

**STATEMENT OF
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BEFORE THE
HOUSE COMMITTEE ON VETERANS' AFFAIRS**

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Good Morning, Chairman Takano, Ranking Member Bost and Members of the Committee. Accompanying me today are Beth Murphy, Executive Director for Compensation Service; and Dr. Patricia R. Hastings, Chief Consultant for Post Deployment Health Services. Rather than provide remarks on the specific bills pertaining to toxic exposures today, we will lay out the changes we are making within VA to better serve Veterans and their family members, who were exposed to airborne and environmental hazards.

In the opening statement of his confirmation hearing, Secretary McDonough made it clear that VA will provide Veterans with timely world-class health care and ensure Veterans and their families have timely access to their benefits. It is clear by the number of toxic exposure bills before us today that military toxic and environmental exposure is a critical congressional interest item.

Twenty Veterans Service Organizations (VSO) testified last month on their priorities. It is not surprising that most of these organizations list addressing toxic exposure a top priority. Their message was clear, it is time to act now. It is a credit to the Members of this Committee who worked with VSOs to understand their concerns and develop bipartisan solutions. We acknowledge that VA must continuously evaluate how we approach researching and granting claims for disabilities related to toxic and environmental exposures.

From the tens of thousands of Vietnam and Vietnam-era Veterans, Veterans who cleaned up radioactive hazards from our own nuclear test sites and the more than 200,000 Veterans who have signed their names to the Burn Pit Registry and fear their poor health conditions are a direct result of just breathing the air in places like Iraq and Afghanistan to the nearly 15,000 Veterans who served at Karshi-Khanabad (K2) Air Base, VA is committed to action.

An End-to-End Review

This is an end-to-end review as it involves reviewing all the major touch points within the agency for a Veteran who has experienced toxic exposure, as well as internal agency functions in this area. The review is a review of both claims data/functions and VHA data/information.

For decades, Veterans and their families have sought answers to questions about health issues and potential connections to service-related toxic exposures. Working with

partners from the scientific and medical communities, and with the support of Congress, VA has identified linkages and extended benefits to tens of thousands of Veterans. Despite this progress, we have more work to do. Secretary McDonough is committed to taking immediate and deliberate steps to ensure the Department leans forward in its approach to getting answers to key environmental exposure questions. We recognize that to succeed, the new approach will require the collective efforts of VA, our academic partners, other Federal agencies, and Congress. Secretary McDonough outlined a list of priorities that form the foundation for work he has directed the Department to undertake. To ensure in-depth analyses of high priority issues, the Secretary re-established the VA Executive Board (VAEB), consisting of subject matter experts and senior leaders. The VAEB met on March 23, 2021 and received clear guidance to focus on issues related to toxic exposures and providing input to inform solutions.

While the VAEB led review is designed to be holistic, it is not necessary to conduct a review to know that there are some things we can and must do differently today. Historically, VA's presumptive decision-making process has been guided by statutory requirements; however, certain provisions of the Agent Orange Act and Persian Gulf War Veterans Act, notably those governing the use of National Academies of Sciences, Engineering and Medicine (NASEM) reports and requiring the Secretary to respond to such reports within 60 days, have expired. With that expiration, we see an opportunity. VA is creating a new, comprehensive, modernized decision-making model for determining presumptions based on environmental exposures. Our model includes leveraging improved science and surveillance, better use of VA benefit claims data and consideration of other factors. We are moving with a sense of urgency and hope to share the proposed model with Congress, VSOs and other key partners for feedback within the next 180 days.

In order to do a better job researching exposure to toxic substances and military environmental hazards, we need more insight into the health issues that Veterans are experiencing. Our research indicates that an overly cumbersome process and an assumption of denial discourages Veterans from filing toxic and environmental -exposure related claims. At the Secretary's direction, we are undertaking efforts to encourage Veterans, who believe their symptoms are related to toxic exposure, to participate submit a claim. Part of that effort will include encouraging Veterans to get a C&P (compensation and pension) exam and submit a claim to VA if there is a concern about exposure. A new DoD and VA effort that will help in the future is the ILER (Individual Longitudinal Exposure Record) that just went active for clinical care and will be available for claims and research.

With one in three Veterans reporting a possible exposure to military environmental hazards and one in four Veterans reporting health concerns due to deployment exposures, VA must take decisive action. While Secretary McDonough's end-to-end review is being completed, VA will take the following additional steps:

1. Expand Training for Health Care Providers;
2. Improve Science, Surveillance, Epidemiology, and Research;
3. Make Better Use of Benefits Data and Consider Other Factors; and
4. Encourage Veterans to File a Claim.

Expand Training for Health Care Providers

VA is one of the largest providers of medical training for most American physicians, nurses and physician assistants.¹ We have first-rate training available for these practitioners in training and will share this information with all VA providers as well as those in community practice.² This will be accomplished through the VA Talent Management System platform for VA personnel training and the VA TrainingFinder Real-Time Affiliate-Integrated Network (TRAIN) platform for non-VA providers with free, accredited, continuing education credits. VA will also promote VA's "Exposure Ed App," available at <https://mobile.va.gov/app/exposure-ed>, which provides quick overviews of exposures for VA and community health care providers, who may not see toxic exposures routinely.

