

**APPENDIX A**

**A-1**

**Scoping Comment and Responses Summary**

**A-2**

**Official 30-day Public Comment and Responses Summary**

## Appendix A-1

### Public Comments

#### Environmental Scoping for the Reestablishment of the VAMC and LSU AMC

Public comments were received during several public meetings held from June through August of 2008 in the greater New Orleans area. Additionally, the public provided comments by submitting emails, letters, and website postings. All comments were reviewed and those pertinent to the environmental scoping of the project are summarized below. Every attempt has been made to adequately respond to these comments and incorporate them into the Programmatic Environmental Assessment (PEA). Public involvement in development of this PEA is discussed in Section 1.3.1 of the PEA.

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#### Need for health care in New Orleans

Approximately 17% of comments express the need for health care in New Orleans, specifically for veterans. The comments are summarized below:

- Current health care facilities are operating at well below pre-Katrina levels. Health care services for citizens/veterans need to be restored to pre-Katrina conditions as quickly as possible. Therefore, choose a site that creates the least controversy. Choose to build around the historic properties, preserve the historic properties, or integrate those historic properties into the hospital.
- Temporary U.S. Department of Veterans Affairs (VA) facilities require veterans to travel to out-of-state facilities for medical services. Such travel results in a delay in treatment and financial hardship.
- VA hospitals should be built in close proximity to medical schools to provide veterans with the best medical care available.
- The current VA facilities are not sufficient to respond to the needs of the current veterans or those returning from Iraq and other active assignments.
- Current VA facilities in New Orleans are under-staffed and the care givers are over worked.
- The issue of economic development and possible benefits for the City are overshadowing what should be the VA's first priority: restoring quality healthcare to veterans as quickly as possible.

**RESPONSE:** Revitalization of the healthcare infrastructure in New Orleans is vital to the City, its residents, veterans, and the entire Gulf Coast region. Therefore, the VA and the Federal Emergency Management Agency (FEMA) in addition to the State of Louisiana (State) as the applicant of FEMA funds and as the grantee and the City of New Orleans (City) as the sub-grantee of the Department of Housing and Urban Development (HUD) Community Development Block Grant (CDBG) funds, are conducting this PEA to assist in the site selection process for new medical facilities for the State and VA. Reestablishing centralized and comprehensive care is the principal goal for full recovery

of health care in New Orleans, and thus a motivating factor for the Proposed Action. The purpose and need for the Proposed Action is detailed in Section 1.1 of the PEA.

The scope of this PEA is to: identify, evaluate, discuss, and analyze the current and projected impacts of the Proposed Action, and also the alternatives to these activities, on the environmental, historic, social, and economic resources of the study area. Section 106 of the National Historic Preservation Act (NHPA; 16 United States Code 470) requires Federal agencies to take into account the effects of their undertakings on historic properties (Title 36 Code of Federal Regulations [CFR] 60), and to afford the Advisory Council on Historic Preservation (ACHP) an opportunity to comment. See Chapter 2 of the PEA for an evaluation of alternatives. The impact to cultural resources is evaluated in Sections 3.5 and 4.3.

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### **Historical Preservation**

Approximately 14% of comments are related to preservation of historical homes and properties. More specifically, these comments support selecting an alternative or site that doesn't impact historic and archeological properties, or building around and preserving existing historic properties, such as Deutsches Haus, Dixie Brewery, McDonough #11 School, and the St. Louis Cemetery #2.

**RESPONSE:** The scope of this PEA is to: identify, evaluate, discuss, and analyze the current and projected impacts of the Proposed Action, and also the alternatives to these activities, on the environmental, historic, social, and economic resources of the study area. Section 106 of the NHPA (16 United States Code 470) requires Federal agencies to take into account the effects of their undertakings on historic properties (36 CFR 60), and to afford the ACHP an opportunity to comment. See Chapter 2 of the PEA for an evaluation of alternatives. The impact to cultural resources is evaluated in Sections 3.5 and 4.3.

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### **Lack of public involvement in site selection**

Approximately 11% of comments are related to a lack of public involvement in the site selection process. Specifically, numerous comments are in reference to the lack of public involvement in the City of New Orleans' recommendation and decision making processes. Additional comments are summarized below:

- The public has not been informed of the site selection criteria.
- Has a site already been selected and has design of the facility been initiated?
- Incorrect project information is being presented at meetings.
- Information available to the public has not been updated since the Lindy Boggs site was officially added as an alternative.

**RESPONSE:** Public notice and public input are required on any project funded by FEMA or other federal agencies in accordance with the National Environmental Policy Act (NEPA) and Section 106 of the NHPA. Details of the public involvement in preparation of this PEA are provided in Section 1.3.1. Additionally, a website has been established at [www.valsumedcenters.com](http://www.valsumedcenters.com). This website is periodically updated to provide the latest project news, schedule information, available documents, and public meeting announcements.

The site(s) selected for development needs to meet a number of criteria in order to achieve the purpose and need of the project. Four main criteria were used for site evaluation: proximity to the Louisiana State University (LSU) Health Sciences along Tulane Avenue and other related health education providers; access from I-10 and local collector streets; area and geometry of site; and adequate growth and expansion potential. The specific criteria used for site selection development are presented below:

- Provide sufficient acreage to construct new facilities to meet current and future capacity needs (a minimum of 25 acres for the Veterans Affairs Medical Center [VAMC] facility and a minimum of 40 acres for the LSU Academic Medical Center [AMC] facility);
- Allow for reestablishment of a major trauma center, including ease of access to interstate highways, other major thoroughfares, and public transportation;
- Meet current Federal requirements, including standoff distance, hurricane hardening, and storage of fuel, food, and water for self-sufficient operations;
- Conform to the State and City plans for the post-Katrina revitalization of the City;
- Allow for operational synergies and possibly integration with other major healthcare facilities, LSU and Tulane medical schools, and bio-medical research facilities by locating the proposed facilities in close proximity to existing facilities, recognizing the continued roles of those existing facilities as part of the overall healthcare delivery and medical training mission;
- Accommodate individual hospital operations efficiently within one contiguous area and for LSU AMC hospital, under one roof;
- Allow for affordable and convenient as well as an appropriate mix of housing for the workforce near the project site(s); and
- Allow for sufficient visibility to the public.

No decision has been made as to final site selection nor has a footprint or design for any new facilities been finalized. A designer has been retained and the VA is in the pre-schematic phase. The pre-schematic phase includes defining space requirements and

things necessary to go into the schematic design phase. That won't happen until a site has been selected. The pre-schematic decisions will be applicable regardless of what site is selected.

