THE COURIER-JOURNAL - A GANNETT COMPANY

STATE OF KENTUCKY

County of Jefferson

Affidavit of Publication

I, Marjorie Wise of THE COURIER-JOURNAL, *clerk of* THE COURIER JOURNAL *general circulation printed and published at Louisville, Kentucky, do solemnly swear that from my own personal knowledge, and reference to the files of said publication, the advertisement of:*

Title: Notice of Availability *Lines: 66*

Date: 3/30, 3/31, 4/1/2012 *Inches: 3x6.44*

Marjorie Wise, Clerk

Signature of person making proof

Subscribed and sworn to before me this 3rd day of April, 2012.

Janice C. Richardson, Notary
Notary Public, State at Large, KY
My commission expires June 14, 2014

NOTICE OF AVAILABILITY

DRAFT PROGRAMMATIC ENVIRONMENTAL ASSESSMENT

NOTICE OF AVAILABILITY DRAFT PROGRAMMATIC ENVIRONMENTAL ASSESSMENT
U. S. DEPARTMENT OF VETERANS AFFAIRS

SITE SELECTION AND ACQUISITION FOR A PROPOSED REPLACEMENT VA MEDICAL CENTER
LOUISVILLE, KENTUCKY

The Department of Veterans Affairs (VA) announces the preparation and availability of a "Draft Programmatic Environmental Assessment" (Draft PEA) for the proposed site acquisition, construction, and operation of a new minimum 800,000 gross square-foot medical center within the greater Louisville, Kentucky, metropolitan area to replace the existing outdated facility located at 800 Zorn Avenue. The Draft PEA has been prepared in accordance with the regulations for implementing the procedural provisions of the National Environmental Policy Act (NEPA), (Public Law 91?190, 42 USC 4321-4347 January 1, 1970), amendments, and VA's Implementing Regulations (38 CFR Part 26). VA will hold a public meeting on Wednesday evening, April 18, 2012, to receive public comments that may be incorporated into the Final PEA. The time and location of the meeting will be forthcoming. Comments on the Draft PEA may also be submitted in writing. The public meeting and comment period are provided to receive public input in accordance with NEPA and Executive Order 11988.

The Draft PEA, as required by law, analyzes areas of community sensitivity in regard to environmental impacts for a variety of resources. The purpose of the Draft PEA is to provide the public with the information required to understand and evaluate the proposed medical center project and provide their input to the decision-making process. Any substantive comments that are received will be addressed in the Final PEA. After the conclusion of the public comment period, a Finding of No Significant Impact or a Notice of Intent to conduct an Environmental Impact Statement will be issued, as appropriate.

The Draft PEA may be viewed on the VA website http://downloads.va.gov/files/CFM-AcqDocs/LouisvilleNEPA/ Paper copies may be reviewed at the Louisville Free Public Library - Westport Branch, located at 8100 Westport Road, Louisville, Kentucky. All public comments are due no later than April 29, 2012. Written comments can be submitted electronically to LouisvilleReplacementHospitalComments@va.gov or by mail to the address below.

For further information and/or a copy of the Draft PEA please contact the Robley Rex VA Medical Center at the following:

Robley Rex VA Medical Center
Director's Office
800 Zorn Avenue
Louisville, KY 40206
Phone: 800-376-8387

Public Comments and Responses
Draft Programmatic Environmental Assessment
Proposed Replacement Louisville VA Medical Center
Louisville, Kentucky

The Draft PEA for the Proposed Replacement Louisville VA Medical Center was published on March 29, 2012 and was made available for public comment, as announced in a Notice of Availability published in the Louisville Courier-Journal between March 30 and April 1, 2012. The public comment period ended April 29, 2012. Copies of the Draft PEA were made available for review at the existing Robley Rex VAMC and at the Louisville Free Public Library – Westport Branch. VA also made the document available for download via the internet. In addition, VA held a public meeting at Kammerer Middle School on April 18, 2012 to briefly summarize the PEA and receive public comment.

The public meeting was well attended; 203 people signed in at public meeting. 28 people provided verbal comments during the meeting; 26 left written comments in the drop box after the meeting.

83 people provided written comments via email or US mail. Two of these comment letters were received after the close of the comment period.

3 local government or quasi-government agencies also provided comments.

In addition, VA received a petition signed by 144 people (93 signatures within the public comment period), mostly residents of the neighborhoods near the Brownsboro Site. Petitioners also sent emails to VA and various Kentucky elected officials. The petition/email requested that VA select the St. Joseph Site for the proposed VAMC and noted that the St. Joseph Site is approximately 3 times larger than the Brownsboro Site for approximately one half of the cost. (It should be noted that this statement does not accurately portray costs for the St. Joseph Site as VA has not negotiated a price).

