

**STATEMENT FOR THE RECORD
OF
VETERAN WARRIORS, INC.
FOR THE
HOUSE COMMITTEE ON VETERANS' AFFAIRS
CONCERNING
TOXIC EXPOSURE AND CURRENT PROPOSED TOXIC EXPOSURE BILLS**

May 5, 2021

Chairman Takano, Ranking Member Bost, and members of this Committee, Veteran Warriors expresses our gratitude for the opportunity to offer our views on the impacts of toxic exposure and the need for legislation to help our veterans who have been exposed to toxins while serving our country.

Veteran Warriors' mission is to provide Hill advocacy, research, education, and media outreach for veterans who have lost their "voice" within the bureaucracy. We have participated in high-level round-table discussions and Congressional hearings regarding VA specialty programs, specifically the VA Caregiver Program and Burn Pits/Toxic Exposure. We stand firm on finding solutions and seeking accountability, so more veterans and their families receive the support, services, and benefits they have earned while rooting out the waste and inefficiencies.

Through data, research, testimony on the Hill, and agency communication, we achieve positive outcomes for our veterans. We focus on VA staff and leadership accountability, consistent practices across the enterprise, and revising policy to ensure policy guidelines are not misused. The result: better care along the continuum.

While two of our largest projects currently are the VA Caregiver Program and Toxic Exposure, we assist veteran families with all aspects of interacting with the VA. With the Caregiver Program, we help veterans and their caregivers with representation, applications, understanding the evaluations, and the operational process. We also guide appeals of incorrect adverse decisions, denial of participation, or inappropriate assignment to the level of care required following our thorough review of the medical records and the veteran's needs and eligibility.

We are active participants in a Toxic Exposure Task Force (TEAM Coalition) along with other Veteran Service Organizations (VSOs), and we provide both expert and personal testimony regarding Burn Pits/Toxic Exposure. This includes specialization with the dangers of exposure and the illnesses that may result and working with others to shape and enact the required

legislation and inform the necessary Veteran's Health Administration (VHA) care for affected veterans.

Assistance with navigating the VHA is needed to ensure veterans receive the care they require - and have earned. Transitioning service members and veterans are supported by our team with a consistent point of contact to provide answers and assistance. VA Care is comprehensive but can also be intimidating to family members seeking healthcare for their veteran and this is another way Veteran Warriors step in to help.

We consider all veterans are united no matter branch, age, race, gender, era served, or combat status. At Veteran Warriors, we stand ready to serve all 22,000,000+ veterans without division.

Veteran Warriors has a vested interest in seeing that toxic exposure legislation is signed into law, especially following the death of YN1 Lauren Price (Ret.) on March 30, 2021 as a direct result of her toxic exposure from serving her country. Lauren was one of the co-founders and the prior Executive Director of Veteran Warriors. She was diagnosed with Constrictive Bronchiolitis following her deployment to Iraq and ultimately lost her life to toxic exposure. Initially, Lauren developed a persistent cough, dubbed the "Iraqi Crud", but the cough never went away. Instead, the cough manifested into shortness of breath while walking short distances or even talking. After returning home and the symptom list continuing to grow rapidly, Lauren sought care from the DoD facilities, VA, and community providers. Lauren was eventually diagnosed with Constrictive Bronchiolitis, followed by a host of other ailments including decaying white matter and lesions on the brain.

After waiting 15 months just to see a pulmonologist, the VA provider refused treatment of her lung condition. Therefore, Lauren's Constrictive Bronchiolitis went untreated by the VA providers who refused to treat her until her acid reflux was under control and her PTSD was "cured." Considering there is not a cure for PTSD, the provider essentially denied treatment of Constrictive Bronchiolitis which led Lauren to take her medical care outside the VA. Although Lauren was diagnosed with a terminal illness (Constrictive Bronchiolitis), she still felt she deserved quality medical care and treatment for her multiple ailments.

Fast forward to June 2020, Lauren developed severe gastrointestinal issues. After seeing her community PCP, followed by three different gastrointestinal providers, Lauren was ultimately told by the third GI doctor that she needed to be admitted to the hospital for extensive testing immediately. During this hospital stay, Lauren was diagnosed with a rare and aggressive form of cancer. After much research and consultation, it was learned that the cancer Lauren was diagnosed with does not actually exist as there is no such thing as peritoneal cancer. Cancer of the peritoneum spreads to the peritoneum from other organs and is not curable. The biopsy results showed a staining pattern to indicate that the cancer was a residual of toxic exposure from the GI tract, however cancer was not found within the GI tract or other organs for that matter.

After learning there was no cure and the cancer was in the advance stage, it was clear that Lauren's time was limited, and treatment was sought. Lauren was one who would take a challenge head on, this was no different. She was determined to do everything she could to have as much time left as possible, so she decided to do chemo. Her life expectancy with chemotherapy was 12-18 months. Just forty-four days later – not 12-18 months as anticipated, at the age of 56 years old, Lauren Price died as a direct result of her toxic exposure from serving her country. Had there been early intervention, tools, and resources for providers to identify and treat various conditions, Lauren may still be here today. Unfortunately, Lauren was failed by the system after serving her country.