### **Support for the Mid-City Location**

Approximately 17% of the comments are in support of the Mid-City location. The comments are summarized below:

- The Mid-City location is in a transportation hub with existing bus service making it easily accessible, especially for older veterans that may not be able to drive or have family to assist them.
- It is in close proximity to two teaching hospitals.
- Locating the VA hospital in the medical corridor will be an incentive for doctors to come to New Orleans to train and care for veterans.
- Keeping the Medical Center of Louisiana at New Orleans (MCLNO) regional and the VA medical center downtown will improve the quality of life and improve or positively impact the downtown historic areas; provide access to leading edge healthcare for everyone; help LSU, Tulane, Xavier, and Delgado train health care professionals for New Orleans and greater New Orleans, as well as the state; provide thousands of high quality jobs in an area that greatly needs them; and will help anchor a bio-science industry downtown.
- The Greater New Orleans Biosciences Economic Development District (GNOBEDD) has passed a resolution that the Mid-City location is the correct location.
- The Downtown Development District board of administrators "believes that the new facilities adjacent to downtown are the best solution."
- The New Orleans Regional Planning Commission gives its full support and unanimous consent to do this project in downtown New Orleans.

**RESPONSE:** The scope of this PEA is to: identify, evaluate, discuss, and analyze the current and projected impacts of the Proposed Action, and also the alternatives to these activities, on the environmental, historic, social, and economic resources of the study area. See Chapter 2 of the PEA for an evaluation of alternatives. The Proposed Action, relocating to the Tulane/Gravier area, is described in section 2.2.2. The impact to socioeconomics is evaluated in Sections 3.6 and 4.4.

### **Opposition to the Mid-City Location**

Approximately 13% of the comments are in opposition to the Mid-City location. The comments are summarized below:

- The State and the VA should look at other alternatives that don't require displacing residents and don't impact a significant number of historical homes and properties, specifically Deutsches Haus, Dixie Brewery, McDonough #11 School, and the St. Louis Cemetery #2. .

- Current U.S. Census Bureau statistics do not reflect the pre-Hurricane Katrina demographics of the area or changes to the area since re-population has begun.
- The National Trust for Historic Preservation named the Mid-City neighborhood one of the 11 Most Endangered Historic Sites in the U.S.
- Residents and business and property owners were encouraged by the City and elected officials to rebuild after Katrina only now to face the possibility of losing their homes or businesses to this project.

**RESPONSE:** The scope of this PEA is to: identify, evaluate, discuss, and analyze the current and projected impacts of the Proposed Action, and also the alternatives to these activities, on the environmental, historic, social, and economic resources of the study area. Section 106 of the NHPA (16 United States Code 470) requires Federal agencies to take into account the effects of their undertakings on historic properties (36 CFR 60), and to afford the ACHP an opportunity to comment. See Chapter 2 of the PEA for an evaluation of alternatives. The proposed action, relocating to the Tulane/Gravier area, is described in Section 2.2.2. The impact to cultural resources is evaluated in Sections 3.5 and 4.3.

A detailed discussion of Environmental Justice-related existing conditions and impacts from the proposed action and its alternatives can be found in Section 3.6.3 of the PEA. The availability and use of accurate, up-to-date demographic population and housing statistics is addressed in Section 3.6.1 of Socioeconomics. Block level data available from the 2000 Census are no longer representative of conditions in the areas of concern due to the dramatic changes in population and housing that have occurred in the New Orleans metropolitan area in the wake of Hurricane Katrina, especially within Orleans Parish. In order to provide information that is both representative of current conditions and on a small enough scale to address specific sites, population and housing estimates for 2008 were obtained from the ESRI Business Analyst demographic database (ESRI 2008). These data updates include estimates of the demographic and economic effects of Hurricanes Katrina, Rita, and Wilma along the Gulf Coast. Impacts were estimated by examining new sources of information obtained from disaster response agencies, news reports, and fieldwork.

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### **Support for the Lindy Boggs Location**

Approximately 13% of the comments are in support of the Lindy Boggs Location. These comments are summarized below:

- No residential relocation or impact on historical buildings will occur.
- The Lindy Boggs location is already zoned medical.
- Selecting the Lindy Boggs site will reduce the timeline for having a facility up and running.
- Shuttle service could be implemented between this location and the LSU AMC downtown

### **Opposition to the Lindy Boggs Location**

Approximately 1% of the comments are in opposition to the Lindy Boggs Location. These comments are summarized below:

- The Lindy Boggs location is not in close proximity to the medical schools .
- Transportation is not sufficient to support the needs of the hospital.
- Available land is insufficient to adequately support the required square footage.

**RESPONSE:** The scope of this PEA is to: identify, evaluate, discuss, and analyze the current and projected impacts of the Proposed Action, and also the alternatives to these activities, on the environmental, historic, social, and economic resources of the study area. A description of alternative #2, relocating the VAMC to the Lindy Boggs site, is provided in Section 2.2.3 of the PEA. Affected environment and environmental consequences of this and other alternatives are discussed in Chapter 3.

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### **Support for Ochsner**

Approximately 1 % of the comments are in support of the Ochsner site. The comments are summarized below:

- Building at the Ochsner site will not require acquisition of private land. Therefore, selecting the Ochsner site will expedite the process.
- The Ochsner site is close to an interstate, not in a flood zone area, and could easily be evacuated if needed.
- A shuttle service could easily be implemented for transport between the site and the medical schools in downtown New Orleans.

### **Opposition to the Ochsner site**

Approximately 1 % of the comments are in opposition to the Ochsner site. The primary objection is that the Ochsner site is not in close proximity to the medical schools and other medical facilities located in downtown New Orleans.

**RESPONSE:** The scope of this PEA is to: identify, evaluate, discuss, and analyze the current and projected impacts of the Proposed Action, and also the alternatives to these activities, on the environmental, historic, social, and economic resources of the study area. A description of alternative # 3, relocating the VAMC to the Ochsner site, is provided in Section 2.2.4 of the PEA. Affected environment and environmental consequences of this and other alternatives are discussed in Chapter 3.

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### **Issues related to the existing Charity Hospital**

Comments related to Charity Hospital account for approximately 6 % of the comments received. These comments are summarized below.

- Charity Hospital can and should be renovated and rebuilt as a state-of-the-art medical facility.
- The existing Charity Hospital should be renovated for use as dorms for medical students or apartments/condos that could possibly be used for visiting families of patients or senior citizens.
- The historic Charity Hospital building is a New Orleans icon which must be preserved.
- Will the independent study of Charity Hospital conducted under House Concurrent Resolution 89 by RMJM Hillier be considered in the PEA?
- The determination by the Office of Facilities that Charity Hospital is “outmoded” contradicts a report by Blich-Knevel that said the deficiencies are correctable.

**RESPONSE:** As part of the Proposed Action, the 23 buildings that comprise the existing MCLNO complex (including Charity Hospital) would be stabilized and evaluated for redevelopment, reuse, demolition, or as surplus by the State of Louisiana, with the intention of returning the properties to commercial use. However, these actions are not considered part of this alternative and they would be addressed through a separate NEPA and NHPA evaluation.

