



June 2022

GUANTÁNAMO BAY

Accessing Detainee Medical Records as Part of Military Commissions' Proceedings

GAO Highlights

Highlights of [GAO-22-105810](#), a report to congressional committees

Why GAO Did This Study

Since 2002, the U.S. has operated military detention facilities at Naval Station Guantánamo Bay (NSGB) Cuba. Military commissions' proceedings were first established in 2001 to try non-U.S. citizens who aided, abetted, or conspired to commit acts of terrorism against the U.S. However, detainee defense teams have cited concerns about the completeness of detainee medical records and their timely access to them as part of military commissions' proceedings. These defense claims have been disputed by the prosecution.

House Report 116-120 included a provision for GAO to examine the policies at NSGB related to detainee medical records and their interaction with the military commissions' process. This report describes (1) federal law and DOD's policies and regulations governing the access to detainee medical records; (2) DOD's process for making detainee medical records available; and (3) DOD's efforts to decrease the classification of detainees' medical records within the context of military commissions' proceedings. Additionally, GAO has an ongoing review assessing the policies and procedures for providing health care to detainees and challenges associated with providing care.

GAO reviewed policies and procedures related to detainee medical records at NSGB from fiscal years 2015 through 2021. GAO also interviewed officials from relevant DOD organizations.

GAO received technical comments from DOD and incorporated them as appropriate. GAO is not making recommendations.

View [GAO-22-105810](#). For more information, contact Brenda S. Farrell at (202) 512-3604 or FarrellB@gao.gov.

June 2022

GUANTÁNAMO BAY

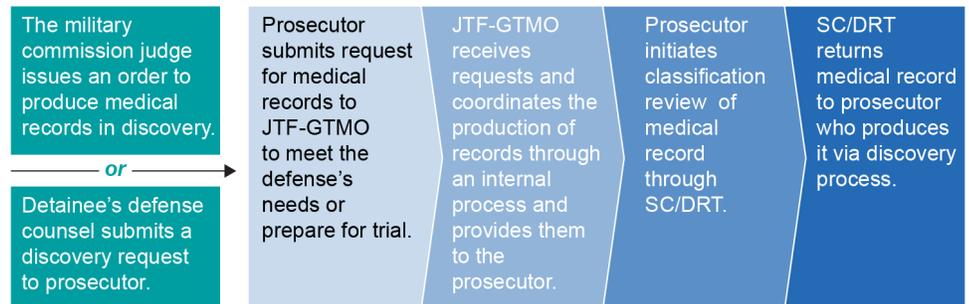
Accessing Detainee Medical Records as Part of Military Commissions' Proceedings

What GAO Found

The Military Commissions Act of 2009 provides the statutory basis for the military commissions' process and states that the defense counsel shall have a reasonable opportunity to obtain witnesses and other evidence as provided in regulations prescribed by the Secretary of Defense. The Act also requires the disclosure of exculpatory evidence to the defense from the prosecution, as soon as practicable. DOD's Manual for Military Commissions establishes procedures for the defense to have access to evidence such as the medical records of the accused as part of the discovery process. The discovery process for obtaining access to medical records applies only to detainees who have charges pending before a military commission. The determination of whether information is subject to disclosure initially rests with the prosecution and, if disputed by the defense, is ultimately decided by the military judge, according to DOD officials. The duty to provide discovery is continuous throughout the military commissions' proceeding.

DOD has established multiple steps and layers of review in its process for making records available to the prosecution and defense as part of military commissions' proceedings (see figure). These steps are intended to ensure that relevant law and regulations governing pre-trial discovery and protection of classified information are adhered to, according to DOD officials. The medical records request process is typically initiated when the defense counsel submits a discovery request to the prosecutor or a military commissions' judge issues an order to produce detainee medical records. According to DOD officials, when the prosecution requests detainee medical records for the purposes of a military commission, this initiates a process of an internal request for information within Joint Task Force Guantanamo Bay. Once the process of the internal request for information is complete, the copies of a detainee's medical records are provided to the prosecution, which is responsible for ensuring that the records are reviewed by the Security Classification/Declassification Review Team and redacted, as appropriate. Under current procedures, detainee medical records are kept at a variety of classification levels and the declassification of those medical records is an essential step in producing detainee medical records as part of military commissions' proceedings.