Many of the responders provided similar comments and many provided multiple comments. The comments that are relevant to the Draft PEA and VA's responses are summarized as follows. The approximate frequency of the comments is also provided (in parentheses); however the frequency numbers are likely to be low because not all comments were specific.

TRAFFIC/TRANSPORTATION COMMENTS

1) Traffic around Brownsboro Site is already bad and will be made worse by the proposed VAMC. (65)

Response:

Under NEPA, potential impacts are identified as either significant, less-than-significant, or no impact. Regarding transportation, an alternative could have a significant effect on infrastructure if it would increase demand over capacity, require a substantial system expansion or upgrade, or if it would result in substantial system deterioration over the current

condition. With respect to an EA, Federal agencies may mitigate potential significant adverse impacts associated with their proposed actions to less-than-significant levels where possible. However, Federal agencies are not required to mitigate existing conditions.

The PEA (Section 3.14) notes that existing traffic in the area of the Brownsboro Site, particularly in at the intersection of Brownsboro Road (US 42) and Old Brownsboro Road (KY 22), is congested and that the additional traffic associated with the proposed VAMC could have a significant adverse effect on traffic in the area. KTC is planning several roadway improvements, including a new slip ramp from I-264 to Old Brownsboro Road and the alteration of acceleration lanes on I-264 at this intersection, that are scheduled to be completed in 2012. Further, the reconfiguration of the I-264/Brownsboro Road interchange, the design phase for which is scheduled to begin in 2013, is intended to improve current and future traffic conditions.

To mitigate the potentially significant impacts associated with the proposed VAMC, VA would consult and work with pertinent Federal, State (KTC), and local (City of Louisville) agencies to achieve roadway improvements at the selected site. Since the publication of the Draft PEA, VA has had additional consultation with the KTC regarding possible improvements at the Brownsboro Site and has conducted additional traffic analyses. Section 3.14 of the PEA has been updated to reflect the additional traffic information. The tiered, site-specific EA (SEA) for the chosen site will provide a detailed description of the roadway improvement mitigation needed to reduce potential unacceptable traffic impacts within the region of influence (ROI) of the proposed VAMC. It is anticipated that implementation of these mitigation measures would reduce the identified impacts to less-than-significant levels. Refer Section 3.14 of the PEA.

2) Will Carlimar Lane (south of Brownsboro Site) be affected/used as an access point for the proposed VAMC? Concern about children in the neighborhood, parked cars along road; don't want people to use it as a cut through to Westport Road. (6)

Response:

No regular VAMC traffic is expected through the surrounding residential neighborhoods. VA may install a gate-controlled, emergency ingress/egress access drive to Carlimar Lane. However, this would not be an entrance/exit for routine traffic; this entrance would be for emergency purposes only. The SEA will provide a detailed description of the improvements for the proposed VAMC.

3) The Draft PEA indicates that the I-264/Westport Road intersection was opened in April 2011 and that the traffic study was conducted using data obtained from February 2011, prior to the opening of the intersection. This is incorrect; the I-264/Westport Road intersection was opened in April 2010. Was traffic study done correctly? (8)

Response:

The Draft PEA misstated the date that the I-264/Westport Road interchange was opened; this has been corrected in the Final PEA. This change affects the discussion of the current traffic conditions and impacts (refer to Section 3.14 of the PEA), but does not affect the traffic study. The March 2012 traffic study used traffic counts collected in February 2011 after the interchange opened, which best reflect current conditions. This traffic study was conducted in accordance with industry standards and methods. In addition, VA conducted a second traffic study in May 2012, which included additional analysis of the potential impacts associated with the proposed VAMC.

4) Why did VA ignore traffic study findings that suggest major traffic issues? (2)

Response:

The Draft PEA included a detailed analysis of the traffic findings and concluded that the proposed VAMC could have significant adverse traffic impacts. The Draft PEA described several potential roadway improvements to mitigate the identified potential traffic impacts. Subsequent to the Draft PEA, VA conducted additional traffic analyses to further evaluate the traffic impacts of the proposed VAMC and options to mitigate any potential significant adverse effects. Refer to Section 3.14 of the PEA.

5) The traffic impact analysis does not appear to include related support services vehicles such as delivery trucks, in-patient visitors, ambulances, etc. (2)

Response:

The estimated visits during the duration of a busy day account for related support services vehicles such as delivery trucks, in-patient visitors, ambulances, etc. Refer to Section 2.2 of the PEA.