In the Blich Knevel Storm Damage Evaluation report for Charity Hospital published 2 June 2008, the following conclusion was made:

*This report is not intended to render any opinion for the preservation, reconfiguration, or replacement of Charity Hospital. This report provides an evaluation of disaster related damages resulting from Hurricanes Katrina and Rita, and the cost to return the original building to pre-storm functions as a fully accredited Level 1 Trauma Center and Teaching Hospital.*

The study conducted by RMJM Hillier for the Foundation of Historical Louisiana was published 20 August 2008. The results of this study will be evaluated as part of the site selection process.

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### **Issues Related to Renovating Existing VAMC**

Approximately 3 % of the comments received were related to renovating the existing VA Medical Center facility, with the majority of comments specifically asking 1) if a study has been done of the existing structure or 2) suggesting the existing facility be renovated into mixed-use residential space.

**RESPONSE:** Modification/renovation of the existing New Orleans VAMC facility was considered but eliminated from further consideration. Hurricane Katrina caused extensive damage to the VAMC facility rendering the existing facility unacceptable for continued use as a medical facility. In addition, the limited acreage of the existing site would not provide sufficient acreage to construct new state-of-the-art facilities to meet or

exceed the capacity of the existing facilities, would not provide additional land for future expansion, and would not provide sufficient acreage to meet current Federal requirements, e.g., standoff distances. Therefore, based on ongoing mold concerns, current design requirements, size (acreage) constraints, costs, environmental hazards, and time consideration, modification/ renovation of the existing New Orleans VAMC facility was dismissed as not feasible. See Section 2.3.1 of the PEA for additional information.

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### **Miscellaneous**

Approximately 3 % of the comments are related to issues that aren't addressed in the categories above. The comments are summarized below:

- Cumulative Impacts
  - The cumulative impacts of the individual VAMC and LSU AMC projects in conjunction with each other and with reasonably foreseeable future actions of other parties within the GNOBEDD must be considered.
  - Cumulative impacts resulting from the abandonment of the original VAMC and MCLNO sites must be addressed.
  - The cumulative socioeconomic impacts of the VAMC and LSU AMC hospital projects in conjunction with past federally funded projects that have occurred in the vicinity of each of the alternatives must be considered.

**RESPONSE:** Cumulative impacts are discussed in Chapter 4 of the PEA. Cumulative impacts specific to socioeconomic issues are discussed in Section 4.4.

- An Environmental Impact Assessment of the Proposed Action is requested.

**RESPONSE:** Although an Environmental Assessment (EA) or Environmental Impact Statement (EIS) may be required for an individual action by a Federal agency, where Federal programs involve a multiplicity of individual actions, the Council on Environmental Quality (CEQ) has endorsed the concept of performing a PEA. The CEQ recommends programmatic environmental reviews for assessing the environmental effects of individual actions on a given geographical area or the overall impact of a large-scale program or chain of contemplated projects. Because they are broad in nature, programmatic environmental reviews may cover basic policy issues so that these issues do not need to be repeated in subsequent EAs prepared for the individual actions within a program. Once the site selection is completed, a site-specific EA or EIS may be conducted focusing on the site specific issues. The scope of the PEA is discussed in more detail in Section 1.2 of the PEA.

- How was the list of sites to be considered developed? Why weren't other sites considered?

**RESPONSE:** The VA put out a solicitation request for interest in response to their intent to relocate the VAMC. The sites were developed based on the proposals received in response to that solicitation.

- When selecting a site(s) for new hospital facilities, the issue of public transit accessibility for veterans should be carefully considered.

**RESPONSE:** The existing conditions and impacts on transportation resources associated with the various alternatives are presented in Section 3.7 of the PEA. Available transit resources for disabled passengers are included in these discussions.

- Use of the existing facilities and satellite locations would be a more cost efficient alternative. The cost savings could be utilized by the VA for medical research, staff enhancement, recruitment, and better qualified personnel and quality services. Another option is viable that has not been considered: utilize the Lindy Boggs site and renovate Charity Hospital.

**RESPONSE:** Revitalization of the healthcare infrastructure in New Orleans is vital to the City, its residents, veterans, and the entire Gulf Coast region. Therefore, the VA and the Federal Emergency Management Agency (FEMA) in addition to the State of Louisiana (State) as the applicant of FEMA funds and as the grantee and the City of New Orleans (City) as the sub-grantee of the Department of Housing and Urban Development (HUD) Community Development Block Grant (CDBG) funds, are conducting this Programmatic Environmental Assessment (PEA) to assist in the site selection process for new medical facilities for the State and VA. Reestablishing centralized and comprehensive care is the principal goal for full recovery of health care in New Orleans, and thus a motivating factor for the Proposed Action. The purpose and need for the Proposed Action is detailed in Section 1.1 of the PEA.

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## Appendix A-2

### **Comments Received During the 30-day Public Comment Period for the PEA of the Reestablishment of the VAMC and LSU AMC**

The official 30-day public comment period began 16 October 2008 when the Draft Programmatic Environmental Assessment (PEA) was made available to the public through the project website or requests. A public meeting was held 28 October 2008 in New Orleans to summarize the analysis presented in the PEA and to allow the public to provide comment. Additionally, the public had the opportunity to submit comments or questions via email, mail, or in person through 15 November 2008. All comments were reviewed and those pertinent to the environmental scoping of the project are summarized below. Every attempt has been made to adequately respond to these comments and incorporate them into the PEA. Public involvement in development of this PEA is discussed in Section 1.4.1.

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#### **Opposition to the Tulane/Gravier area sites**

Approximately 3 % of the comments express opposition for locating the New Orleans Veterans Affairs Medical Center (VAMC) and Louisiana State University Academic Medical Center (LSU AMC) in the Tulane/Gravier area. The comments are summarized below:

- Why were alternative sites that do not require the destruction of so many historic properties not chosen as the preferred alternative?
- Concerns of increased noise and traffic through the established surrounding neighborhoods.

#### ***Support for Ochsner***

Approximately 1 % of the comments express support for locating the proposed VAMC at the Ochsner site. The comments are summarized below:

- Jefferson Parish demographically appears to be the most likely location for VA patients.

#### ***Support for Lindy Boggs***

Approximately 28 % of the comments express support for locating the proposed VAMC at the Lindy Boggs site. The comments are summarized below:

- Selecting this site, which is already zoned for Medical, would allow it to be put back into use while sparing historic neighborhoods.

**RESPONSE:** The rationale for the identification of the preferred alternative from among the other alternatives was based on consideration of the degree to which each alternative satisfied multiple objectives related to the purpose of and need for the project. The no action alternative would not satisfy the project's purpose and need and, accordingly, was not considered as the preferred alternative. The principal objectives considered in comparing and deciding among the alternatives included the following:

- Adequate space.
- Accessibility.
- Proximity to medical affiliates.
- Minimization of environmental impacts.