Department of Defense Medical Records Release and Production Process



JTF-GTMO Joint Task Force Guantanamo
SC/DRT Security Classification/Declassification Review Team

Source: GAO analysis of Department of Defense guidance. | GAO-22-105810

Contents

Letter		1
	Background	3
	Federal Law and DOD Guidance for Accessing Detainee Medical Records during Military Commissions' Proceedings	6
	DOD's Processes for Providing Detainee Medical Records	7
	DOD Has Taken Steps to Declassify Detainee Medical Records	10
	Agency Comments	12
Appendix I	GAO Contact and Staff Acknowledgments	14
Figures		
	Figure 1: Department of Defense (DOD) Organizations Responsible for Military Commissions' Proceedings	5
	Figure 2: Department of Defense Medical Records Release Process as Part of Military Commissions' Proceedings	8
	Figure 3: Department of Defense Medical Records Production Process	9

Abbreviations

CIA	Central Intelligence Agency
CUI	Controlled Unclassified Information
DOD	Department of Defense
HVD	High Value Detainee
JTF-GTMO	Joint Task Force Guantánamo
MCA	Military Commissions Act
Non-HVD	Non-High Value Detainee
NOFORN	Not Releasable to Foreign Nationals
NSGB	Naval Station Guantánamo Bay
ORCON	Originator Controlled
SC/DRT	Security Classification/Declassification Review Team
TS	Top Secret

This is a work of the U.S. government and is not subject to copyright protection in the United States. The published product may be reproduced and distributed in its entirety without further permission from GAO. However, because this work may contain copyrighted images or other material, permission from the copyright holder may be necessary if you wish to reproduce this material separately.



June 28, 2022

Congressional Committees

Since January 2002, the U.S. has operated military detention facilities at its Naval Station in Guantánamo Bay (NSGB), Cuba to detain and prevent individuals accused of terrorism and war crimes from returning to the battlefield. According to DOD officials, there have been nearly 800 detainees held at NSGB since 2002; however, as of April 2022, only 37 detainees remained. Military commissions' proceedings were first established at NSGB in 2001 to try non-U.S. citizens who aided, abetted, or conspired to commit acts of terrorism against the U.S.¹

Detainees' defense teams have cited concerns about the completeness of and timely access to detainee medical records as part of military commissions' proceedings. Detainee defense teams also have noted that there is a lack of transparency in the detainee medical record request process as part of military commissions' proceedings. Both of these defense claims have been disputed by the prosecution.

We have previously reported on various topics related to the detention operations at NSGB and the military commissions' proceedings. In 2019, we reviewed the feasibility of expanding access to military commissions' proceedings that are open to the public.² We recommended that DOD identify and analyze the risks associated with potential options for expanding public access to these proceedings, and develop a strategy, as appropriate, for how it will meet its public access goals with the expected increase in public interest. DOD concurred with this recommendation, but, as of January 2022, DOD had not implemented it.

In 2012, we identified factors to be considered in the event that restrictions were lifted and Guantánamo Bay detainees were transferred to the U.S.³ We found that several factors would need to be considered,

¹As of April 2022, five detainees had been convicted before a military commission and 10 detainees had ongoing cases before a military commission, according to DOD officials.

²GAO, *Military Courts: DOD Should Assess the Tradeoffs Associated with Expanding Public Access to and Information about Terrorism Trials*, [GAO-19-283](#), (Washington, D.C.: Feb. 12, 2019).

³GAO, *Guantánamo Bay Detainees: Facilities and Factors for Consideration If Detainees Were Brought to the United States*, [GAO-13-31](#), (Washington, D.C.: Nov. 14, 2012).

including policies and procedures for housing the detainees and ensuring the safety of facility personnel, the detainees, and the general public. We did not make any recommendations as the Department of Justice stated at that time that they had no plans to transfer detainees to the U.S.

House Report 116-120 accompanying a bill for the National Defense Authorization Act for Fiscal Year 2020 included a provision for us to examine the policies at NSGB related to detainee medical records and their interaction with the military commissions' process.⁴ This report describes (1) federal law and DOD's policies and regulations governing the access to detainee medical records; (2) DOD's process for making detainee medical records available; and (3) DOD's efforts to decrease the classification of detainees' medical records within the context of pretrial discovery in military commissions' proceedings. Additionally, in response to this same mandate, we have an ongoing review assessing the policies and procedures for providing health care to detainees, including training provided to medical providers, and any challenges to providing this care. We expect to issue the final report in late 2022.

To address our objectives, we reviewed policies and procedures related to detainee medical records at NSGB from fiscal years 2015 through 2021. While there are several ways detainees and their representatives can request access to their medical records, we limited the scope of our review to detainee access to medical records as part of military commissions' proceedings.⁵ Specifically, we reviewed military commissions' court orders related to discovery⁶; the Military Commissions Act of 2009 (MCA)⁷ and the 2019 Manual for Military Commissions,⁸ as well as DOD guidance.⁹ We also reviewed DOD's report to Congress on

⁴H.R. Rep. No. 116-120 at 208 (2019).

⁵Medical records may also be requested by detainees and their representatives by citing the Freedom of Information Act or during habeas corpus litigation.

⁶In general, discovery refers to the process that provides the accused and defense counsel an opportunity to obtain evidence and witnesses during a military commission proceeding.

⁷The Military Commissions Act of 2009, Pub. L. No. 114-84, §§ 1801-1807 (2009) and codified at 10 U.S.C. § 948a, et seq.

⁸Department of Defense, *Manual for Military Commissions 2019 Edition* (May 2, 2019).

