies and stakeholders
* Develops long-range plans and policies that impact VHA’s long-term direction and strategy
* Provides briefings, speeches, congressional testimony and high-level presentations regarding veteran health care programs
* Establishes committees, advisory groups and review bodies, as necessary, to provide information and advice
* Serves as co-chair of the Health Executive Council (HEC) and member of the VA-DOD Joint Executive Council (JEC)
* Coordinates, develops and recommends milestones for the HEC working groups that are reported in the JEC strategic plan and annual report
* Establishes and approves standards for VHA research programs, capital asset planning, and management and health information management
* Promulgates and communicates policies that articulate VHA’s role in national health care reform initiatives
* Provides contingency support for the DOD and Department of Health and Human Services during times of war or national emergency
* Works closely, as needed, with chairmen and members of the Senate and House veterans affairs committees, appropriations committees and armed services committees, as well as the national veterans service organizations (Disabled American Veterans, Veterans of Foreign Wars, the American Legion and others); national military service organizations (Military Officers Association of America, Reserve Officers Association and others); state directors and secretaries of veterans affairs; national civic and business organizations and associations; the DOD’s Office of Warrior Care Policy and other related entities; the assistant secretary of defense for health affairs; and the OMB[[6]](#endnote-6)
* Uses expert leadership and management skills to drive organizational change on health care as well as budget, acquisition, IT and human capital management
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| Strategic Goals and Priorities | [Depends on the policy priorities of the administration]Sample:***Agency priority goal 1****:* Improve veterans experience with VA***Agency priority goal 2****:* Improve VA’s employee experience***Agency priority goal 3****:* Improve access to health care as experienced by the veteran***Agency priority goal 4****:* Improve dependency claims processing  |
| **REQUIREMENTS AND COMPETENCIES** |
| Requirements | * Appointed without regard to political affiliation or activity and solely on the basis of demonstrated ability in the medical profession, in health-care administration and policy formulation, or in health-care fiscal management; and on the basis of substantial experience in connection with the programs of the Veterans Health Administration or programs of similar content and scope (38 U.S.C. § 305)
* Whenever a vacancy in the position occurs or is anticipated, the secretary shall establish a commission to recommend individuals to the president for appointment to the position; A commission established under this subsection shall be composed of the following members appointed by the secretary:
	+ Three persons representing clinical care and medical research and education activities affected by the Veterans Health Administration
	+ Two persons representing veterans served by the Veterans Health Administration
	+ Two persons who have experience in the management of veterans health services and research programs, or programs of similar content and scope
	+ The deputy secretary of Veterans Affairs
	+ The chairman of the Special Medical Advisory Group established under section 7312 of this title
	+ One person who has held the position of undersecretary for health (including service as chief medical director of the Veterans’ Administration), if the secretary determines that it is desirable for such person to be a member of the commission

The commission shall recommend at least three individuals for appointment to the position of undersecretary for health; The commission shall submit all recommendations to the secretary, who shall forward the recommendations to the president with any comments the secretary considers appropriate; Thereafter, the president may request the commission to recommend additional individuals for appointment (38 U.S.C. § 305)* Strong understanding of and relationships with Congress
* Relationships with and understanding of missions and purpose of major national veterans service organizations and national military service organizations
* Strong knowledge of VA health care and benefit programs
* Understanding of joint VA-DOD veterans-related programs and collaborations
* Veteran status (highly preferable)[[7]](#endnote-7)
* Awareness of the legislative issues affecting the agency
* Understanding of management challenges unique to the public-sector environment, including budget, acquisition, human capital and IT
* Experience managing major, complex initiatives to improve organizational performance
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| Competencies | * Excellent leadership skills
* Experience working on a committed leadership team
* Strength in change management
* Willingness to meet with direct reports and secretary, but also employees one to two levels below
* Experience managing in in an environment with many stakeholders
* Experience making decisions with inadequate information (such as lack of agreement on objectives from Congress or poor cost information) in a short time, under intense public scrutiny
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| **CURRENT AND PAST APPOINTEES** |
| No current nominee (updated July 18, 2018) |
| David J. Shulkin (2015 to 2017): Ex-Officio Member, Board of Regents, National Library of Medicine, Department of Health and Human Services; Vice President, Atlantic Health System Inc.; President, Morristown Medical Center[[8]](#endnote-8) |
| Robert A. Petzel (2010 to 2015): Network Director, Midwest Health Care Network, Department of Veterans Affairs; Director, Network 23, Midwest Health Care Network, Department of Veterans Affairs; Director, Network 13, Midwest Health Care Network, Department of Veterans Affairs[[9]](#endnote-9) |
| Michael J. Kussman (2007 to 2010): Commander, Europe Regional Medical Command, U.S. Army; Command Surgeon, U.S. Army Europe; TRICARE Lead Agent for Europe, United States Army[[10]](#endnote-10) |

1. Romney Readiness Project position description [↑](#endnote-ref-1)
2. The Consolidated Appropriations Act, 2017 (Public Law 115-31, May 5, 2017), contains a provision that continues the freeze on the payable pay rates for certain senior political officials at 2013 levels during calendar year 2017. [↑](#endnote-ref-2)
3. Romney Readiness Project position description [↑](#endnote-ref-3)
4. Romney Readiness Project position description [↑](#endnote-ref-4)
5. OPM [↑](#endnote-ref-5)
6. Romney Readiness Project position description [↑](#endnote-ref-6)
7. Romney Readiness Project position description [↑](#endnote-ref-7)
8. Leadership Directories [↑](#endnote-ref-8)
9. http://docs.house.gov/meetings/AP/AP18/20140327/101942/HHRG-113-AP18-Bio-PetzelMDR-20140327.pdf [↑](#endnote-ref-9)
10. http://www.bumc.bu.edu/busm/center-for-military-and-post-deployment-health-2/michael-kussman-md/ [↑](#endnote-ref-10)