The proposed actions (Tulane/Gravier Area) were selected because they best met the principal objectives of the projects. Alternatives # 1 (Tulane/Gravier area), # 2 (Lindy Boggs Site), and # 3 (Ochsner Site) would provide adequate space for the needed facilities. Alternatives # 1 and # 4 (Modification/Renovation of Charity) would provide the greatest accessibility. Alternative # 1 would provide the optimal degree of proximity to medical affiliates (Alternative # 4 would be somewhat less effective at satisfying this objective [assuming the case in which the VAMC would be sited in the Medical District at Tulane-Gravier], and Alternatives # 2 and # 3 would not satisfy this objective). Although Alternative # 1 may result in adverse impacts (on cultural resources), the agencies have agreed to mitigation measures to minimize these impacts. Thus, Alternative # 1 was the only alternative that met all four objectives, and it was the most effective or among the most effective at satisfying three of the objectives. These results provided the rationale for selecting the Tulane/Gravier Area as the preferred alternative.

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### **Relocation of Historic Buildings**

Approximately 26 % of comments expressed the need to consider relocation as a viable alternative to demolition. The comments are summarized below:

- Development of funds allocated for relocation of historical structures located within the proposed sites.
- Can Mid-City Historic Preservation Mitigation Program grants from the State Historic Preservation Officer (SHPO) be used to relocate homes?
- Should the affected property owners choose to move their homes themselves, can they be given the money that the agencies would have spent on demolition, to put toward the cost of relocation? If not, why not?

**RESPONSE:** Appropriation law constrains the actions for which federal funds can be used toward relocation. The physical move of the structure can be funded, but necessary costs such as receiver site preparation and utility connections cannot be funded. Thus, the federal funding would not be available to complete all the activities required to relocate a structure. However, the VA and City have agreed to reimburse the SHPO up to \$800,000 for moving one-story residential buildings of exceptional architectural

importance to the Mid-City National Register Historic District (NRHD) from their current locations within the Regional Planning Commission (RPC) site to new parcels within the Mid-City NRHD. In addition, VA, the City, and the State have agreed to provide funding to reimburse the SHPO for renovation projects within the Mid-City NRHD that are funded through their Mid-City Historic Preservation Mitigation Program. If the proposed VAMC and LSU AMC sites are selected, the Agencies will provide SHPO with up to \$1.4 million toward this effort. These funds are intended for repair and rehabilitation efforts and are separate from funds allocated for relocation. These mitigation measures are described in more detail in Section 5.1.1 Alternative #1 – Proposed Actions – Tulane/Graver Locations and in Appendix B Section 106 Programmatic Agreement.

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### **Support for the Tulane/Gravier area sites**

Approximately 12 % of the comments express support for locating the VAMC and LSU AMC in the Tulane/Gravier area. Commenters expressed their belief that the medical facilities within the central business district will bring an increased economic and social advantage to the City's overall well being. Additional comments are summarized below:

- Adjacency will allow for shared research and technological resources.
- Convenient for patients and medical care professionals.
- Will help establish the City's Biomedical Industry and attract the best doctors, researchers, and students.
- Will encourage growth in a formerly depressed area of the City.

**RESPONSE:** These comments are noted and are in support of the proposed actions.

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### **Need for Healthcare in New Orleans**

Approximately 10 % of comments expressed the need for healthcare in New Orleans, specifically for veterans. The comments are summarized below:

- VA hospitals should be built in close proximity to medical schools to provide veterans with the best medical care available.
- Veterans have been waiting years for a decision regarding the VA medical center to be made and now the site-specific plans need to be finalized as quickly as possible.

**RESPONSE:** Revitalization of the healthcare infrastructure in New Orleans is vital to the City, its residents, veterans, and the entire Gulf Coast region. Reestablishing centralized and comprehensive care is the principal goal for full recovery of healthcare in New Orleans, and thus a motivating factor for these projects and this NEPA documentation.

VA is committed to moving forward with a new VA hospital in the Greater New Orleans Area and Congress has specifically appropriated funds for the project. Currently the preferred action is relocation of the VA Medical Center to the Tulane/Gravier area and VA intends to move expeditiously to ensure completion of the new hospital by 2013.

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### **Charity Hospital**

Comments related to Charity Hospital account for approximately 5 % of the comments received. The majority of the comments relate to the independent assessments of Charity Hospital and their under-representation in the PEA. The comments are summarized below:

- The PEA does not take into account any of the independent assessments of Charity Hospital in enough detail.
- The assessment conducted by RMJM Hillier for the Foundation of Historical Louisiana (FHL) states that Charity Hospital can be renovated and reopened as a state-of-the-art facility in less time and for less money than building a new facility on the proposed site – why is this not the preferred alternative given the need for healthcare now?

**RESPONSE:** Comments regarding the inclusion of Old Charity assessments in the PEA were noted and the three independent reviews of Charity Hospital (the 2005 Adams report, the Blich-Knevel report, and the FHL report) have been more carefully reviewed and incorporated in the PEA. A detailed discussion and comparison of the findings of these reports can be found in Section 2.2.5.

The National Environmental Policy Act of 1969 (NEPA) process does not dictate a particular outcome or mandate the selection of the most environmentally-friendly alternative; however, Federal agencies must consider the environmental impacts of all the reasonable alternatives before making their final decision. Information regarding cost, timeliness, and engineering feasibility are examples of other non-environmental factors that are typically taken into account in the decision-making process. The independent reviews mentioned provide information on non-environmental related information and will be taken into account by the State in making its final decision.

When selecting a site, the State and LSU will seek to identify the best healthcare delivery and medical training option available. They are committed to fully reviewing and considering the FHL report as well as the other existing reports when making their site selection. Should the Tulane/Gravier sites be selected, information contained within the FHL report would be helpful in identifying other possible uses for the Charity Hospital building for its potential adaptive reuse.

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## **Cultural Resources**

Approximately 4 % of comments received were related to the preservation of historic buildings and the associated mitigation measures (primarily compensation) for affected property owners. The comments are summarized below.

- Reevaluation of the \$1.4 million mitigation fund - will this money be allocated to affected relocated areas in Mid City? The money should be given first to those closest to the project sites.
- The \$1.4 million fund is not adequate compensation compared to the roughly \$1.2 billion cost of building the new facilities.
- Why not reduce the area of the footprints (fewer acres) of the Proposed Actions in the Tulane/Gravier area to save historic buildings?
- The McDonough No. 11 School is a historic structure that has been overlooked and needs to be preserved.
- Inadequate discussion of final disposition of existing VAMC and Medical Center of Louisiana at New Orleans (MCLNO) historic buildings.
- What measures are in place to protect the historic Mid-City buildings that surround the proposed sites from future developers and private investors?

## **RESPONSES:**

**Mitigation Fund.** Should the VA select the VAMC Tulane/Gravier site, VA and the City will remit to the SHPO \$700,000 and \$400,000, respectively, for eligible historic preservation project costs incurred within the Mid-City NRHD. Should Federal Emergency Management Agency (FEMA) and the State select the LSU AMC Tulane/Gravier site, the State Office of Facility Planning & Control (OFPC) will remit to the SHPO \$300,000. Additionally, VA and the City will contribute up to \$800,000 for building relocation, as previously described.