⁹Examples of DOD guidance include Department of Defense Instruction 2310.08, *Medical Program Support for*

detainee medical records, and interviewed officials from the Office of the Secretary for Defense, U.S. Southern Command, NSBG, Joint Task Force Guantánamo Bay (JTF-GTMO), detainee defense teams, Office of the Chief Prosecutor, and non-governmental organizations.

We conducted this performance audit from August 2019 to June 2022 in accordance with generally accepted government auditing standards.¹⁰ Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Background

The mission of caring for the health and well-being of the detainees rests with U.S. Southern Command's JTF-GTMO and its Joint Medical Group, with support from the Naval Station Hospital Guantánamo Bay. According to DOD officials, service members, civilian employees, and contractors support detention operations at NSGB — to include Joint Medical Group personnel. As part of providing medical care to detainees at NSGB, DOD is required by instruction to maintain accurate and complete medical records on all of the detainees.¹¹ Copies of these medical records can be requested by the detainee or their designated legal representatives, such as their defense counsel, during military commissions' proceedings. These medical records may also be utilized as evidence by the prosecution or defense during military commissions' proceedings. Such requests are governed by the legal and procedural rules that pertain to pretrial discovery; for example in 2018, a military judge granted a defense motion that the government must provide Mr. Hawsawi and his defense counsel all of his medical records for the time he was in Central

Detainee Operations, (Sept. 5, 2019) (Change 1, Aug. 25, 2021) and Department of Defense Memorandum, *Access to Detainee Medical Records by the Office of Military Commissions* (May 2, 2008).

¹⁰This work was suspended from March 2020 to October 2021 due to the COVID-19 pandemic.

¹¹Department of Defense Instruction 2310.08, *Medical Program Support for Detainee Operations*, (Sept. 5, 2019) (Change 1, Aug. 25, 2021).

Intelligence Agency (CIA) custody.¹² According to the Military Judge's order, the defense asserted that summaries of medical records could not explain the origin of Mr. Hawsawi's injuries or reveal how the application of enhanced interrogation techniques led to his injuries. Medical records may also be requested by detainees and their representatives by citing the Freedom of Information Act¹³ or during habeas corpus litigation¹⁴.

The Military Commissions Act of 2009 (MCA) establishes procedures governing the use of military commissions to try alien unprivileged enemy belligerents engaged in hostilities against the U.S. for violations of the law of war and other offenses.¹⁵ The MCA defines an unprivileged enemy belligerent as a person who has engaged in hostilities against the U.S. or its coalition partners; has purposefully and materially supported hostilities against the U.S. or its coalition partners; or was part of al Qaeda at the time of the alleged offense. While the MCA also provides protections for the accused individuals undergoing trial (the accused) similar to rights afforded to defendants in a federal criminal trial, the MCA is more closely aligned with military court-martial practice.¹⁶ For example, the MCA states that procedures for military commissions are based upon the procedures for trial by general courts-martial under the Uniform Code of Military Justice, Chapter 47 of the U.S. Code, except for certain provisions such as provisions related to speedy trial and pretrial hearings or investigations.

¹²United States versus Khalid Shaikh Mohammad, Walid Muhammad Salih, Mubarak Bin 'Attash, Ramzi Bin Al Shibh, Ali Abdul Aziz Ali, Mustafa Ahmed Adam, Al Hawsawi, Military Judge Ruling, AE-4191 (July 30, 2018). The Military Judge denied the defense motion to compel the government to provide medical records that are "complete and unredacted", however, the judge ordered the government to provide each accused with all their medical records compiled during their time in CIA custody either through discovery or by judicially approved summaries or substitutions.

¹³See 5 U.S.C. § 552 generally referred to as the Freedom of Information Act.