6) Did the traffic study account for KTC's planned Right In/Right Out changes to the US 42/Old Brownsboro Road intersection? (1)

Response:

The traffic study included an analysis of the proposed Right In/Right Out changes to the US 42/Old Brownsboro Road intersection and other KTC planned improvements. Refer Section 3.14 of the PEA.

7) There is a conflict of interest – both the site owner and the VA have used the same company for the traffic study. (1)

Response:

URS collected traffic count data for the site owner in February 2011 that was used in the site owner's traffic study and VA's traffic impact analysis. VA retained an independent Louisville-based traffic consultant, BTM Engineering, Inc., to analyze and interpret the traffic data collected by URS and to assess current and future potential traffic conditions. The traffic data collected by URS was independently validated by KTC. VA's traffic consultant generated its own analysis of the data. Traffic impact analyses conducted by the site owner for the previously proposed mixed use development and the proposed VAMC were not used by VA. In addition, subsequent to the Draft PEA, VA retained Oculus, Inc. and Olsson Associates to conduct additional traffic analyses. Oculus and Olsson Associates evaluated the February 2011 traffic count data and found it to be acceptable for use in their independent analysis. Oculus and Olsson Associates also collected additional traffic counts in May 2012 to supplement the 2011 data. No conflict of interest exists.

8) Does the traffic impact analysis adequately address egress from the proposed VAMC at the Brownsboro Site? It appears that the study focuses on ingress only. (1)

Response:

The traffic impact analysis addresses both ingress and egress scenarios for the Brownsboro Site. Refer to Section 3.14 of the PEA.

9) Traffic study does not expand far enough from the Brownsboro Site. It should include the effects on Brownsboro Road west of the Watterson Expressway. It should also be expanded to assess the impacts to the Crossgate community. (2)

Response:

The March 2012 traffic study included peak hour capacity analyses for existing, no-build and build scenarios for intersections within the applicable region of influence of VA's Proposed Action as recommended by KTC. The May 2012 traffic study included additional analysis, including the area west of the Watterson Expressway. Refer to Section 3.14 of the PEA.

10) VA stated the need for 2,400 parking spaces to be shared by 3,700 cars. With these projections it appears that street parking may occur in the adjacent subdivisions at the Brownsboro Site. (1)

Response:

Based on parking calculations, VA anticipates that 2,400 parking spaces would be adequate to accommodate the parking needs of VA staff, patients, and visitors to the proposed VAMC on a busy day. No street parking in adjacent subdivisions is anticipated.

11) How much will it cost to implement the necessary roadway improvements and who will pay for them? (2)

Response:

The cost analysis is not a requirement of NEPA. VA would consult and work with pertinent Federal, State (KTC), and local (City of Louisville) agencies to achieve roadway improvements at the selected site. The SEA would provide a detailed description of the roadway improvements necessary to mitigate potential unacceptable traffic impacts within the ROI of the proposed VAMC.

12) The PEA notes that the proposed VAMC at the Brownsboro Site could have a significant adverse effect on traffic and that these impacts would be mitigated to less-than-significant levels, but does not adequately analyze the traffic issues and does not adequately discuss how the traffic impacts would be mitigated. The PEA states that these analyses would be addressed in the SEA. Why would the VA spend millions of dollars of taxpayer's money to purchase the Brownsboro Site without knowing beforehand that significant impacts can be mitigated? VA should conduct additional studies, including an EIS, before taking further action on the Brownsboro Site. (1)

Response:

Through detailed discussions and analyses, VA concluded that a PEA is the appropriate vehicle for meeting the requirements of NEPA for this proposed new VAMC. Based on the March 2012 VA Traffic Impact Analysis and consultation with KTC, VA concluded that potential significant traffic impacts associated with the proposed VAMC could be mitigated. In May 2012, VA conducted additional traffic analyses in consultation with KTC that included an evaluation of KTC's planned reconfiguration of the I-264/Brownsboro Road interchange and various options to mitigate the potential significant adverse traffic effects associated with the proposed VAMC. This additional analysis indicates that the potential adverse traffic impacts can be mitigated through certain roadway improvements in combination with KTC's planned interchange

reconfiguration. The SEA will provide a detailed description of the roadway improvements needed to mitigate potential unacceptable traffic impacts within the ROI of the proposed VAMC. VA does not believe a NEPA EIS analysis is necessary.

13) There is no good public transportation to the Brownsboro Site. Have there been studies on the impact to Veterans who rely on public transportation? Suggestion to consult with TARC to arrange for better public transportation. (6)

Response:

No studies on the impact to Veterans who rely on public transportation have been completed; however, there are currently several Transit Authority of the River City (TARC) bus stops in the vicinity of the Brownsboro Site. As part of the SEA, VA would consult and work with TARC to ensure that sufficient public transportation is available to the proposed VAMC.