There is no correlation between the SHPO program and the cost of construction; adequacy of the fund is based on the impact to the historic district. The SHPO and the Board for the Mitigation Program will develop the guidelines for the Mitigation Program. Proximity to the project area may be addressed in those guidelines. The Responsible Agencies find their participation in the SHPO Historic Preservation Mitigation Program sufficient as part of the larger treatment package outlined in the Programmatic Agreement (PA).

**Footprint Reduction.** For a period of 30 days following site selection, VA and State will receive comments from interested consulting parties concerning methods to incorporate and/or integrate historic properties on the periphery of the selected site into the design of the replacement facilities. VA and State will consider in its schematic design these comments and a range of facility development solutions which will utilize setbacks, landscaping, site layout, modification to building footprints, and other techniques to improve compatibility with the Mid-City NRHD. The agencies will convene two design review sessions for Consulting Parties to discuss design options.

Details of this treatment measure are described in 5.1.1.1.3 Design Review Process and in Appendix B Section 106 Programmatic Agreement.

**McDonough No. 11.** The State of Louisiana, LSU, and FEMA recognize the architectural significance of McDonough No.11 and are sensitive to the desire to save the building. However, because of the building's location near the center of the proposed project site and the expense and difficulty of relocating this masonry building, the agencies do not think it is reasonable or responsible to raise the expectation that the school can be incorporated into the design of the LSU AMC. The agencies have agreed to recordation of the exterior and interior of the building and will include McDonough No.11 in the public interpretation program.

**Final Disposition.** VA will comply with NEPA and National Historic Preservation Act (NHPA) requirements when evaluating options for disposition of the existing facility. However, no action related to disposition will occur for several years – the new VAMC facility must be designed and constructed before the existing building is evacuated.

The OFPC and LSU will develop a strategic plan to foster and encourage adaptive reuse of the nine historically significant buildings that were part of the former MCLNO. LSU will determine which of these buildings may be suitable for its use and offer the remaining buildings to other state agencies. Should no state agencies elect to use these buildings, they will be evaluated for transfer from State control. State will hold at least two public meetings during that evaluation process to solicit input.

If it is determined that Charity Hospital is not suitable for use by a state agency, State and/or LSU will develop a marketing study and actively solicit and encourage public or private entities to rehabilitate and reuse the facility. These treatment measures are described in more detail in Section 5.1.1.3.6 Reuse and/or Disposition of the Historic Buildings in the former Medical Center of Louisiana at New Orleans and in Appendix B Section 106 Programmatic Agreement.

**Mid-City Development.** Should VA select the Tulane/Gravier location for the replacement VAMC, FEMA and the City will seek to assist local interest citizen organization(s) in pursuing the local historic district designation process for the Mid-City NRHD. Details of this treatment measure are described in Section 5.1.1.3.5 Local Historic District Designation and in Appendix B Section 106 Programmatic Agreement.

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### **Public Involvement / Site Selection Process**

Approximately 3 % of comments are related to the public's general frustration with the site selection process, specifically, their concerns that they are not being heard by the parties. Additional comments are summarized below:

- The public is encouraged to ask questions but they are not being provided with any answers.

- The electronic method of information and document delivery is making it hard for those that do not have computers or internet access.
- Documents were not always readily available, and when they were eventually made available, sufficient time was not given to the public for review.
- The site selection process was unfair to the public and marked by pre-determined outcomes – decisions were made long before the public was involved.
  - Public funds were used to acquire land in the proposed LSU AMC footprint before site selection was complete.
  - Moratorium on building (non-issuance of permits) within the Tulane/Gravier area footprints.
  - A proximity criterion was not listed in the original VA request for proposals – it was added later to support selection of the downtown sites.

## **RESPONSES:**

**Questions & Answers.** During each of the public meetings, as well as during the Section 106 consultation meetings, the agencies answered a number of questions on a variety of issues. Where responses were not provided directly, the comments have been considered in the revisions to the PEA and PA documents.

**Information & Document Delivery.** Throughout the site selection process, the lead agencies have solicited input from all potentially affected parties, including individual members of the public, public interest groups, and Federal, State, and local agencies. Public participation was afforded through public scoping meetings held in Mid-City New Orleans and Jefferson Parish. Dates and locations for the public meetings and the notice of availability of the PEA were published in local newspapers and advertised on local radio stations and the project website. In addition, fliers announcing the first meeting were distributed to Mid-City businesses located within and along the VAMC and LSU AMC site boundaries, posted throughout the Tulane/Gravier area, and delivered to leaders of community organizations, who then distributed them to the members of their organizations. Early in the site selection process, a detailed Purpose and Need Statement and Preliminary Alternative Analysis for Site Selection document were made available to the public. In October 2008, the notice of availability of the PEA and the announcement of the final public meeting were distributed to all parties who had submitted viable email and mailing addresses during the earlier meetings in addition to all Section 106 Consulting Parties. Documentation was made available for download on the project website; however, copies of documents could also be obtained by contacting Earth Tech staff by phone, mail, or in person, as was explained in the official announcements.

**Pre-Determined Outcome.** No final decision has been made on the site selection for the replacement VAMC or the LSU AMC. The final site selection decision will not be made until the completion of the NEPA and NHPA processes. All viable alternatives have been thoroughly evaluated throughout the environmental and historic review processes. The only alternatives that have been eliminated from consideration are those that had insufficient acreage to meet the principal objectives of the projects. The Proposed

Actions are the preferred alternative because they best meet the principal objectives of the projects.

The VA and LSU have publicly stated that the Tulane/Gravier sites are the preferred alternatives because they best meet the purpose and needs: accessibility, size, and, proximity to other medical affiliates and potential adverse effects can be effectively mitigated. However, both agencies have also maintained the position that the projects are separate and severable, and each may be commenced, built, and completed independently of the other. Each agency will make an independent site selection at the completion of the NEPA and NHPA processes

**Use of Public Funds.** The City of New Orleans has not used any funds for the purposes of land acquisition with regard to the proposed VAMC project during the site selection process. Pursuant to 24 CFR Part 58, Community Development Block Grant (CDBG) funding will not be released until the completion of the environmental review process and approval rendered by the United States Department of Housing and Urban Development (HUD). Any and all funding transferred to the State of Louisiana by the City of New Orleans pursuant to the Memorandum of Understanding (MOU) has not contributed to land acquisition, or any other impermissible pre-decisional activities as defined by NEPA and its implementing regulations prohibiting environmentally adverse and choice-limiting pre-decisional activities, 40 CFR Part 1506.1(a).

**Building Moratorium.** Pursuant to New Orleans municipal ordinance 22,944 m.c.s, a one-year temporary moratorium on building permits is in effect for the purposes of enabling the study and development of a zoning classification appropriate for a Regional Medical District, thereby serving the public purpose of providing healthcare to the citizens of New Orleans. The moratorium includes the area within the footprint of the proposed VAMC and LSU AMC Tulane/Gravier site location alternative. This moratorium requires review of building permit applications by the City Planning Commission and, if necessary, permit appeals to the City Council. To date, no building permit applications have been denied under this municipal ordinance.