Improve Science and Surveillance

While scientific rationale will remain critical for decision-making regarding key policy decisions related to treatment and provision of benefits for Veterans who experienced toxic exposures VA expects to find some of this rationale through increased ongoing surveillance and well-designed epidemiologic studies for specific cohorts, such as the surveillance designed for the cohort of Veterans who served at K2 Air Base. When the surveillance signal is strong, VA will seek to quickly address the clinical and benefit changes that may be required. While science is the best way to ensure Veterans are cared for properly, VA will not wait for perfect science before deciding. Part of VA's deliberations will include the concepts of the Sir Bradford-Hill criteria,

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4589117/> and described as follows:

- a. Strength: A small association does not mean that there is not a causal effect, although the larger the association, the more likely that it is causal.
- b. Consistency (reproducibility): Consistent findings observed by different persons in different places with different samples strengthens the likelihood of an effect.
- c. Specificity: Causation is likely if there is a very specific population at a specific site and disease with no other likely explanation.
- d. Temporality: The effect must occur after the cause.
- e. Biological gradient (dose-response relationships): Greater exposure generally leads to greater incidence of the effect. However, in some cases, the mere presence of the factor can trigger the effect. In other cases, an inverse proportion is observed, and greater exposure leads to lower incidence.
- f. Plausibility: A plausible mechanism between cause and effect is helpful (but Hill noted that knowledge of the mechanism is limited by current knowledge)
- g. Coherence: Coherence between epidemiological and laboratory findings increases the likelihood of an effect.
- h. Experiment: Occasionally it is possible to appeal to experimental evidence.
- i. Analogy: The use of analogies or similarities between the observed association and any other associations.

VA will not only consider NASEM findings through their consensus reports and reviews, but Secretary McDonough has also directed the Department's subject matter

¹ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6366564/>

² <https://www.militarytimes.com/news/2018/12/13/va-hospitals-often-the-best-option-for-medical-care-study-finds/>

experts to review the wider body of literature for a more rapid response to emerging science and to consider evidence covering human, animal, toxicological and mechanistic studies. VA will work more closely with our many partners, some with whom we have longstanding relationships, such as the Department of Defense (DoD), and some with whom we have coincident interests, such as the National Institute for Occupational Safety and Health (NIOSH). Additionally, VA and its partners, established and developing, have decades of experience for many exposures, and we must use this large body of knowledge to help in adjudicating claims and providing health care.

The Veterans Health Administration's Post-Deployment Health Services and Office of Research and Development, recognizing the need for better, faster and more transparent research, began the Military Exposure Research Program (MERP) in October Fiscal Year 2021 to coordinate and accelerate research efforts across VA while ensuring Veteran research protections. A major challenge for military exposures research is the lack of objective, contemporaneous measurement of the exposure profile that Veterans were exposed to during their military service. The MERP will focus on and support research on military exposures that emphasize exposure(s) assessments.

With regard to original research, VA will continue to conduct important research to inform our approach to provide answers now and in the future for Veterans through VA's Office of Research and Development, through the Airborne Hazards and Burn Pits Center of Excellence, and our Post-Deployment Health Services Epidemiology program.

In the future, VA needs more data from DoD field environmental surveys placed into the Individual Longitudinal Exposure Record (ILER). These data will be used to provide better answers for Veterans, Congress and VA. As the technology of individual monitoring improves, ILER will have better information useful to Veterans, providers and claims adjudicators. DoD is a leader in this area, and we will work closely with them.

Better Use of Benefits to Data and Consideration of Other Factors

While VA decision making and treatment approaches are driven by science, we will also seek out and assess other information that may be relevant to more rapidly providing Veterans with health care and benefits, including VBA and Board of Veterans' Appeals (BVA) claims data. The claims process is inherently administrative, but mining VA's disability claims data has the potential to amplify the science and help inform policy more rapidly.

VA's initiation of a more modern and comprehensive decision-making model for making decisions on presumptions associated with environmental exposures seeks to generate additional evidence to accompany the scientific and medical data. The retrospective review of disability claims data and analyses of deployed Veteran cohorts will allow us to compare health results with other non-deployed or similar Veteran cohorts based on Veterans who claim disabilities. To gather longitudinal data, VA will review Veteran claims cohort data over periods of time, comparing claims immediately following service and those within the first several years after discharge from military service. Preliminary reviews show that there may be valuable trends and patterns from these claims and appeals, which VA could include in the body of evidence used to decide future policy matters relating to exposures.

In addition to epidemiological studies and claims based analyses, VA will consider other important factors such as public interest and consistency with agency mission and values. We believe that this kind of information is pertinent to present a holistic approach to accelerate certain policy decisions regarding the impacts of exposure events.

Encourage Veterans to File a Claim

VA acknowledges that a clearer policy is needed on the concession or presumption of exposure, and efforts are underway to address this issue. While a presumption is not required to grant disability compensation benefits for Veterans whose duties may have exposed them to an environmental hazard, VA recognizes that some Veterans may forego submission of a claim because there may not be a decision on establishing a service-related presumption. VA is aware that open air burn pits were utilized throughout the Southwest Asia theater of operations, and VA will concede exposure to burn pits if a Veteran served in Southwest Asia. In addition, VA does not generally require Veterans to specify the exact cause of their disability when submitting a claim for compensation. VA also recognizes that environmental exposures during deployment may be associated with both immediate and delayed adverse health consequences; therefore, there is no time limit for submitting claims. VA will work to more proactively communicate with Veterans and other stakeholders.

Conclusion

Mr. Chairman, this concludes my testimony. My colleagues and I are prepared to respond to any questions you or other Members of the Committee may have. And, we look forward to continued work with the Committee to address the needs of veterans exposed to toxic and environmental hazards.