14) Access to the Brownsboro Site would be too limited for a VAMC. The only access would be from the north. (5)

Response:

VA would consult and work with KTC and the City of Louisville to ensure that ingress and egress to the proposed VAMC would be adequate to serve the proposed facility. Site access points would be fully determined as part of the subsequent SEA, concurrent with the site design efforts.

15) The Brownsboro Site area has an inadequate sidewalk system for the proposed VAMC. (1)

Response:

The proposed VAMC would be developed in consonance with local zoning and plans, including pedestrian accessibility. These measures would be fully developed as part of the subsequent SEA, concurrent with the site design efforts.

SITE SELECTION COMMENTS

1) All new VA hospitals are being built in downtown locations. Why not build the VAMC downtown – close to doctors, University facilities? (15)

Response:

The location of future VAMCs are determined based on regional needs and project-specific screening criteria as detailed in Section 2.3 of the PEA. The screening process may or may not include options for development in downtown locations. VA considered a downtown location as part of the NEPA process; however, the downtown location was eliminated from further consideration as detailed in Section 2.3.2 of the PEA.

2) The Draft PEA omits that former mayor, lieutenant governor, University of Louisville, and Courier-Journal recommend that the VAMC be constructed downtown. (1)

Response:

Refer to Site Selection Comment 1 above.

3) Why did VA ignore Veterans desire to keep the VAMC at Zorn Avenue? Other expressions in favor of keeping the VAMC at Zorn Avenue. (13)

Response:

The locations of future VAMCs are determined based on regional needs and project-specific screening criteria as detailed in Section 2.3 of the PEA. The screening process may or may not include options for redevelopment of existing facilities. VA considered the redevelopment of the existing VAMC as part of the NEPA process; however, this option was eliminated from further consideration as detailed in Section 2.3.2 of the PEA. Specific constraints regarding the existing VAMC are detailed in Sections 1.3 and 2.3.2 of the PEA.

4) Discuss and compare costs of property acquisition, transportation improvements, etc. for the various options, including staying at Zorn Avenue. Costs associated with the Brownsboro Site are greater than other options. The St. Joseph Site provides 3 times the space for ½ the price of the Brownsboro Site. (12)

Response:

A cost-comparison analysis of the considered alternatives is not a requirement of NEPA; however, analyses conducted by VA indicated a significant cost savings as a result of the construction of a new VAMC on a relatively undeveloped location (greenfield) versus redevelopment of the existing VAMC or a downtown location. During VA's site selection process, all considerations were presented for decision-makers when determining VA's preferred site options to pursue with due diligence activities presented in this NEPA analysis.

5) Why is VA planning to build the VAMC on a site (Brownsboro Site) that is too small/inadequate for future growth? Will the Brownsboro Site provide adequate space for future Veterans needs 20-50 years from now? What additional expansion would be included in the future? Would the VAMC be expanded onto the surrounding properties in the future through eminent domain? (39)

Response:

Both the Brownsboro Site and the St. Joseph Site meet the minimum VA requirements for the proposed new VAMC (25 developable acres), as detailed in Section 2.3.1 of the PEA.

6) The Brownsboro Site does not possess adequate hotel, retail, and food outlets. (5)

Response:

The Brownsboro Site met the minimum VA requirements for the proposed new VAMC, as detailed in Section 2.3.1 of the PEA. The presence of nearby amenities was one of many factors considered by VA in evaluating site options.

7) Was consideration given to buying the Jewish Hospital (near St. Joseph Site)? (1)

Response:

No proposal or offer was submitted by Jewish Hospital parties. In addition, the Jewish Hospital facility does not appear to meet the minimum VA requirements for a new VAMC.

8) Could the former River Road Country Club property (owned by the City of Louisville) be used in addition to the renovated Zorn Avenue facility to meet VA's needs? (4)

Response:

The former River Road Country Club property (owned by the City of Louisville) is located in a floodplain and does not meet the minimum VA requirements for a new VAMC. In addition, the City of Louisville did not offer this site to VA.

9) Could a new parking garage at the Zorn Avenue facility solve the problem? (4)

Response:

Based on the results of a Feasibility Study prepared by URS SmithGroup in October 2009 on behalf of VA, the addition of a parking structure at the existing VAMC would alleviate some of the current parking issues at the existing VAMC; however, parking shortages is only one deficiency identified at the existing VAMC.