**Proximity Criterion.** VA did not constrain the advertisement to sites adjacent to academic affiliates and has been willing to consider all sites that met the basic requirements of their request for proposals. However, proximity was considered in the evaluation of the proposals and the identification of a preferred alternative. The potential for synergy between the medical affiliates in the downtown area enhances the quality of healthcare and medical training programs available to the Greater New Orleans Area.

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### **Miscellaneous**

Approximately 3 % of the comments are related to issues that are not addressed in the categories above. The comments are summarized below:

- A detailed description of the process by which decisions were made regarding the logistics of the bed count and medical staff within LSU and VA medical facilities.
- Will the agencies hire local contractors for construction of the new facilities and will local residents be able to work for the construction contractors?
- The MOU between VA and the City (19 November 2007) compromises the NEPA Section 106 process by stating that if selected, the RPC site will be made “construction ready” (i.e. completely cleared).
- The Draft PEA Does Not Support the Selection of the Preferred Alternative.
- The impacts associated with selection of the preferred alternative are significant and warrant an Environmental Impact Statement (EIS) - cannot issue a Finding of No Significant Impact (FONSI).
- Issues with the tiered approach specifically that design will not be addressed until after the selected sites have been cleared (site prep in Tier I), as related to footprint reduction and historic preservation concerns.
- The City has not fulfilled its requirements under NEPA and Section 106 because it has only evaluated one alternative (RPC site).

## **RESPONSES:**

**Bed Count.** In determining the necessary size (number of beds) of the new VAMC, VA utilized standardized criteria for space, equipment, and staffing based on projected patient volumes. The number of beds needed for the LSU AMC was determined through analysis of the current and estimated future population of New Orleans, average age of the population, estimates of the use rates by the population based on historic comparisons, and estimates of the length of stay for patients. Initially, in the 2005 Adams Report, project planners determined the need for 416 medical/surgical beds and 68 psychiatric beds for a total of 484 beds. Changes in the population estimates, average length of stay, and anticipated use rates resulted in a 2008 update that calls for 364 medical/surgical beds and 60 psychiatric beds for a total of 424 beds.

**Labor Force.** Once site selection has been finalized, VA will move forward with the design of the new medical center. Upon completion of the design, VA will issue a request for proposals related to the construction of a new facility. This solicitation will comply with appropriate Federal Acquisition Regulations (FAR). Requests for Proposals for contractors to complete construction for the LSUAMC will be issued in accordance with Louisiana Public Bid Law.

**Memorandum of Understanding.** An amendment to the 19 November 2007 MOU between the City and VA was signed on 19 November 2008. The amendment was established so that the Parties (City of New Orleans and VA) can address the removal of existing improvements and pavements in accordance with the NHPA Section 106 process and construction of any necessary facilities and infrastructure offsite from and on-site within the boundaries of the site if the Department selects the 34-acre (Tulane/Gravier) site for the New VAMC.

**The Draft PEA Does Not Support the Selection of the Preferred Alternative.** The NEPA process does not dictate a particular outcome or mandate the selection of the most environmentally friendly alternative. However, Federal agencies must consider the environmental impacts of all the reasonable alternatives before making their final decision. Information regarding costs, timeliness and engineering feasibility are examples of other non-environmental factors that are typically taken into account in the decision-making process.

**Need for an Environmental Impact Statement.** The agencies evaluated the environmental impacts of the proposed actions and determined that they do not rise to a level of significance as defined by NEPA. Although some of the alternatives could have impacts to cultural resources and environmental justice (EJ), these impacts can be mitigated so that they are less than significant.

More specifically, VA's implementing regulations provide guidelines by which to determine the appropriate level of NEPA analysis. These regulations do not mandate a specific level of analysis for any particular action. After careful analysis and consideration, VA concluded that a PEA was the appropriate level of NEPA documentation by which to identify and evaluate environmental impacts at this stage. Since the PEA concluded that the environmental impacts of the proposed actions do not rise to a level of significance as defined by NEPA, a Finding of No Significant Impact is likely and therefore VA will not pursue an EIS at this time.

**Tiered Approach.** Where Federal programs involve a multiplicity of individual actions, evaluation of a large-scale program, or a series of related decisions, the Council on Environmental Quality (CEQ) has endorsed the concept of performing programmatic analysis or "tiering." Programmatic environmental reviews may cover basic policy issues so that these issues do not need to be repeated in subsequent NEPA analyses prepared for the individual actions within a program. Also, programmatic environmental reviews promote consideration of cumulative environmental impacts that might be ignored in assessments prepared on a case-by-case basis. The agencies have elected to follow this approach because of the complexities of the projects, the influence of site selection on design and preparation, and the potential cumulative impacts of combined operational requirements associated with multiple healthcare facilities.

The agencies acknowledge and recognize that design plans for the VA and LSU medical centers may involve both plans for the immediate construction and utilization of facilities within the selected sites and may also involve long-term planning goals and objectives to accommodate future needs for expansion of the respective campuses. For a period of 30 days following site selection, VA and State will receive comments from interested consulting parties concerning methods to incorporate and/or integrate historic properties on the periphery of the selected site into the design of the replacement facilities. The VA and State will consider in its schematic design these comments and a range of facility development solutions which will utilize setbacks, materials selections, landscaping, site layout, modification to building footprints, massing and other techniques to improve compatibility with the Mid-City NRHD. The agencies will convene two design review

sessions for Consulting Parties to discuss design options. Details of this treatment measure are described in Section 5.1.1.1.3 Design Review Process and in Appendix B Section 106 Programmatic Agreement.

**The City's Requirements under NEPA and Section 106.** The City of New Orleans, as the recipient of HUD CDBG funds, has been designated the Responsible Entity (RE) for HUD's NEPA compliance efforts in relation to the actions associated with the replacement VAMC. HUD NEPA regulations (24 CFR Part 58) state that the RE may adopt the environmental assessment prepared by other agencies if that assessment is prepared in accordance with the procedures in 40 CFR 1506.3. The City of New Orleans, as the recipient of HUD CDBG Funds, has elected to participate in and accept the PEA and PA developed by the lead agencies of the VA and FEMA in compliance with the NEPA and NHPA regulations. The City has participated in the environmental and historic assessment processes from the project inception. The PEA and PA consider and evaluate multiple alternatives for each proposed hospital facility. The City has no NEPA or NHPA Section 106 responsibilities unless the Tulane/Gravier site is selected for the replacement VAMC as that is the only site for which the city would use federal funding. Therefore, the City is fulfilling its obligations under NEPA and Section 106.

