

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Thursday, December 17, 2015 1:08 PM
To: (b) (6)
Subject: RE: Camp Lejeune

You are most welcome. Happy holidays to you, as well.

(b) (6)

From: (b) (6)
Sent: Thursday, December 17, 2015 12:59 PM
To: (b) (6)
Subject: RE: Camp Lejeune

Thanks for including me. Happy Holidays!

(b) (6)

From: (b) (6)
Sent: Thursday, December 17, 2015 12:58 PM
To: (b) (6); (b) (6)
Cc: (b) (6)
Subject: Camp Lejeune

I am sure you have already heard, but the Secretary called Burr, Tillis, and Isakson this morning to announce his decision to create a presumption of service connection for 8 diseases. Letters have been sent to the HVAC and SVAC and news agencies will be notified at 2:00. Until final regs are published, however, that will not reduce your workload. Sorry about that. We will continue to process claims as we do now and grant those that we can, but will defer a denial for one of the 8 presumptives until the regs are published. The presumptives are: Kidney cancer; Liver Cancer; non-Hodgkin Lymphoma; Leukemias; Multiple Myeloma; Scleroderma; Parkinson's disease; and Aplastic Anemia/Myelodysplastic Syndromes.

This is the highest priority reg for the Secretary so we will do all we can to get a final rule published. As a notice and comment rulemaking, it generally takes about 2 years. We will try to get it done in less than 18 months, but that won't be easy.

(b) (6)

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Tuesday, August 25, 2015 8:28 AM
To: (b) (6)
Subject: RE: CAP Action:

(b) (6)

VBA doesn't reference the NRC report. This request is in reference to VHA medical opinions citing the report. Personally, I don't have any concerns about citing it as long as other studies are cited also.

(b) (6)

From: (b) (6)
Sent: Tuesday, August 25, 2015 8:26 AM
To: (b) (6)
Cc: (b) (6)
Subject: CAP Action:

(b) (6)

Are you also preparing a response for 'The CAP requests that the VA stops using the NRC report as a reference/decision authority when processing claims.'?

(b) (6)
Office of Disability & Medical Assessment
Department of Veterans Affairs
810 Vermont Ave. NW
Washington, DC 20420

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Tuesday, August 25, 2015 9:09 AM
To: (b) (6)
Subject: RE: CAP Action:

Really? I wasn't aware of that although that might be guidance in our training letter. I'll take a look at it. But, even if we stop citing the report on the 2507, I am not concerned with VHA SME's citing it in their opinions. ATSDR basically said last week that the NRC report had been determined to be of no use by "everyone" including EPA.

From: (b) (6)
Sent: Tuesday, August 25, 2015 8:29 AM
To: (b) (6)
Cc: (b) (6)
Subject: RE: CAP Action:

(b) (6)

Each 2507 submitted to VHA uses the NRC report as a reference.

(b) (6)

From: (b) (6)
Sent: Tuesday, August 25, 2015 8:28 AM
To: (b) (6)
Subject: RE: CAP Action:

(b) (6)

VBA doesn't reference the NRC report. This request is in reference to VHA medical opinions citing the report. Personally, I don't have any concerns about citing it as long as other studies are cited also.

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(b) (6)

Office of Disability & Medical Assessment
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810 Vermont Ave. NW
Washington, DC 20420

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Tuesday, August 25, 2015 8:25 AM
To: (b) (6)
Subject: RE: CAP Responses:

Okay. Thanks, (b) (6)

From: (b) (6)
Sent: Tuesday, August 25, 2015 8:23 AM
To: (b) (6); (b) (6)
Cc: (b) (6)
Subject: CAP Responses:

(b) (6) (b) (6)

The question from the CAP: VA to conduct more education and outreach to VA clinicians on Camp Lejeune, this does not belong to DMA, this should be OPH.