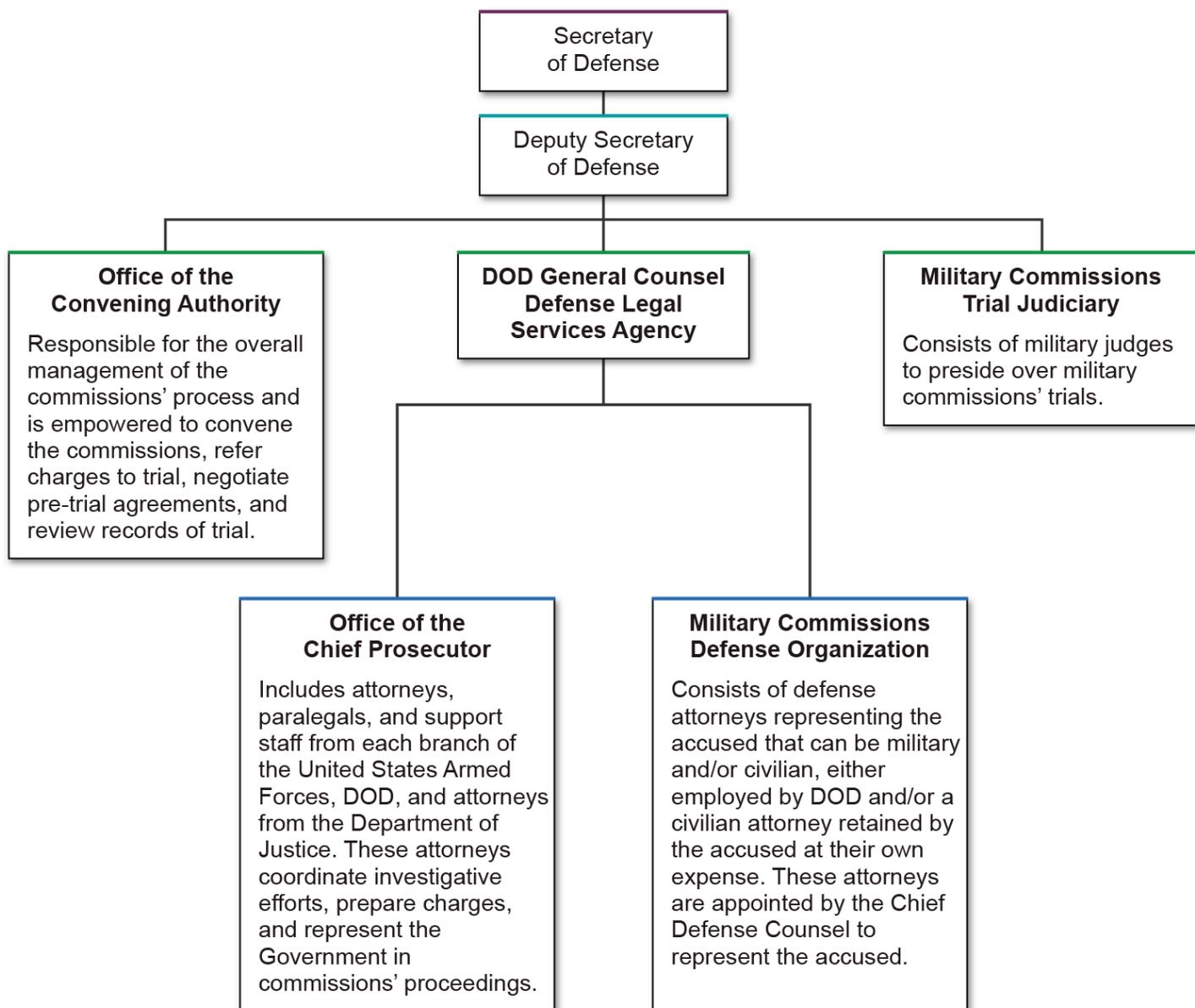
¹⁴See 28 U.S.C. § 2241 which recognizes the power of the judiciary to review a petition for a writ of habeas corpus seeking judicial review of confinement or detention. The U.S. Supreme Court has described the writ of habeas corpus as a means of reviewing the legality of Executive detention. *INS v. St. Cyr*, 533 U.S. 289, 301 (2001).

¹⁵The Military Commissions Act of 2009, Pub. L. No. 114-84, §§ 1801-1807 (2009) and codified at 10 U.S.C. § 948a, et seq.

¹⁶For a chart comparing selected military commissions' rules under the Military Commissions Act of 2009, as amended, to the corresponding rules that apply in federal court, see Congressional Research Service: *Comparison of Rights in Military Commission Trials and Trials in Federal Criminal Court* (Washington, D.C.: Mar. 21, 2014).

There are a number of DOD organizations responsible for conducting the commissions' proceedings and each has separate functions and responsibilities (see fig. 1).

Figure 1: Department of Defense (DOD) Organizations Responsible for Military Commissions' Proceedings



Source: GAO analysis of information from Department of Defense (DOD) officials. | GAO-22-105810

Federal Law and DOD Guidance for Accessing Detainee Medical Records during Military Commissions' Proceedings

The MCA provides the statutory basis for the military commissions' process and states that the defense counsel shall have a reasonable opportunity to obtain witnesses and other evidence as provided in regulations prescribed by the Secretary of Defense. In addition, the MCA requires the disclosure of exculpatory evidence to the defense from the prosecution, as soon as practicable.¹⁷ The MCA states that exculpatory evidence is any evidence that reasonably tends to either negate the guilt of the accused or reduce the degree of guilt of the accused with respect to an offense charged. The evidence may include medical records of detainees. As of September 2021, in at least two military commissions' cases, military judges have issued orders related to defense access to detainee medical records.¹⁸ For example, in *United States v. Hadi Al-Iraqi*, the military judge granted the defense request for expedited production of the accused's medical records. However, according to DOD, there are no known instances in which a detainee has received full and complete medical records. In accordance with law and governing policy, some level of redaction is applied to these records prior to receipt by the detainee. According to DOD officials, the detainee will receive a redacted version or an unclassified summary or substitution of their medical records.

