

United States Senate
WASHINGTON, DC 20510

September 3, 2019

The Honorable Robert Wilkie
Secretary of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20571

Dear Secretary Wilkie,


We write to follow up on your January 17th, 2019, letter regarding Agent Orange presumptive conditions. In your letter, you stated that you are still reviewing recommendations made by the Department of Veterans Affairs (VA) working group, in accordance with the National Academy of Medicine (NAM) *Veterans and Agent Orange Volume 11* update released on November 15th, 2018. Furthermore, your letter indicated a decision could be expected this summer – an expectation also communicated to Congress by Dr. Richard Stone, Executive in Charge of the Veterans Health Administration. During a hearing on March 26th of this year, Dr. Stone told us to expect a decision in the next 90 days. Mr. Secretary, thousands of veterans – many of whom are aging and in urgent need of critical health care and other benefits - have waited far too long for a final decision that should have been made by the VA in 2016. We therefore urge you to add Parkinsonism, Bladder Cancer, Hypertension and Hypothyroidism to the list of presumptive health outcomes for service-connected exposure to Agent Orange without further delay.

As you know, the VA already gives a presumption for seven of the twelve health outcomes included in the limited or suggestive evidence list from the 2018 update, including Parkinson's disease. Parkinsonism is incorporated along with Parkinson's disease in the NAM report. However, the VA still does not include Parkinsonism as a presumptive service-connected health outcome. It seems arbitrary to make a distinction between Parkinson's and Parkinsonism as both severely affect the health and quality of life for veterans. Additionally, Hypothyroidism and Urinary Bladder Cancer are included in the limited or suggestive evidence list, but the VA is still delaying their addition to the presumptive service-connected list. Hypertension was moved from the limited or suggestive evidence list in the 2014 report to the sufficient evidence list in the 2018 update, it is now one of two health outcomes on the sufficient evidence list not included on the presumption list. We owe it to our veterans to lift the burden of proving their symptoms are the nexus for service-connected herbicide exposure.


Earlier this year, Congressional passage of the *Blue Water Navy Vietnam Veterans Act* signified a historic and long overdue step to ensure that more Vietnam Veterans living with the effects of exposure to Agent Orange receive the benefits and care they have earned and urgently need. Now, as the summer draws to a close, VA can take another critical step on behalf of these veterans by expanding the Department's list of medical conditions associated with exposure to Agent Orange. Doing so would be consistent with historical precedent, would be in accordance

with available medical evidence, and would simply be the right thing to do. We therefore eagerly await a decision in favor of adding these conditions to the presumptive list and request an updated timeframe under which the Department expects to make its final decision.

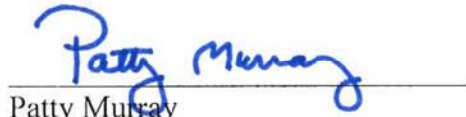
Sincerely,




Jon Tester
United States Senator



Sherrod Brown
United States Senator




Patty Murray
United States Senator



Bernard Sanders
United States Senator



Joe Manchin III
United States Senator



Richard Blumenthal
United States Senator



Mazie K. Hirono
United States Senator