

January 20, 2026

The Honorable David J. Smith, M.D.
Acting Director
Defense Health Agency
7700 Arlington Blvd
Suite 5101
Falls Church, VA 22042

Dear Acting Secretary Smith,

We are deeply concerned about the inclusion of Eisenhower Army Medical Center (EAMC) at Fort Gordon in Georgia, on a list of facilities set to be downgraded to a clinic. As Members representing districts across Georgia and South Carolina, with over 20 military installations, our constituents and their dependents rely on consistent access to quality care.

Our offices have received multiple inquiries and reports of departments, staffing, and services at EAMC being severely reduced. There is no equal military hospital within 300 miles, and our region experiences capacity issues and a lack of TRICARE-approved providers.

There are additional concerns, due to the sensitive nature of servicemember medical records, with regard to cybersecurity and infrastructure of private networks, which are regularly targeted by our adversaries. Additionally, with operations in SOUTHCOM, EAMC serves an important role in logistics and is integral to military readiness.

EAMC has consistently been ranked among the top military health institutions serving our Nation. President Trump has prioritized strengthening and rebuilding our military infrastructure and has directed a comprehensive approach to improving the quality of life and accessibility to services for those who wear the uniform. We fail to see how the effective closure of a respected facility serving an entire region furthers this goal.

Pursuant to Section 714 in the FY26 National Defense Authorization Act, any changes in the scope of services must be preceded by assessments of impact and approval.

We look forward to a prompt response from the Defense Health Agency regarding the following:

1. Has the required assessment been completed with input from branches to assess the full scope and impact of such a reduction in services? If so, please provide the results of the assessment.
2. Has the Surgeon General provided an endorsement that any modification to services at EAMC would have no effect on the training or readiness of military medical personnel in the military department?

3. Has Chairman of the Joint Chiefs of Staff provided an endorsement that any modification to EAMC would have no effect on operational requirements of the Armed Forces?
4. Given ongoing military operations across the SOUTHCOM areas of responsibility, what plans has the Defense Health Agency developed to offset reduced medical capacity and maintain adequate casualty care and surge support during contingency operations?
5. Have fewer doctors been assigned to the hospital and has the Defense Health Agency overseen any efforts to reduce, redirect, or retire providers at EAMC since the announcement of the planned reduction in services?

We are grateful to represent servicemembers and their families who face unique and complex needs due to their service. We look forward to a comprehensive response within 30 calendar days.

Sincerely,



Joe Wilson
Member of Congress



Rick W. Allen
Member of Congress



Sheri Biggs
Member of Congress



Austin Scott
Member of Congress