(b) (6)
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Department of Veterans Affairs
810 Vermont Ave. NW
Washington, DC 20420

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Thursday, December 17, 2015 10:46 AM
To: (b) (6)
Subject: RE: Cases

For (b) (6) it says 2nd contention, but there is nothing I haven't already addressed months ago. What else do they want me to answer?

For the other two, They cannot be pulled up in CPRS and there is no 2507, therefore I can't begin to work on them. I have started doing some with 2507s being in VBMS, but I still need the name to pop up in CPRS.

Also, I just checked my list and (b) (6) and (b) (6), were there last night, but are not there now. Where did they go?

Thanks,

(b) (6)

From: (b) (6)
Sent: Thursday, December 17, 2015 10:32 AM
To: (b) (6)
Subject: RE: Cases

Hello,
Thank you for the compliment.

1. What information do you need for (b) (6)? Is this the case where you cannot see the records?
2. When you say not in CPRS? Do you mean the 2507 was not submitted by VBA?

Please advise, I will do my best to resolve the issue.

(b) (6)

From: (b) (6)
Sent: Thursday, December 17, 2015 10:29 AM
To: (b) (6)
Subject: Cases

Hi (b) (6)

It was a pleasure speaking with you earlier this week. I don't say it often enough, but thank you for what you do to keep the SME program flowing.

I have completed most of the exams on my list, but there are some that I cannot do. (b) (6) is still sitting there since 10/20. I need clarification as to what is to be evaluated. You have asked about him for me in the past, but I don't think we ever heard back. (b) (6) and (b) (6) are both from 21/1, but they are still not in CPRS. I know that there can be a delay, but it is unusual for it to be over two weeks.

Thanks again,

(b) (6)

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Monday, August 24, 2015 3:31 PM
To: (b) (6)
Subject: RE: CL Action Items_VA_May_2015_v2.docx

Sorry, (b) (6) Thanks for your help.

(b) (6)

From: (b) (6)
Sent: Monday, August 24, 2015 3:12 PM
To: (b) (6); (b) (6); (b) (6); (b) (6)
Cc: (b) (6); (b) (6); (b) (6)
Subject: RE: CL Action Items_VA_May_2015_v2.docx

This seems to be an extended list that was not previously provided. I will work on the DMA responses.

(b) (6)

From: (b) (6)
Sent: Monday, August 24, 2015 3:04 PM
To: (b) (6); (b) (6); (b) (6); (b) (6)
Cc: (b) (6); (b) (6); (b) (6)
Subject: CL Action Items_VA_May_2015_v2.docx

<< File: CL Action Items_VA_May_2015_v2.docx >>

In the attached, I have noted a few items for our action that have not yet been responded to. I have attempted to mark the offices in VBA and VHA that need to provide the responses. If I have missed anything, please let me know. Also, I plan on dialing into the meeting on Thursday. If anyone would like to join me, I would be happy to have the company. Thanks,

(b) (6)

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Monday, October 26, 2015 3:23 PM
To: (b) (6); (b) (6)
Cc: (b) (6)
Subject: RE: CL cases

I would agree that these fit into the ACE process and those codes make the most sense.

This would not separate out Toxic "tort" claims however. If there is a desire to do so, would need to come up with a different mechanism.

From: (b) (6)
Sent: Monday, October 26, 2015 2:16 PM
To: (b) (6); (b) (6)
Cc: (b) (6)
Subject: RE: CL cases

Can't these cases be treated using the same procedure as ACE exams.

From: (b) (6)
Sent: Monday, October 26, 2015 2:39 PM
To: (b) (6); (b) (6)
Cc: (b) (6)
Subject: RE: CL cases

These would have to have been documented by the facility in their VISTA – what recommendations did we give as these are not Face to face..