DOD's Manual for Military Commissions establishes procedures for the defense to have access to evidence such as the medical records of the accused as part of the discovery process.¹⁹ The discovery process for obtaining access to medical records applies only to detainees who have charges pending before a military commission. The Manual states that at the request of the defense counsel after charges are referred, the United States Government shall permit the defense counsel to examine any of the results or reports of physical or mental examinations of the detainee as well any scientific tests or experiments. These records must be in possession, custody, or control of the government, the existence of which must be known (or by the exercise of due diligence may become known) to the prosecutor, and must be material to the preparation of the defense or intended for use by the prosecutor as evidence at trial.

¹⁷Specifically, 10 U.S.C. § 949j.

¹⁸As of September of 2021, according to DOD, five detainees had been convicted and were either serving their sentence or were awaiting sentencing and 10 detainees had charges pending before a military commission.

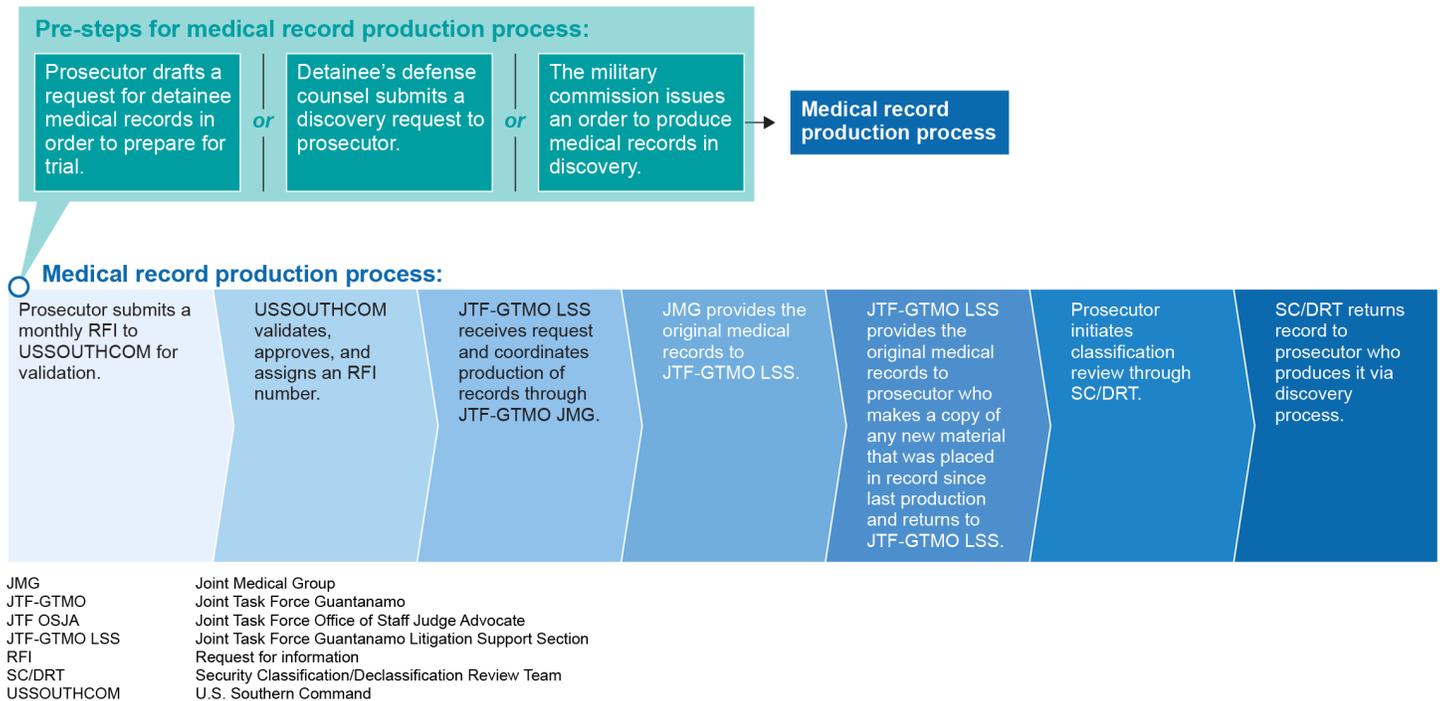
¹⁹Department of Defense, *Manual for Military Commissions 2019 Edition* (May 2, 2019), Rule 701.

The determination of whether information satisfies this legal standard begins with the exercise of prosecutorial discretion and judgment and, if disputed by the defense, is decided by the military judge. The duty to provide discovery is continuous throughout the military commissions' proceeding. In other words, if at any time prior to or during the proceeding a party discovers additional material subject to disclosure under the rule, that party must promptly notify the other party or the military judge of the existence of that material.

DOD's Processes for Providing Detainee Medical Records

DOD has established multiple steps and layers of review in its process for reviewing detainee medical records and making them available to the prosecution and defense as part of military commissions' proceedings. These steps are intended to ensure that the law and regulations governing pre-trial discovery and disclosure of classified information are adhered to, and to further ensure that privileged information from a detainee/patient is not inadvertently disclosed to the prosecution. According to DOD officials, the three events that could trigger the medical record production process are (1) the prosecutor drafts a request for detainee medical records in order to prepare for trial; (2) the defense counsel submits a discovery request to the prosecutor; or (3) a military commission's judge issues an order to produce detainee medical records. Figure 2 describes DOD's medical records release process for producing detainee medical records as part of military commissions' proceedings.

