



THE UNDER SECRETARY OF VETERANS AFFAIRS FOR BENEFITS  
WASHINGTON, D.C. 20420

FEB 20 2007

James A. Zimble, M.D., VADM (Retired)  
Chairman, Veterans' Advisory Board  
on Dose Reconstruction  
7910 Woodmont Avenue, Suite 400  
Bethesda, MD 20814-3095

Dear Admiral Zimble:

Thank you for the recommendations of the Veterans' Advisory Board on Dose Reconstruction (VBDR). I am responding to each recommendation directed to the Department of Veterans Affairs (VA).

**Recommendation 1:** VBDR is encouraged that VA is moving to consolidate radiation claims. VBDR now recommends that VA follow-up on the consolidation of radiation claims by establishing a standard operating procedure for the centralized processing of atomic veterans' claims from identification through adjudication. VBDR also requests that VA provide Subcommittee 3 with a timetable and status for the development of a QA plan and program, including metrics in the radiation claims adjudication process.

**Response:** An instructional letter was provided to VA Regional Offices directing the identification and transfer of radiation claims to the Jackson Regional Office (RO), the centralized location for processing of these claims. In addition to the general instructions contained in VA's procedural manual, the Jackson RO has received specific instructions on the handling of radiation claims involving prostate and skin cancer. The Defense Threat Reduction Agency (DTRA) developed an expedited process for dose assessment for these cancers. DTRA furnished VA with information on how to employ these doses in our decision making process by providing screening dose tables prepared with the use of the Interactive Radioepidemiological Program (IREP). Instruction on the use of these screening tables was furnished to the Jackson RO.

**Response (continued):** With respect to your recommendation that the VA establish a QA program for radiation claims I am pleased to provide the following information.

- A member of the Compensation and Pension Service will make a site visit to the Jackson Regional Office by April 1, 2007.

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- An initial quality review of radiation claims processed by the Jackson consolidation site will be conducted in September 2007 by VA's STAR staff. That review, in addition to addressing routine quality review metrics for all claims processing will specifically address the following metrics:
  1. The validity of the initial determination that a claim involving exposure to radiation required transfer to the Jackson RO,
  2. That the referral to DTRA for a radiation dose, if needed, was complete,
  3. That the decision granting or denying benefits was correct,
  4. Finally, as part of individual performance review local management is required to conduct quality reviews of the work performed by individuals assigned to the radiation work group.

Based upon the findings of this specialized review we will determine whether such reviews need to be on-going or, whether, because all radiation claims are centralized in one office that a sufficient number of radiation cases will be identified on annual STAR reviews to satisfy is that the process remains operating well.

VA conducts recurring site surveys of all regional offices such that each office is visited at least once every three years. Reviews of regional offices include any unique or special activities. The site survey for the Jackson Regional Office will be expanded to include specific review of radiation workload management.

**Recommendation 2:** VBDR is aware that the Department of Labor does not forward non-radiogenic disease claims to the National Institute for Occupational Safety and Health for dose reconstruction under the Energy Employees Occupational Illness Compensation Program. Accordingly, VBDR recommends that VA explore the appropriateness of developing a similar policy. At the very least, VBDR recommends that VA review claims for non-radiogenic diseases to determine whether there is sufficient evidence and justification that the disease potentially resulted from radiation exposure, prior to requesting a dose reconstruction from DTRA.

**Response:** VA is required to request dose reconstruction for all diseases listed under 38 CFR § 3.311(b)(2). The provisions of § 3.311(b)(4), provide that diseases not contained in this list must also be forwarded to DTRA for dose reconstruction if the claimant has cited or submitted competent scientific or medical evidence that the claimed condition is the result of radiation exposure. Without the scientific or medical evidence noted above, DTRA would not be asked to provide a dose reconstruction.

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**Recommendation 3:** VBDR recommends that VA communicate (by letter) to all veterans who have had their claims folders forwarded to the Jackson, MS, Regional Office (RO). The letter should mention that the Jackson RO will now handle all radiation-related claims and that their file will be returned to the original RO after adjudication.

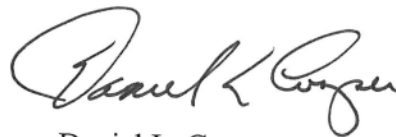
**Response:** The fast letter provided to all VA regional offices directed that the claimants be notified by their local RO of the transfer of their claims folder to the Jackson RO for processing of the radiation claim. The fast letter also directed that after finalization of the radiation claim the folder would be returned to the VA regional office of original jurisdiction.

**Recommendation 4:** VBDR recommends that VA assist the VBDR in communicating to veterans that "atomic veterans" are no longer held to any security/classification directives they may have received when they left the service.

**Response:** We agree. VA will move forward to insert language in development letters sent to veterans discussing the document issued by the Secretary of Defense in 1996 releasing "atomic veterans" from secrecy agreements they might have signed.

Thank you for VBDR's efforts to improve VA's compensation program for Atomic Veterans.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "Daniel L. Cooper".

Daniel L. Cooper

Attachments