Congress of the United States

Washington, DC 20515

September 2, 2025

Steven L. Lieberman, MD Acting Under Secretary for Health Department of Veterans Affairs 810 Vermont Avenue NW Washington, DC 20420

Dear Dr. Lieberman,

We write today to comment on the Department of Veterans Affairs' (VA) proposed rule, RIN: 2900-AS31, published in the Federal Register on August 4, 2025, to reinstate a near-total ban on abortions and abortion counseling from VA's medical benefits package. This incredibly dangerous and reckless rule change will take away essential health care for veterans and beneficiaries of the Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA). For the past three years, these patients have been able to obtain comprehensive pregnancy counseling, including information about abortion services, and abortion care in cases of rape, incest, or life or health endangerment. This proposed rule seriously calls into question whether the Department is putting political allegiances and culture wars ahead of its sacred obligation to deliver quality, life-saving health care to veterans, including the more than 462,000 women veterans of reproductive age enrolled in VA health care.

We reject this rule's premise that only providing a carveout for abortions in cases of life endangerment is adequate for providing "needed" health care for veterans. Evidence has shown that extreme abortion bans, like the ban this rule would create, cause chaos and confusion for providers, putting them in the impossible position of navigating laws that don't allow them to deliver the appropriate standard of care to ailing patients. Worse, such a ban would also be extremely dangerous to the health and wellbeing of veterans. As we have seen in states with extreme abortion bans, even those with "life exceptions" in place, patients have faced severe health complications and even death in cases when providers did not know if the patient's life was endangered *enough* to be covered under this exception.

Additionally, though this proposed rule claims "[n]o State law prohibits treatment for ectopic pregnancies or miscarriages to save the life of a mother," there are numerous cases of providers nationwide being unable to provide care for women with ectopic pregnancies or experiencing miscarriages, due to restrictive, ambiguous laws. As such, this rule will now require VA providers to make the impossible determination of whether a veteran is close enough to death to be covered under the "threat to life" exception before providing an abortion. VA's proposed rule presupposes that a blanket prohibition and a narrow, undefined exception will be sufficient to ensure VA can provide "needed" care to veterans and that "the lives of pregnant women will continue to be protected..." instead of trusting veterans and their providers to decide on a path forward that actually meets patients' needs and protects their lives. This is no way to treat our veterans, or VA providers.

Beyond the ban on abortion care, the prohibition on abortion counseling in this proposed rule also endangers VA's ability to provide appropriate care to veterans. Regardless of the reason a veteran chooses or needs to seek abortion care, they must be allowed to discuss all their health care options openly and honestly with their provider. In removing VA providers' ability to provide comprehensive, evidence-based pregnancy counseling, including information about abortion services, in this proposed rule, the Department is unnecessarily and detrimentally allowing the government to interfere with health care decisions that should be between a veteran and their provider. In putting forth this proposed rule, VA has decided that its political judgement and legal analysis should supplant medical care decisions that are best made by providers and the patients in their care, even in life and death situations.

Further, despite VA's argument that previous eligibility requirements for abortion care and counseling at the Department – as put in place under the Biden Administration's September 9, 2022, interim final rule – were contradictory to "decades of Federal policy against forced taxpayer funding for abortion," the Biden-era rule brought VA *more* in line with abortion coverage in other federal programs. Most federally funded health programs – including those covered under the Hyde Amendment – have carveouts for abortions in cases of rape, incest, or life endangerment. VA's rule will lead to an inequity for veterans and CHAMPVA beneficiaries when compared to their civilian counterparts, making their access to abortion care more limited than those who use almost any other federally funded health care program.

This proposed rule also claims the Biden-era rule was an act of overreach, "creating a purported Federal entitlement to abortion for veterans where none had existed before and without regard to State law." In reality, the Department has previously issued a regulation (38 CFR 17.419) confirming the ability of VA providers to practice their health care profession consistent with the scope of their VA employment, regardless of any State license, registration, certification, or other requirements that unduly interfere with their practice. Additionally, the Justice Department issued an opinion after the release of the Biden-era rule, citing the Supremacy Clause of the U.S. Constitution and its applicability to the Biden rule: "[s]tates may not impose criminal or civil liability on VA employees...who provide or facilitate abortions or related services in a manner authorized by federal law, including VA's rule." Given the applicability of VA's own regulations and the Supremacy Clause of the U.S. Constitution, we fail to see how the Department can reject the Biden-era rule on the premise of "overreach."

Finally, we find the Department's claim that "abortion is not a 'needed' service for veterans" to be insulting and ignorant. Veterans of reproductive age have high rates of chronic health conditions – many of which may be service connected, including post-traumatic stress disorder (PTSD), severe hypertension, and renal disease – that can increase the risks associated with a pregnancy. If a provider determines these conditions or others make an abortion necessary to preserve a veteran or CHAMPVA beneficiary's health, access to abortion should be considered essential health care. In addition, veterans who are forced to carry to term pregnancies resulting from rape or incest are at risk of long-lasting psychological conditions and traumatic stress, making abortion access for these veterans needed for protecting their health. It is also vital given the high incidence of military sexual trauma in the Armed Forces, and the number of veterans who already suffer from PTSD or other mental health conditions.

The concerns we raise about this cruel proposal to roll back essential health care for veterans are not ours alone – they are shared by veterans and their families nationwide. A survey conducted by Iraq and Afghanistan Veterans of America after the U.S. Supreme Court's *Dobbs v. Jackson Women's Health Organization* decision found more than two-thirds of their members surveyed *supported* both VA and the Department of Defense stepping in to ensure veterans, servicemembers, and their families have access to the reproductive care they need. Since the *Dobbs* decision, more than half of women veterans and CHAMPVA beneficiaries of reproductive age live in states that have enacted abortion bans or restrictions. Should their health be in jeopardy due to a pregnancy, or if they are raped, this rule will leave them with nowhere to turn. To finalize this rule will be a failure for our veterans, and we urge the Department to reconsider.

Thank you for your consideration of this comment.

Sincerely,

Richard Blumenthal

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Member of Congress

Mark Jaleans

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United States Senator

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Member of Congress

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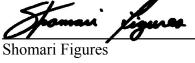
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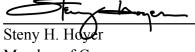
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