Figure 2: Department of Defense (DOD) Medical Records Release Process as Part of Military Commissions' Proceedings



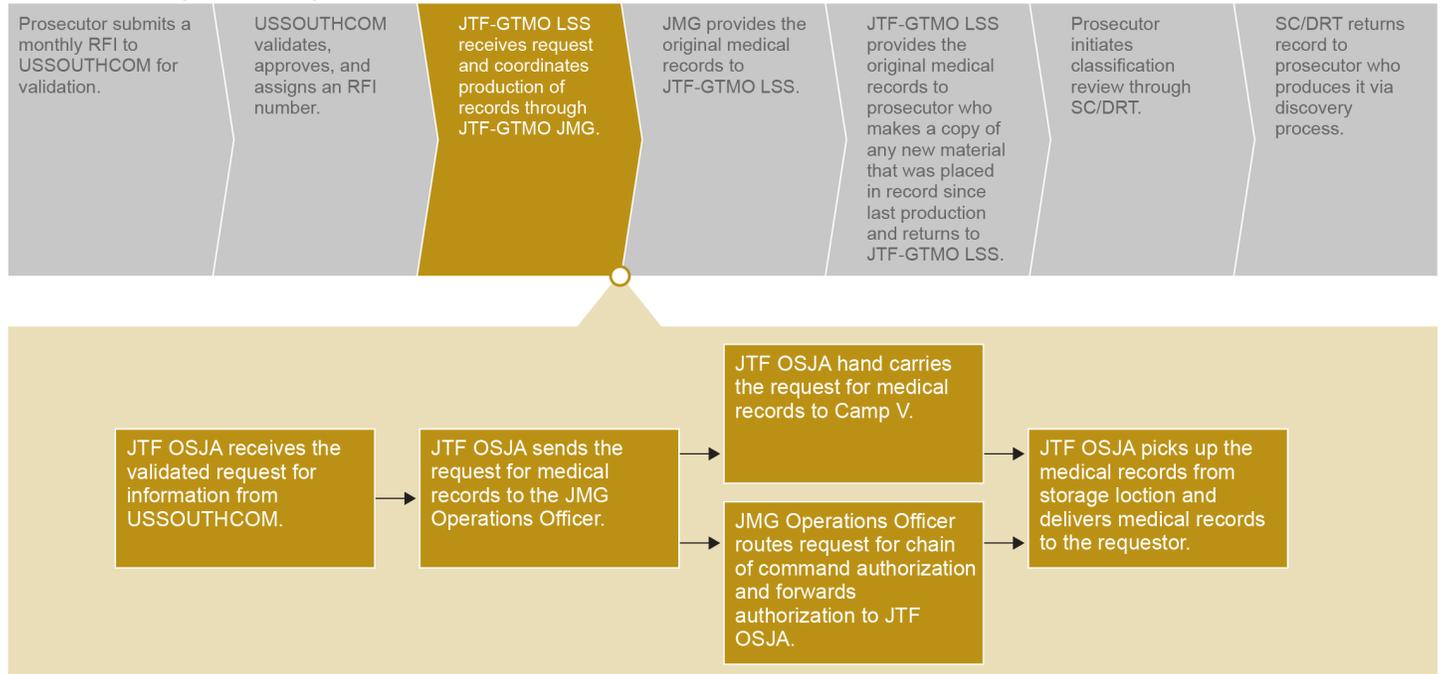
Source: GAO analysis of Department of Defense guidance. | GAO-22-105810

According to DOD officials, when the prosecution requests detainee medical records for the purposes of a military commission, this initiates a process of an internal request for information within JTF-GTMO. Once the process of the internal request for information is complete, the copies of a detainee's medical records will be provided to the prosecution, which is responsible for ensuring that the records are reviewed by the Security Classification/Declassification Review Team (SC/DRT) and redacted, as appropriate.²⁰ The medical records then are provided to the defense. This process, including JTF-GTMO's internal process for producing medical records as part of military commissions' proceedings, is shown below in figure 3.

²⁰The SC/DRT consists of the original classification authorities from DOD components and commands. This neutral entity has the authority to classify and declassify information produced by DOD, to designate information produced by DOD that, pursuant to Military Commission Rules of Evidence 505 and 506 should be protected from public or other unauthorized disclosure and to authorize the use of such information in legal proceedings.

