



TOXIC EXPOSURES

in the American Military

May 20, 2020

The Honorable Jim Inhofe
Chairman, Armed Services Committee
United States Senate
Washington, DC 20510

The Honorable Jack Reed
Ranking Member, Armed Services Committee
United States Senate
Washington, DC 20510

The Honorable Adam Smith
Chairman, Armed Services Committee
U.S. House of Representatives
Washington, DC 20515

The Honorable Mac Thornberry
Ranking Member, Armed Services Committee
U.S. House of Representatives
Washington, DC 20515

Dear Chairmen Inhofe and Smith and Ranking Members Reed and Thornberry:

The Toxic Exposures in the American Military (TEAM) Coalition, a non-partisan consortium of 30 Veterans' and military service organizations and experts, write to you today to express our priorities for toxic exposure legislation, as they relate to the Department of Defense (DOD). It is our desire that each of these priorities be included in the final language of the National Defense Authorization Act (NDAA) for Fiscal Year 2021.

The stated goal of the TEAM Coalition is to reduce incidents of toxic exposures in the U.S. Military and increase access to and the quality of care for those who have been made ill as the result of their military service. To that end, we have assembled a list of six legislative priorities for inclusion in the FY21 NDAA. Each of the undersigned organizations fully supports all these priorities.

The TEAM Coalition legislative priorities for the FY21 NDAA are as follows:

1. *The inclusion of additional language specific to burn pits and other toxic exposures during the Service member's post-deployment health reassessment.* Establishing a connection between a Service member's disability and their service can be difficult. It is critical to have medical data collected so that if an individual becomes ill due to exposure to toxic substances, they can build the evidence needed to receive life-saving care at the Department of Veterans Affairs (VA). We recommend that Congress consider including language that would increase the information gathered regarding exposures to toxic substances during the Service member's post-deployment health reassessment.
2. *Require DoD and the Department of Veterans Affairs to ask Service members and Veterans who have tested positive for COVID-19 if they were exposed to burn pits during*



their health evaluation. For individuals seeking treatment at the VA or DoD, it is critical to collect as much data as possible to ensure proper care is administered. For those who have tested positive for COVID-19, there should be data collected regarding potential exposures to burn pits. This will help the Veteran and the health care practitioners to develop appropriate healthcare plans with the most information possible.

3. *Conduct a study on the health impacts of COVID-19 on Service members and Veterans who were exposed to burn pits and toxic substances.* As you know, COVID-19 affects the respiratory system and can be increasingly devastating for those with comorbid complications. We recommend a study on the health impacts of COVID-19 on the Veteran population, specifically on those who indicated exposure to burn pits and other toxic substances. This study would help identify high-risk groups in the future if COVID-19 were to continue long term or reemerge.
4. *Allow access to the Individual Longitudinal Exposure Record (ILER) system for Service members and Veterans.* ILER is a web-based application developed over the past eight years between DoD and VA that can assist in determining the linkage between individuals and possible toxic exposures while serving in the military. Allowing Service members, Veterans, and their health care providers the ability to identify potential exposure risk factors before or during treatment could mean the difference between life and death. We recommend that Congress consider directing DoD and VA to develop an easy to use portal that allows individuals to download their ILER information.
5. *Secure funding for research into the possible use of Agent Orange in Guam.* Veterans who served on Guam between 1962 and 1975 were possibly exposed to Agent Orange and other herbicides containing dioxins and may have valid claims to service-related disabilities as a result. We recommend that Congress consider working with the National Academy of Medicine to perform an independent study to determine if Agent Orange was or was not used in Guam.
6. *Formalize external DoD open-door conversations regarding toxic exposures with key stakeholders.* As the TEAM coalition continues to grow, there are more questions than we have answers to. We recommend that Congress consider requiring DoD to host monthly working groups with key stakeholders on topics relevant to exposures to toxicants in the military. Participants should include veteran service organizations and military service organizations.



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Messrs. Chairmen and Ranking Members, the TEAM Coalition thanks you for your steadfast commitment to the defense of our Nation and the well-being of its Service members. We look forward to working with you and your staff to ensure that each of the TEAM Coalition priorities is included in the final language of the FY21 NDAA.

Sincerely,

Air Force Sergeants Association (AFSA)
Association of the U.S. Navy (AUSN)
BurnPits 360
California Communities Against Toxics (CCAT)
Cease Fire Campaign
Enlisted Association of the National Guard of the United States (EANGUS)
Fleet Reserve Association (FRA)
Iraq and Afghanistan Veterans of America (IAVA)
Military Officers Association of America (MOAA)
Military Veterans Advocacy
National Veterans Legal Services Program (NVLS)
Stronghold Freedom Foundation
The Enlisted Association (TREA)
The Independence Fund
Tragedy Assistance Program for Survivors (TAPS)
United Soldiers and Sailors of America
Veteran Families for Exposure Awareness
Veteran Warriors
Veterans of Foreign Wars (VFW)
Vets First
Wounded Warrior Project (WWP)