10) In past 15 years, how many VAMCs were constructed in similar densely populated neighborhoods? Where are they located? (1)

Response:

The discussion of other recently constructed VAMCs is not a requirement of NEPA; however, only approximately four VAMCs have been constructed in the last 15 years. The hospital in New Orleans will be constructed on 30 acres in an urban environment; while the hospital in Denver will be constructed on 30.5 acres, and Orlando on 65 acres, have been constructed in similar environments as the Brownsboro and St. Joseph Sites.

11) Veterans and VA staff would be better served if VA would select a site where the VAMC is welcomed, not opposed. (1)

Response:

Comment acknowledged.

12) VA should consider land already owned by the Federal government. (1)

Response:

VA undertook a sequential planning and screening process, seeking reasonable alternatives for the Proposed Action, as detailed in Section 2.3.1.

13) Why didn't VA look for large vacant tracts of lands and then contact the site owners to see if they were available? (1)

Response:

VA undertook a sequential planning and screening process, seeking reasonable alternatives for the Proposed Action, as detailed in Section 2.3.1.

WATER RESOURCES COMMENTS

1) Underground water in Graymoor. Sump pumps run for weeks after a lot of rain. Concerned that hospital at Brownsboro Site will make this worse. (2)

Response:

As required by Executive Orders (EOs) 13514 and 11988, Federal agency projects are required to include designs for sufficient stormwater management so as to not adversely affect the flood elevations or water quantity/quality in receiving waters. Post-project hydrology shall replicate pre-project hydrology through the appropriate engineering design and implementation of a proposed onsite stormwater management system. As such, no significant adverse water resources impacts are anticipated. Refer to Sections 3.6 and 3.10 in the PEA.

2) Has drainage been addressed? (3)

Response:

Refer to Water Resources Comment 1 above.

COMMUNICATIONS COMMENTS

1) It has not been made clear why the Brownsboro Site is preferable. Drawbacks seem numerous. It does not seem that the process has been conducted with transparency or true concern for the needs of Veterans. (3)

Response:

VA conducted a systematic site selection and screening process as detailed in Section 2 of the PEA. Through this process, VA initially identified five alternatives for replacement VAMC, including the Brownsboro Site, the Fegenbush Site, the St. Joseph Site, the Downtown Site, and the existing Zorn Avenue VAMC Site. Based on the screening which involved review and analysis of due diligence results, community and Veteran sentiment and cost estimates, VA determined that the sites that best satisfied VA's needs to provide timely healthcare to Veterans and had the least potential impacts on the surrounding environment were the Brownsboro Site and the St. Joseph Site. These two sites were fully evaluated in the PEA.

VA identified the Brownsboro Site as the preferred site (Preferred Action Alternative) based on various factors such as proximity to existing facilities and healthcare affiliates, accessibility to Veterans, Veteran preferences, proximity to amenities, and certain natural and man-made characteristics. Many of the reasons that the Brownsboro Site was designated as the preferred site are outside the NEPA analysis. In addition, NEPA does not require VA to select the alternative with the least adverse effects.

With regard to transparency, VA has participated in several community meetings and conducted two public meetings (refer to Section 3.18 of the PEA). As required by NEPA, VA also made the Draft PEA available to the public for a 30-day comment period.

2) Please provide the pros and cons for each considered site. (1)

Response:

The screening of the various considered alternatives, including the pros and cons of each is discussed in Section 2.0 of the PEA. Details pertaining to the attributes of both of the Action Alternative sites and the potential impacts of the proposed VAMC at these sites are contained throughout Section 3.0 of the PEA.

3) Share all comments on the Draft PEA with the public. Include comments from previous meetings which have not been shared. Where and when will public have access to public comments? (8)

Response:

This summary of public comments and responses will be made available as part of the Final PEA.

4) Why didn't VA contact more Veterans (about the proposed action)? (1)

Response:

VA issued approximately 45,000 letters to area Veterans asking for their input regarding the proposed new VAMC. In addition, VA worked with the Veterans Service Organization (VSO) to encourage input from area Veterans and encourage attendance by area Veterans at community and public meetings. VA also published numerous press releases via the Louisville Courier-Journal Newspaper, and the existing VAMC, Louisville Courier-Journal, and Crossgate Community internet websites.

5) Will Veterans' input be shared with the public? (1)

Response:

A summary of all public comments, including input received from Veterans, will be made available as part of the Final PEA.

6) Why did VA not have better contact, communication, and feedback with local neighbors? (7)

Response:

As detailed in Communications Comments 1 and 4 above, VA published several press releases via the Louisville Courier-Journal newspaper, and the existing VAMC, Louisville Courier-Journal, and Crossgate Community internet websites. In addition, approximately 25 news articles have been published regarding the proposed new VAMC since 2008.