Today, Veteran Warriors continues Lauren's mission to advocate for benefits and services of veterans of all eras. No veteran deserves to go through what Lauren went through. Veterans should never be denied medical care and treatment. Benefits should not have to be fought for by veterans for years and being repeatedly denied. Survivors should not have the uncertainty of wondering whether DIC payments will ever be paid for the veterans who have lost their lives to toxic exposure. All of these deficiencies can be rectified with multiples pieces of legislation being passed to provide services and benefits to affected veterans and their families.

The number of illnesses and deaths related to toxic exposure are alarming and continue to rise at a rate that should be unacceptable to all. The fact that there are service members who are waiting months and years for treatment is something that should never be tolerated. Toxic exposure should not have to be the next Agent Orange and those exposed should not have to continue to await benefits and services when there are known links to rare illnesses in what are otherwise healthy adults, including young adults in their 20s and 30s. While none of the currently proposed legislation covers all critical components required to provide acceptable services and benefits to properly care for all veterans affected by toxic exposure, together they make a more comprehensive solution to a serious problem that has gone unresolved for decades. **There are three major points within the current bills being discussed and all are equally critical: named presumptive illnesses, named concessions of exposure, and process to move forward.**

Named Presumptive Illnesses: There are multiple toxic exposure bills being discussed at this time which include presumptive coverage, but none cover all illnesses. Named presumptive illnesses of toxic exposure is a critical component to any legislative efforts that are passed. Our concern is that there are a number of rare cancers and illnesses that are just being identified that are not included in any of the legislation. It should be considered that new diagnoses are being linked to toxic exposure regularly. We would like to see legislation that would encompass all presumptive illnesses, including all types of cancers rather than select categories; there are a wide variety of cancers that are not included within any of the current legislation (e.g., cancer of reproductive organs is covered but vascular cancer and liver cancer are not). Veterans should not have to continue to fight the bureaucracy to connect a rare illness to toxic exposure when there has been research and data supporting links to toxic exposure. Rather than

delaying services and benefits to those with supported links to toxic exposure, we should not wait for all possible avenues to be exhausted by VA when the implication of toxic exposure is clear, and our nations veterans are suffering and dying. It is time to act on the data, research, and common sense to start saving lives and enable the care needed for these heroes.

Named concessions of exposure: Veteran Warriors has seen firsthand the health implications on our service members who have been exposed and were otherwise healthy; we cannot ignore the obvious correlation between these rare and unusual illnesses and toxic exposure. Our advocacy does not solely extend to those who served overseas; we also advocate for the veterans who have been exposed to toxins within the US and its territories and for those whose eligibility criteria are hidden behind classified assignments and locations. It is unfair to expect such a high burden of proof from our nation's veterans who have been known to serve in toxic areas as VA continues to disregard their own data and research while claiming to wait for more and more. Concessions of exposure are necessary to providing VA compensation benefits to veterans who have been exposed and have known links. For many of these veterans who are losing their lives to toxic exposure and have never been awarded service-connected benefits, there is a great uncertainty as to the guarantee DIC will ever be awarded to their surviving family.

Process to move forward: It has been recommended to VA multiple times to perform a study on how to develop better treatment options for those affected by toxins. We again stress the need for VA to IMMEDIATELY implement a standardized screening, treatment, and research program that would focus on various illnesses, including screenings for lung conditions such as cancer and Constrictive Bronchiolitis. Clinicians require additional training and tools, such as questionnaires and reference guides, to be able to identify possible "hot spot" zones where a veteran may have been exposed. These resources and training will help identify potentially affected veterans who may be unaware of the correlation to toxic exposure.

We believe it is critical to develop a process which includes ongoing preventative health checks during appointments with PCP or other providers for those who have been exposed to toxins. Clear and concise treatment options are needed for those suffering from toxic exposure illnesses and should be made a priority by VA staff. Intervention and treatment go hand in hand when addressing the large-scale medical issues related to veterans exposed to burn pits and other toxins. By looking for early warning signs and knowing what to look for, providers could identify deadly diseases caused by toxic exposure early enough to intervene.

Conclusion: Many legislators, veterans, and citizens are not aware that the Department of Veterans Affairs already has a substantial and specific policy in place regarding providing medical care and rating claims; for those veterans who have been exposed to burn pits. That policy; "Training Letter 10-03" (Environmental Hazards in Iraq, Afghanistan, and Other Military Installations); was issued throughout the VA on April 26, 2010. The only part of that policy that most do recognize is the "Camp Lejeune Water Contamination" section; (which is AFTER the

burn pit policy section). However, this letter is incomplete, it does not address all needed items, it is a VA policy not a law and most significantly, it is not correctly followed within the VA currently.

With 208,020 registered veterans from the U.S. and other locations and with another 8,545 from unknown locations on the VA's Burn Pit Registry, it is time for the accumulated data to be used as intended to start helping veterans and support legislation for toxic exposure benefits and services. The Registry needs to be updated to allow for veterans to make updates as needed to accurately reflect their medical status and history. Additionally, it is just as critical for the Registry to be able to be used by VA clinicians and researchers to identify potential flare ups with various conditions from certain locations or time frames.

We thank the House Committee on Veterans' Affairs and distinguished members for the opportunity to help identify and address these challenging issues our veterans and their survivors face. Veterans like the late Lauren Price of Veteran Warriors, sign a blank check to the United States for the cost of their life, the least our country can do is provide piece of mind when it comes to benefits and services for these veterans and their survivors. Together, we all share an obligation to serve all our veterans who have borne the battle.