From: (b) (6)
Sent: Monday, October 26, 2015 2:24 PM
To: (b) (6); (b) (6)
Cc: (b) (6)
Subject: RE: CL cases

Would defer to (b) (6)

From: (b) (6)
Sent: Monday, October 26, 2015 11:05 AM
To: (b) (6); (b) (6)
Cc: (b) (6)
Subject: CL cases

(b) (6)

What stopcodes do you put your CL cases under?

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Monday, October 26, 2015 2:24 PM
To: (b) (6) | (b) (6)
Cc: (b) (6)
Subject: RE: CL cases

Would defer to (b) (6)

From: (b) (6)
Sent: Monday, October 26, 2015 11:05 AM
To: (b) (6) | (b) (6)
Cc: (b) (6)
Subject: CL cases

(b) (6)

What stopcodes do you put your CL cases under?

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Monday, October 26, 2015 3:24 PM
To: (b) (6); (b) (6)
Cc: (b) (6)
Subject: RE: CL cases

They are involved but at the end of the day, they are C&P exams

From: (b) (6)
Sent: Monday, October 26, 2015 2:23 PM
To: (b) (6); (b) (6)
Cc: (b) (6)
Subject: RE: CL cases

Are these C&P exams or something different? It depends on what you are trying say they are and distinguishing them from regular ACE exams. I thought these were pretty involved?

From: (b) (6)
Sent: Monday, October 26, 2015 3:16 PM
To: (b) (6); (b) (6)
Cc: (b) (6)
Subject: RE: CL cases

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To: (b) (6); (b) (6)
Cc: (b) (6)
Subject: RE: CL cases

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Sent: Monday, October 26, 2015 11:05 AM
To: (b) (6); (b) (6)
Cc: (b) (6)
Subject: CL cases

(b) (6)

What stopcodes do you put your CL cases under?

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Wednesday, December 16, 2015 10:48 AM
To: (b) (6) | (b) (6)
Cc: (b) (6)
Subject: RE: CLCW: all cancer discussion

I don't think we can require that a Veteran pay to see a medical expert to get a letter.

From: (b) (6)
Sent: Tuesday, December 15, 2015 1:34 PM
To: (b) (6); (b) (6)
Cc: (b) (6)
Subject: CLCW: all cancer discussion

(b) (6) makes a very good point below, do you agree?

What I think would be helpful would be to try to discover what rationale the technical work group used for the conditions that did not make the cut. If the technical work group found insufficient evidence for presumptive status (i.e. bladder cancer), then perhaps VBA should exclude these conditions from SME consideration unless a nexus letter has been provided. ATSDR looked at the following conditions when making their recommendations:

Kidney Cancer	p. 8
Non-Hodgkin Lymphoma	p. 11
Multiple Myeloma	p. 16
Leukemias	p. 20
Liver Cancer	p. 24
Pancreatic Cancer	p. 27
Prostate Cancer	p. 30
Breast Cancer	p. 32
Bladder Cancer	p. 35
Parkinson's disease	p. 37
Kidney Diseases	p. 39
Esophageal Cancer	p. 41
Lung Cancer	p. 43
Rectal Cancer	p. 46
Cervical Cancer	p. 48
Brain/CNS Cancers	p. 50
Systemic Sclerosis/Scleroderma	p. 52
Cardiac Malformations	p. 53

Perhaps we could remove those conditions not considered presumptive from the "all cancers" list unless a nexus letter exists as noted.

(b) (6)
Office of Disability & Medical Assessment
Department of Veterans Affairs
810 Vermont Ave. NW

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Thursday, November 05, 2015 1:25 PM
To: (b) (6)
Subject: RE: CLCW: Congressional

I will do him next. I am working on (b) (6) right now and it looks like he also has a congressional inquiry.

From: (b) (6)
Sent: Thursday, November 05, 2015 1:23 PM
To: (b) (6) (b) (6)
Subject: CLCW: Congressional

(b) (6)

I just assigned you a Congressional interest case, (b) (6). Please expedite upon receipt.