7) Who is the VA informational contact for those who live in the area? (1)

Response:

Information regarding the proposed VAMC may be obtained from Mr. Bob Morey, Facility Planner, Robley Rex VA Medical Center, 800 Zorn Avenue, Louisville, KY 40206.

8) Once a site is selected, what efforts will be made to involve those living in the area to give input regarding binding elements of construction? (2)

Response:

Once a site (i.e., alternative) is selected and acquired through this programmatic NEPA process, VA will prepare a subsequent SEA to more precisely analyze and evaluate the potential effects of the construction and operation of the proposed VAMC. At this latter point, additional design information will be available upon which to conduct that future environmental effects analysis. VA will incorporate and further develop the mitigation, avoidance, and management measures identified in the Draft PEA into that future design

process and tiered NEPA analysis to ensure environmental effects would be maintained at less-than-significant levels.

As with the Draft PEA, VA will publish and distribute the Draft SEA for a 30-day public comment period as announced by a Notice of Availability (NOA) published in the Louisville Courier-Journal.

9) Will public have opportunities to meet with VA again to gain info regarding timelines, design, and landscaping plans? (1)

Response:

See Communications Comment 8.

10) Public meeting concerns – audio problems, format/presentation (6)

Response:

Comment acknowledged.

SOCIOECONOMICS / ENVIRONMENTAL JUSTICE COMMENTS

1) Veteran users are not geographically dispersed. Recruiting in Jefferson County is in the Southwest, West, and Central, where minority and low-income populations are located, not in high-income Northeast Jefferson County where proposed the VAMC would be located. Investments and benefits of the new VAMC should be targeted to existing recruiting centers, closer to low-income and minority populations. (1)

Response:

No potential offerors from these areas provided submissions that met the minimum VA requirements for the proposed new VAMC, as detailed in Section 2.3 of the PEA. In addition, VA selects the locations for future VAMCs to include areas within a specific range (i.e., radius) so that services are available to broader areas and not limited to specific areas based on specific factors, such as density of recruiting stations.

2) Why doesn't the PEA include an analysis of the local neighborhood and community? Federal Financial Institutions Examination Council data is available that indicates that the residential population around the Brownsboro Site is much denser than that near the St. Joseph Site. The Brownsboro Road Site is surrounded by 5 Metropolitan Statistical Area (MSA) tracts with a total population estimated from 25,000 to 32,000 and 1-4 family units of 9,000-11,000. The St. Joseph Site includes only 1 MSA tract which includes a population of 7,476 and 1-4 single family units of 2,536. No other large hospital in Louisville backs up into a single-family residential community like what is being proposed. Why would VA choose to construct a massive facility in such a densely populated area which directly borders single family homes while the St. Joseph Site is in a much less populated are with no single family homes bordering the site? The PEA does not adequately address potential significant adverse impacts to the surrounding residential area.(1)

Response:

Section 3.0 of the PEA includes an analysis of the local neighborhood and community from various perspectives, including aesthetics, noise, land use, socioeconomics, community services, transportation and parking, and environmental justice. The location of future VAMCs are determined based on regional needs and project-specific screening criteria. VA undertook a sequential planning and screening process, seeking reasonable alternatives for the Proposed Action, as detailed in Section 2.3.1 in the PEA.

AESTHETICS COMMENTS

1) Build a brick wall, flanked by trees, between the VAMC and the Crossgate community. (4)

Response:

The design process for the proposed new VAMC is in the beginning stages. VA anticipates that features such as berms and landscaping, as well as sensitive site design, will minimize potential aesthetic impacts, such as increased light and altered views. Specific aesthetics management measures will be detailed in the future SEA. General aesthetics management measures are provided in Section 3.2 of the PEA.

2) Concerned about lighting impacts at the Brownsboro Site. (5)

Response:

See Aesthetic Comment 1.

3) Concerned about aesthetics impacts at the Brownsboro Site. (1)

Response:

See Aesthetic Comment 1.

4) Concerned about the loss of green space at the Brownsboro Site. (1)

Response:

See Aesthetic Comment 1.

5) How can VA accommodate maintaining Old Brownsboro Road as a Scenic Corridor as designated by the City of Louisville? (1)

Response:

See Aesthetic Comment 1.