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### **Deconstruction of Historic Buildings**

Approximately 2 % of commenters expressed their belief in the value of deconstruction versus demolition. The comments are summarized below:

- Deconstruction is not more expensive than demolition and should be evaluated as an alternative to demolition of the historic buildings in the Tulane/Gravier area.
- Historic buildings deserve to be deconstructed so that the maximum amount of historic material can be salvaged and reused.
- Deconstruction is more sustainable because it prevents the materials from ending up in landfills.

**RESPONSE:** Numerous concerns have been raised regarding the possible demolition of historic structures in the Tulane/Gravier area and the public has expressed interest in the deconstruction process as a means of preserving cultural heritage by reusing historic building materials. These concerns were noted and deconstruction as an alternative to demolition has been more carefully considered. The advantages and disadvantages of deconstruction vs. demolition were examined and incorporated in the PEA. This discussion and comparison of the two methods can be found in Section 3.4.2.2.

From an environmental/sustainability perspective, the PEA provides that the amount of demolition material generated and placed on the prospective landfills does not raise concerns of significance of impacts to the human environment because the landfills will be able to handle the load without significantly affecting their life span. Pursuing deconstruction would address only 20% of the potential solid waste that would be generated by this alternative given that approximately 80% of the generated waste is

estimated to be paved surfaces and concrete floors. For the demolition activities the agencies will pursue the sorting and recycling of the generated waste as well as selective salvage of materials pursuant to the PA under Section 106 of the NHPA. Based on these considerations as well as consideration on the amount of time that deconstruction would take and the absence of significant impacts from the generated waste, the agencies have determined that deconstruction would not be valuable or meaningful in this particular case and therefore, will pursue demolition instead.

From a historic preservation perspective, the agencies have determined that deconstruction is not a meaningful mitigation measure to include in the PA because of its debatable preservation related benefits, as well as the immense time, effort, and expense needed to undertake deconstruction activities. Therefore, total deconstruction of historic buildings, with the exception of Orleans House, is not being proposed as part of the preferred alternative. If it is found to be impractical to retain the Orleans House or to relocate the building, the State has agreed to consider permitting a non-profit historic preservation third-party organization to dismantle and remove the building. Limited deconstruction, in the form of an architectural salvage plan, has been agreed to by the agencies. Details of the architectural salvage plan, including elements to be removed from historic properties, can be found in Appendix 4 of the PA.

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### **Socioeconomic Issues**

Comments related to socioeconomic issues account for approximately 1 % of the comments received. The comments are summarized below:

- An increase in property values has been mentioned as a beneficial side effect should the Tulane/Gravier area sites be selected; however, this could increase rents and cost of living in the area, which would then further displace lower-income families in areas outside the footprints – are there any plans to help mitigate this effect?
- Long term impacts to the residents located within the proposed site have not been accurately analyzed.
- The Proposed Actions will, in fact, result in adverse impacts on EJ communities of concern, as well as disproportionately high and adverse impacts to minority or low-income populations. The perfunctorily described measures offered as mitigation to avoid such impacts are inadequate as a matter of law. Mitigation fails to address shortage of affordable housing.

### **RESPONSES:**

**Increased Property Values.** The potential increase in property values in the areas surrounding the proposed and alternate locations for the VAMC and LSU AMC is discussed under indirect impacts in Section 3.6.1.2, Discussion of Impacts – Population and Housing. A resultant increase in residential rents in those areas is a further indirect impact that may or may not occur, given that numerous factors influence residential rents.

As discussed in Impacts of the Proposed Actions / Direct Impacts (Section 3.6.1.2), the availability of affordable apartments in New Orleans is expected to improve as units financed through incentives provided under the Road Home and Gulf Opportunity Zone programs come on the market. There are approximately 2,000 units financed with Gulf Opportunity Zone funding currently in development within Orleans Parish that will add to the inventory of affordable housing within the next six to 12 months. Through the State's Road Home Small Rental Program, the Louisiana Recovery Authority has awarded funds to owners of 8,740 units in Orleans Parish, 7,540 of which will be affordable rental apartments. This activity combined with City of New Orleans programs already in place to assist low-income renters would help to mitigate a potential increase in residential rents. A discussion of the indirect impacts of increased property values has been added to Section 3.6.3.2, Discussion of Impacts – Environmental Justice.

**Long-term Residential Impacts.** Under the Proposed Actions, the resident population that exists on the proposed Tulane/Gravier VAMC and LSU AMC locations would be directly impacted through displacement. This was addressed in Sections 3.6.1.2 and 3.6.3.2 of the PEA. In order to perform a conservative analysis of potential impacts on housing, population, and EJ communities within Orleans Parish as a result of the displacement, an assumption was made that the displaced residents would remain in the area. This assumption was supported by information from the Road Home Program. A search of the program's records indicated that of the 13 homeowners on the Alternative #1 (Tulane/Gravier) sites that have made their selection, almost 100 percent have decided to stay; only one applicant has sold his house.

However, residents have indicated that they would not necessarily remain in the City of New Orleans if the Proposed Actions were implemented and they were displaced. Therefore, the assumption that residents displaced from the proposed Tulane/Gravier sites would remain in the City has been removed from the PEA, and the text has been modified accordingly.

**Environmental Justice.** The comments concerning EJ issues, which were submitted in a five-page letter, refer to Section 4.4.2.2, Alternative # 1 – Proposed Actions – Tulane/Gravier Locations, in Section 4.0, Cumulative Impacts, in the PEA. This section is limited to a discussion of cumulative impacts. However, the primary discussion of EJ impacts is presented in Section 3.6.3.2, Discussion of Impacts – Environmental Justice and the primary discussion of mitigation measures is presented in Section 5.4, Mitigation Measures Associated with Environmental Justice.

The primary regulatory driver for consideration of EJ issues is Executive Order 12898, which requires each Federal agency to make achieving EJ part of its mission. To comply with this order, Federal agencies should ensure that their actions do not have **disproportionately high and adverse** human health or environmental effects on minority or low-income populations. As stated in Section 3.6.3.2, the final step in the EJ analysis is to determine if any adverse environmental effects are likely to fall disproportionately on communities of concern, constituting a “disproportionately high and adverse” impact. An adverse effect is considered disproportionate when it is predominantly experienced by

a minority or low-income segment of the population; that is, where it is more severe for that segment than for other population segments. Based on the analysis of impacts for all resource categories presented in this PEA, socioeconomics was identified as the resource category that could potentially result in disproportionate impacts to EJ communities.

The populations residing within one-quarter mile of the VAMC site and the LSU AMC site were each identified in Section 3.6.3.1 as an EJ community of concern, based on the proportion of minority and low-income residents. Orleans Parish, with a population of almost 70 percent minority, would itself be considered a community of concern for EJ purposes. Therefore, the effects from construction of medical facilities at the proposed Tulane/Gravier sites on minority and low-income populations (that is, displacement of those populations) would not appreciably exceed the effects on the general population within one-quarter mile of the sites, or within Orleans Parish as a whole, if the facilities were built at different locations. The displacement of minority and low-income populations currently residing on the VAMC and LSU AMC sites is an adverse effect of the proposed actions. However, the relocation of residents is not considered a significant effect if those residents are able to find comparable housing. Mitigation measures would be employed to assist residents in finding suitable replacement housing.