Figure 3: Department of Defense (DOD) Medical Records Production Process

Medical record production process:



JMG Joint Medical Group
 JTF-GTMO Joint Task Force Guantanamo
 JTF OSJA Joint Task Force Office of Staff Judge Advocate
 JTF-GTMO LSS Joint Task Force Guantanamo Litigation Support Section
 RFI Request for information
 SC/DRT Security Classification/Declassification Review Team
 USSOUTHCOM U.S. Southern Command

Source: GAO analysis of Department of Defense guidance. | GAO-22-105810

According to DOD officials, each prosecution team maintains trackers on what evidence, including detainee medical records, has been provided to the defense during the course of military commissions' proceedings. According to detainee defense counsel teams, they also track what detainee medical records they have received. These trackers can be used to identify gaps in medical records, where the records are in the process of being produced to the defense, and how long it takes the SC/DRT to declassify medical records for them to be produced to the defense counsel. According to DOD officials, detainee medical records are usually produced to the defense counsel within 2 to 3 weeks of the initial request. However, according to DOD officials, delays in production can and do occur. These can be caused by a number of factors, such as the volume and classification level of the material and disruptions in

access and travel to GTMO caused by the COVID-19 pandemic, according to DOD officials.

For example, according to Mr. Ammar al-Baluchi's defense team (aka Ali Abdul Aziz Ali), they receive detainee medical records on a rolling basis approximately every 30 days and timely access to detainee medical records has improved in recent years. According to Mr. Abd Al Hadi Al-Iraqi's defense team, they have experienced challenges with timely access to detainee medical records and often experienced a 3 to 4 month delay in receiving their client's medical records. For example, according to the defense team, they did not receive any of their client's medical records for 2022 until April of 2022 and the records they received contained gaps. Officials from the prosecution acknowledged that there have been occasional gaps in the detainee medical records. According to those officials, when they are made aware of gaps, they will undertake efforts to ensure that any missing material is located and provided to the defense counsel.

There has been at least one military commission case in which the defense filed a motion to expedite the delivery of detainee medical records. On September 16, 2021, the defense filed an emergency motion on behalf of Mr. Abd Al Hadi Al-Iraqi to compel the expedited production of discovery of his medical records stemming from concerns that the accused's medical condition was deteriorating.²¹ In this case, the request for the expedited discovery of medical records was granted by the military judge.

DOD Has Taken Steps to Declassify Detainee Medical Records

Under current procedures, detainee medical records are kept at a variety of classification levels and the declassification of those medical records is an essential step in producing detainee medical records as part of military commissions' proceedings. Specifically, for those detainees still at NSGB, the high value detainees' (HVDs)²² medical records can be classified at a variety of classification levels up to the Top Secret (TS), Not Releasable to Foreign Nationals (NOFORN), Originator Controlled (ORCON) level or

²¹United States versus Abd Al Hadi Al-Iraqi, Emergency Defense Motion for Appropriate Relief Related to the Accused Medical Condition, AE-194C corrected copy (Sept. 24, 2021).

²²As of March 2022, there were 15 high value detainees residing at NSGB and 22 non-high value detainees.

be marked at the Controlled Unclassified Information (CUI) level.²³ Non-high value detainees' (non-HVD) medical records can also range in classification level and can be classified up to the Secret level or be marked CUI, according to DOD officials. The classification of detainee medical records largely depends on what kind of information is contained in the records. These records are all stored in paper form at NSGB, according to DOD officials.

According to DOD guidance, DOD has an obligation to maintain accurate and complete medical records on all of the detainees at NSGB.²⁴ Additionally, according to DOD guidance, health care personnel at NSGB have an obligation to safeguard patient's confidences and privacy as well as the confidentiality of their information according to the standards of the law.

The 2011 Regulation for Trial by Military Commission states that the prosecution should work with the original classification authorities of the evidence that may be used at trial to ensure that the evidence is declassified to the fullest extent possible, consistent with the requirements of national security.²⁵ Also, classified evidence must be protected and the regulation specifically prohibits the military judge from ordering the release of classified information to any person not authorized to receive such information.

The 2011 Regulation for Trial by Military Commission lays out the process by which classified evidence, such as detainee medical records, is to be released for military commissions' proceedings.²⁶ Upon receiving a copy of the detainee's medical records from the JTF-GTMO Litigation Support Section, the prosecution will submit all documents or other materials containing classified or protected information either intended for use in the litigation by the prosecution, or to be provided to the defense counsel in the discovery process to the SC/DRT. The submission goes to the SC/DRT or to the appropriate original classification authority at any other relevant non-DOD federal department or agency, such as the CIA, for

²³According to DOD, the classification and handling of detainee medical records is conducted in accordance with Exec. Order No. 13526 *Classified National Security Information*, 75 Fed. Reg. 707 (Dec. 29, 2009).

²⁴Department of Defense Instruction 2310.08, *Medical Program Support for Detainee Operations*, (Sept. 5, 2019).

²⁵Department of Defense, *Regulation for Trial by Military Commission* (Nov. 6, 2011).

²⁶Department of Defense, *Regulation for Trial by Military Commission* (Nov. 6, 2011).

classification review and use authorization. Also, the prosecution is required to work with the SC/DRT or the appropriate original classification authorities for any other relevant non-DOD federal departments or agencies to ensure that evidence that may be used at trial is declassified to the maximum extent possible, consistent with the requirements of national security.