6) The Draft PEA states that the Brownsboro Site was rezoned as Planned Development in anticipation of a mixed use development, including a six-story hotel and that, as such, a similar sized VAMC likely would not be considered a significant adverse aesthetic impact to the area landowners. This statement is false. The proposed mixed use development included high end residences and was designed to complement the surrounding community. It incorporated greenspace, trees, walking paths, and was to include high end retail shops and restaurants. Although the development

included a hotel, which many opposed, it was located on the back and north side of the property along I-264, not in the middle of the site such as the proposed VAMC. (1)

Response:

The Final PEA has been revised to reflect surrounding landowner sentiment regarding aesthetics impacts of the proposed VAMC. The current zoning designation for the Brownsboro Site is Planned District Development (PD), which is designed to promote diversity and integration of uses and structures in a planned development through flexible design standards. The VAMC development would be generally consistent with local zoning.

VA will work with the City of Louisville during the design of the VAMC to integrate features set forth in the Louisville Metro Development Code, to the extent practical, so that the proposed new VAMC would be designed and constructed consistent with other area developments, as detailed in Section 3.9 of the PEA. These measures would be fully developed as part of the subsequent, site-specific SEA, concurrent with the site design efforts.

AIR QUALITY COMMENTS

1) Concerned about pollution and dust from the Brownsboro Site. (8)

Response:

The design process for the proposed new VAMC is in the conceptual stage. Specific management measures, including air quality, will be detailed in the future SEA. General air quality management measures are provided in Section 3.3 of the PEA.

NOISE COMMENTS

1) Concerned about noise impacts. (4)

Response:

The design process for the proposed new VAMC is in the conceptual stage. Specific management measures, including noise management, will be detailed in the future SEA. General noise management measures are provided in Section 3.8 of the PEA.

2) Proposed start time for construction is 7 am, recommend a later start time due to adjacent residents at the Brownsboro Site. (1)

Response:

The design process for the proposed new VAMC is in the conceptual stage. Specific management measures, including noise management, will be detailed in the future SEA. General noise management measures are provided in Section 3.8 of the PEA.

LAND USE COMMENTS

1) There are more schools close to the Brownsboro Site than listed in the PEA. Concerns about impacts to schools. (7)

Response:

The Final PEA has been revised to reflect the location of additional nearby schools. Details pertaining to area schools and general management measures are detailed in the Final PEA. Specific management measures will be detailed in the future Draft SEA.

2) PEA does not account for the dense residential population and retail within 2 miles of the Brownsboro Site. (2)

Response:

The current zoning designation for the Brownsboro Site is Planned District Development (PD), which is designed to promote diversity and integration of uses and structures in a planned development through flexible design standards. In addition, no adverse onsite building function and architecture impacts are anticipated. The current owners of the Brownsboro Site have communicated to the surrounding residential neighborhoods of their intent to develop the Brownsboro Site as a mixed-use development, with a mixture of commercial and residential buildings, including a six-story hotel identified during multiple design charette meetings. In addition, the mixed-use development has been approved by pertinent State and local agencies. Refer to Section 3.9 of the PEA for additional details.

3) The Brownsboro Site area is mostly residential. The VAMC would be inconsistent (and incompatible) with the surrounding land use. (13)

Response:

Refer to Land Use Comment 2.

4) The VAMC would negatively impact property values in the Brownsboro Site area and may increase crime rates. (2)

Response:

Refer to Land Use Comment 2.

GENERAL COMMENTS

1) Why are adverse effects on neighbors not being considered? (8)

Response:

The consideration of adverse effects on the surrounding environment is a primary purpose of the NEPA process. Specific adverse effects and the mitigation, avoidance, or management measures required to reduce adverse impacts to less-than-significant levels are detailed throughout Section 3.0 of the PEA.

2) Opposed to the Brownsboro Site for the VAMC. (68)

Response:

Comment acknowledged.

3) The Brownsboro Site is the best choice for the VAMC. (23)

Response:

Comment acknowledged.

4) The St. Joseph Site is the best choice for the VAMC. (24)

Response:

Comment acknowledged.

5) The St. Joseph Site is too isolated for the VAMC. (6)

Response:

Comment acknowledged.

6) Opposed to the St. Joseph Site for the VAMC. (1)

Response:

Comment acknowledged.

7) The PEA does not provide backup to support the conclusion that the Brownsboro Site and the St. Joseph Site are the only reasonable alternatives; the Fegenbush Site is also reasonable. (1)

Response:

Although considered in the initial alternatives, the Fegenbush Site was eliminated from further consideration. Due to the absence of local amenities, distance from available local utilities, and distance from the nearest major highway, the Fegenbush Site did not meet the VA requirements for the proposed new VAMC as well as the Brownsboro and St. Joseph Sites and was eliminated from further consideration. Section 2.0 of the PEA has been revised to provide more detail regarding the elimination of the Fegenbush Site.