On page 2 of the letter, the statements are made: “However, the proposed mitigation measures completely ignore the fact that the housing stock in New Orleans is devastated” and “Mitigation which offers assistance in finding replacement housing when such housing does not exist or already has tens of thousands of people waiting for such housing is virtually no mitigation at all.” As described above, the primary discussion of EJ and housing issues is not contained in Section 4.4.2.2 of the PEA. The lack of availability of affordable housing in New Orleans in the years following Hurricane Katrina is described in Section 3.6.1.1, Existing Conditions – Population and Housing, and discussed further in Section 3.6.1.2, Discussion of Impacts – Population and Housing and in Section 3.6.3.2, Discussion of Impacts – Environmental Justice. However, as discussed in those sections, the availability of affordable housing is expected to improve as recovery efforts continue throughout New Orleans.

On page 4 of the letter, the statement is made: “The discussion of mitigation measures in section 4.4.2.2 of the Draft PEA is woefully inadequate as a matter of law.” A detailed description of mitigation measures to be employed is presented in Section 5.4, Mitigation Measures Associated with Environmental Justice. Mitigation measures are also discussed in Section 3.6.1.2, Discussion of Impacts – Population and Housing.

On page 5 of the letter, the statement is made: “...housing of last resort which is not defined at all in the Draft PEA...”. This term is described in Section 5.4, Mitigation Measures Associated with Environmental Justice. Also on page 5 of the letter, the statement is made “In addition, in and of itself, ‘housing of last resort’ hardly sounds appealing, and certainly doesn’t seem to constitute adequate ‘mitigation’.” The term “housing of last resort” applies to additional alternative assistance for displaced owner-occupants and tenants; it does not refer to the housing itself. It may also include the use of project funds to undertake special measures such as the construction, rehabilitation, or

relocation of housing. Use of this provision is required when comparable replacement dwellings are not available within the monetary limits provided in the Uniform Relocation Act (URA). This is a common situation in high-cost housing areas or with very low income tenants who do not live in subsidized housing at the time of displacement. Additional explanation has been added to Section 5.4 to further define the term.

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## **Alternatives**

Approximately 1 % of the comments received were in regards to an inadequate consideration or evaluation of alternatives to the Proposed Actions. The comments are summarized below:

- Alternatives were eliminated from further consideration without giving the public an opportunity to comment or give input.
- The existing VAMC building could be transferred to LSU and LSU could renovate both Charity Hospital and the existing VAMC – utilizing both buildings would provide enough space for a state-of-the-art LSU AMC.
- The VAMC should be built on the proposed LSU AMC site and the LSU AMC could be built at either Charity or another downtown location, thereby reducing impacts to the Mid-City NRHD and alleviating concerns of inadequate LSU funds.
- Has the property on the south side of Tulane Ave. from Claiborne to Broad and from Poydras to Tulane been analyzed as a potential site?

## **RESPONSES:**

**Alternatives Elimination.** As part of the NEPA process, reasonable alternatives are typically reviewed and evaluated and alternatives that do not meet the stated purpose are often eliminated from further consideration. A *Preliminary Alternative Analysis for Site Selection* document was published and posted on the project's public web site on 22 August 2008 to provide the public with early information regarding alternatives that were being eliminated from further consideration. The alternatives which were eliminated did not meet the stated purpose and need for the project. The public had opportunity to comment on this analysis at the time of the posting of the *Preliminary Alternative Analysis for Site Selection* document as well as during the 30-day comment period associated with the Draft PEA.

**Additional Alternatives.** VA has concluded that the existing VAMC building is not suitable for medical use and therefore would not be appropriate for the replacement of some of the existing MCLNO facilities. In addition, portions of the existing VAMC will remain in use by VA until the completion of a new medical complex and not available for transfer to LSU. Regarding construction of the new VAMC on the proposed LSU AMC site, VA can only evaluate viable alternatives. Only three viable options were submitted

to VA, the RPC (Tulane/Gravier), Ochsner, and Lindy Boggs sites. The proposed LSU AMC site was not provided to VA as a potential site location.

**Area South of Tulane Ave.** Throughout the site selection process, the public has expressed concerns that additional sites were not being considered. The area south of Tulane, specifically the area East of Galvez Street, North of Poydras Street, South of Gravier Street, and immediately adjacent to University Hospital and Health Sciences Center, was evaluated as a preliminary alternative for the LSU AMC (*Preliminary Alternative Analysis for Site Selection* document). This site did not meet the size criteria of being conducive to constructing a new facility to meet the critical healthcare needs of the region post-Katrina, and was therefore eliminated from further consideration. A discussion of this elimination can be found in Section 2.3.4 Construction of LSU AMC at Other Alternative Sites.

VA issued an advertisement for the acquisition of land in April 2007 and the RPC and Ochsner sites were the only viable responses received. VA also indicated that they were willing to consider additional sites if offers were received in a timely manner and met the requirements as published in VA's original advertisement. On 25 August 2008, Victory Real Estate Investments, LLC (VREI) offered another site (Lindy Boggs) to VA for site selection consideration. Although other potential site locations have been mentioned by the public, no other viable offers were submitted to VA for consideration. Therefore, no other alternative site locations for the VAMC are being considered in this PEA.

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### **LSU Project Funding**

Approximately 1 % of comments expressed concern over the reliability or security of LSU funds. The comments are summarized below:

- What will happen if the proposed sites are selected, both sites are cleared, and then LSU and the City/State realize they do not have the money to build a new LSU AMC facility?
- Does the status of LSU/City funding have any impact or influence on the VA's site selection?

**RESPONSE:** Both the Governor and the Secretary of the Louisiana Department of Health and Hospitals have repeatedly expressed their unwavering support and commitment to bringing a state-of-the-art academic medical center to New Orleans. The State has agreed to notify the Advisory Council on Historic Preservation Chairman in writing that a funding stream for design and construction has been identified and that a business plan has been approved for the new academic medical facility before commencing demolition activities. While the State and FEMA are still engaged in discussions regarding the amount of damages that will be covered, that is only a portion of the funds that will be dedicated to this project. The Tulane/Gravier site is the preferred alternative and that preference does not depend on the amount of FEMA funding.

The Tulane/Gravier site is the preferred location for VA not only because of the adjacency to the proposed LSU AMC, but also because of the adjacency to the other medical centers, the LSU Health Sciences Center, Tulane Health Science Center, and the Bioscience corridor. Placing the replacement VAMC near these facilities maximizes the potential for synergy between all these groups in repairing and sustaining high-quality healthcare for the veterans of this region. While VA has engaged in a joint effort on the environmental and historic preservation assessment efforts due to the potential cumulative impacts, ultimately the projects are separate and severable. Each agency will make an independent decision regarding site selection.