Until the documents submitted to the SC/DRT and any other relevant non-DOD federal department or agency are reviewed for classification, they may not be used in any aspect of the military commissions' proceeding. The SC/DRT process can take around 21 days. However, according to DOD officials, members of the SC/DRT are significantly overworked trying to declassify records in support of the military commissions' process. According to DOD officials, the speed at which the SC/DRT's review is conducted depends upon the volume of work the SC/DRT has as well as the volume of records they have to review for a case. After the SC/DRT's review is complete, the documents are then returned to the prosecution, which then produces them as part of the discovery process. According to a DOD official, as of April 12, 2022, the prosecution had provided a total of 50,258 pages of medical records to the defense teams in the 10 active military commission cases.

Agency Comments

We provided a draft of this report to DOD for review and comment. DOD provided technical comments, which we incorporated as appropriate.

We are sending copies of this report to the appropriate congressional committees and the Secretary of Defense. In addition, the report is available at no charge on the GAO website at <http://www.gao.gov>.

If you or your staff have any questions about this report, please contact me at (202) 512-3604 or farrellb@gao.gov. Contact points for our Offices of Congressional Relations and Public Affairs may be found on the last page of this report. GAO staff who made key contributions to this report are listed in appendix I.



Brenda S. Farrell
Director, Defense Capabilities and Management

List of Committees

The Honorable Jack Reed
Chairman
The Honorable James M. Inhofe
Ranking Member
Committee on Armed Services
United States Senate

The Honorable Jon Tester
Chairman
The Honorable Richard C. Shelby
Ranking Member
Subcommittee on Defense
Committee on Appropriations
United States Senate

The Honorable Adam Smith
Chairman
The Honorable Mike Rogers
Ranking Member
Committee on Armed Services
House of Representatives

The Honorable Betty McCollum
Chair
The Honorable Ken Calvert
Ranking Member
Subcommittee on Defense
Committee on Appropriations
House of Representatives

Appendix I: GAO Contact and Staff Acknowledgments

GAO Contact

Brenda S. Farrell at (202) 512-3604 or farrellb@gao.gov

Staff Acknowledgments

In addition to the contact named above, Marcus Oliver (Assistant Director), Emily Martin (Analyst-in-Charge), Lori Atkinson, Tracy Barnes, Karen Doran, Jessica Farb, Michele Fejfar, Amie Lesser, Jeffrey Mayhew, Patrick Netherclift, and Richard Powelson made key contributions to this report.

GAO's Mission

The Government Accountability Office, the audit, evaluation, and investigative arm of Congress, exists to support Congress in meeting its constitutional responsibilities and to help improve the performance and accountability of the federal government for the American people. GAO examines the use of public funds; evaluates federal programs and policies; and provides analyses, recommendations, and other assistance to help Congress make informed oversight, policy, and funding decisions. GAO's commitment to good government is reflected in its core values of accountability, integrity, and reliability.

Obtaining Copies of GAO Reports and Testimony

The fastest and easiest way to obtain copies of GAO documents at no cost is through our website. Each weekday afternoon, GAO posts on its [website](#) newly released reports, testimony, and correspondence. You can also [subscribe](#) to GAO's email updates to receive notification of newly posted products.

Order by Phone

The price of each GAO publication reflects GAO's actual cost of production and distribution and depends on the number of pages in the publication and whether the publication is printed in color or black and white. Pricing and ordering information is posted on GAO's website, <https://www.gao.gov/ordering.htm>.

Place orders by calling (202) 512-6000, toll free (866) 801-7077, or TDD (202) 512-2537.

Orders may be paid for using American Express, Discover Card, MasterCard, Visa, check, or money order. Call for additional information.

Connect with GAO

Connect with GAO on [Facebook](#), [Flickr](#), [Twitter](#), and [YouTube](#).
Subscribe to our [RSS Feeds](#) or [Email Updates](#). Listen to our [Podcasts](#).
Visit GAO on the web at <https://www.gao.gov>.

To Report Fraud, Waste, and Abuse in Federal Programs

Contact FraudNet:

Website: <https://www.gao.gov/about/what-gao-does/fraudnet>

Automated answering system: (800) 424-5454 or (202) 512-7700

Congressional Relations

A. Nicole Clowers, Managing Director, ClowersA@gao.gov, (202) 512-4400, U.S. Government Accountability Office, 441 G Street NW, Room 7125, Washington, DC 20548

Public Affairs

Chuck Young, Managing Director, youngc1@gao.gov, (202) 512-4800
U.S. Government Accountability Office, 441 G Street NW, Room 7149
Washington, DC 20548

Strategic Planning and External Liaison

Stephen J. Sanford, Managing Director, spel@gao.gov, (202) 512-4707
U.S. Government Accountability Office, 441 G Street NW, Room 7814,
Washington, DC 20548