8) The Draft PEA should be amended and an EIS prepared to address the omission of the higher taxpayer cost associated with the Brownsboro Site and the error in the conclusion that the Brownsboro and St. Joseph Sites are the only reasonable sites. (1)

Response:

Through detailed discussions and analyses, VA concluded that a PEA is the appropriate vehicle for meeting the requirements of NEPA for this proposed new VAMC. The discussion of a cost-comparison analysis is not a requirement of NEPA; however, analyses conducted by VA indicated a significant cost savings as a result of the construction of a new VAMC on a relatively undeveloped location (greenfield) versus redevelopment of the existing VAMC or a downtown location. Other sites were adequately evaluated and did not meet the VA requirements for the proposed new VAMC as well as the Brownsboro and St. Joseph Sites; as such, these sites were eliminated from further consideration. See Section 2.0 of the PEA.

9) Based on the public meeting, VA seems more concerned about Indiana Bats and Running Buffalo Clover at the St. Joseph Site (than traffic/other issues at the Brownsboro Site). (1)

Response:

All sites were considered on level footing using the same screening criteria. Various effects were identified and addressed with the required level of effort throughout the NEPA process.

Specific effects and the mitigation, avoidance, or management measures required to reduce impacts to less-than-significant levels are detailed throughout Section 3.0 of the PEA.

10) March 3, 2011 Louisville Downtown Development Corporation letter of support for Downtown Site. (1)

Response:

Letter acknowledged.

11) Security issues were not addressed in the PEA. The Brownsboro Site is very accessible from the Watterson Expressway. Does this present a security issue for the proposed VAMC? (2)

Response:

No increased security issues are anticipated in associated with the proposed VAMC. The design process for the proposed new VAMC is in the beginning stages. Specific management measures, including security management, will be detailed in the future SEA.

12) Has VA already purchased the Brownsboro Site? (1)

Response:

No. VA will not purchase any site until the NEPA PEA process has been completed, including the preparation of the Finding of No Significant Impact.

13) Many doctors donate free time to Veterans at the existing VAMC on Zorn Avenue. Has anyone surveyed them to see if they are willing to travel to the Brownsboro Site? (3)

Response:

The purpose of the Proposed Action is to provide a replacement full-service hospital, or VAMC, (inpatient and outpatient) of sufficient capacity to service the current and projected future healthcare needs of US Veterans requiring services from the Louisville VAMC catchment area. The Proposed Action is needed to replace the existing Louisville VA medical facilities that have reached the end of their serviceable lives. The conditions at the existing facilities, as well as the configuration of the existing facilities, are inadequate to effectively and efficiently meet the needs of VA's healthcare mission in the region. Refer to Section 1.3 of the Draft PEA.

14) What will happen to the Zorn Avenue facility if a new VAMC is constructed elsewhere? (2)

Response:

The disposition of the current Louisville VAMC is unknown at this time, and would be the subject of a future feasibility study and analysis. Existing VAMC operations would continue until the new VAMC is operational in approximately 2018 and then would be transferred to the new facility. At the time operations are transferred to the new VAMC, the existing VAMC would continue to be used by VA for other purposes, would be used by other undefined entities for undefined purposes, or would be decommissioned; however, the level of decommissioning of the existing VAMC is unknown at this time. Refer to Section 2.2 of the PEA.

15) If VA is still in the planning stage, how will it be held accountable to promises and assurances it makes? (1)

Response:

Under the NEPA implementing regulations, VA will mitigate potential significant adverse effects to less-than-significant levels where possible. Details regarding the proposed VAMC development, including site-specific design information and proposed mitigation measures, will be detailed in the SEA once a site is selected and acquired.

16) The process for selecting a site for the VAMC has taken too long. VA needs to make a decision and build the VAMC soon. (5)

Response:

Comment acknowledged.

17) The proposed VAMC has been presented as a minimum 800,000 square foot, 110-bed facility. However, it has also been said to be a 1,200,000 square foot facility with up to 250 beds. What is the maximum size? The PEA impact analysis by VA has been minimized using the smaller-sized facility. The actual impacts will be greater. (2)

Response:

VA's initial planning for the replacement VAMC has been based on a new 800,000 square foot, 110-bed facility. The design process for the proposed new VAMC is in the beginning stages, which may ultimately result in a somewhat larger facility. Although the size of the final VAMC design may include more than 800,000 square feet, it is not anticipated that the VAMC will have more than 110 beds. Any adjustments in size as a result of the design efforts will be included as the space plan is finalized during master planning, as a part of the subsequent SEA.