(b) (6)
Office of Disability & Medical Assessment
Department of Veterans Affairs
810 Vermont Ave. NW
Washington, DC 20420

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Thursday, November 19, 2015 9:02 AM
To: (b) (6)
Subject: RE: CLCW: data

Hi, (b) (6)

I haven't heard from you in so long, I thought you might have left. I hope you are doing well.

I'm afraid we don't have a "list" of claimed conditions. We track the 13 primary disease categories as noted in the NRC report, but nothing else. As of the end of September, we had made decisions on just over 30,000 issues that make up the "miscellaneous" category, and just over 3,000 that are in the tracked category.

I don't know that we could break down the miscellaneous issues as they consist of just about anything: hearing loss, tinnitus, heart disease, hypertension, erectile dysfunction...on and on.

(b) (6)

From: (b) (6)
Sent: Thursday, November 19, 2015 8:30 AM
To: (b) (6)
Subject: CLCW: data

(b) (6)

Can you provide a list of claimed conditions for CLCW? (b) (6) would like to provide this to (b) (6)

(b) (6)

Office of Disability & Medical Assessment
Department of Veterans Affairs
810 Vermont Ave. NW
Washington, DC 20420

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Thursday, November 19, 2015 9:42 AM
To: (b) (6)
Subject: RE: CLCW: data

You are most welcome.

Have a great holiday season! By the way: I saw (b) (6) yesterday. He was in one of our elevators on his way to meet with some of the MyVA people in our building.

(b) (6)

From: (b) (6)
Sent: Thursday, November 19, 2015 9:37 AM
To: (b) (6)
Subject: RE: CLCW: data

Thanks (b) (6)

I will certainly send your response forward.

As for me, I am hanging in there. I am doing well, excited about the holiday season and looking forward to the new year. I hope all is well with you. Please send (b) (6) my best regards.

(b) (6)

From: Flohr, Brad, VBAVACO
Sent: Thursday, November 19, 2015 9:02 AM
To: Beads, Syreeta
Subject: RE: CLCW: data

Hi, (b) (6),

I haven't heard from you in so long, I thought you might have left. I hope you are doing well.

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Subject: CLCW: data

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(b) (6)

Office of Disability & Medical Assessment
Department of Veterans Affairs
810 Vermont Ave. NW
Washington, DC 20420

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Friday, September 18, 2015 12:57 AM
To: (b) (6)
Cc: (b) (6)
Subject: RE: CLCW: Defining Renal Toxicity

Hi (b) (6),

Has the IOM report cited been published? Do we know what the formal citation should be, so we can start using the IOM opinion immediately.

(b) (6)

From: (b) (6)
Sent: Thursday, September 17, 2015 11:36 AM
To: VHA CO CLCW SME
Subject: CLCW: Defining Renal Toxicity

Good Morning,

The attached document was provided to VBA as guidance for defining renal toxicity. I am actively working to encourage implementation by VBA.

Kind Regards,

(b) (6)
Office of Disability & Medical Assessment
Department of Veterans Affairs
810 Vermont Ave. NW
Washington, DC 20420

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Wednesday, September 23, 2015 10:33 PM
To: (b) (6)
Cc: (b) (6)
Subject: RE: CLCW: Defining Renal Toxicity

Thank you.

From: (b) (6)
Sent: Monday, September 21, 2015 8:26 AM
To: (b) (6)
Cc: (b) (6)
Subject: RE: CLCW: Defining Renal Toxicity

(b) (6)

See the attached document

http://iom.nationalacademies.org/Reports/2015/VA-Clinical-Guidance.aspx?utm_source=IOM+Email+List&utm_campaign=e681027d98-New+Report+Review+of+VA+Clinical+Guidance&utm_medium=email&utm_term=0_211686812e-e681027d98-180268837

From: (b) (6)
Sent: Friday, September 18, 2015 12:57 AM
To: (b) (6)
Cc: (b) (6)
Subject: RE: CLCW: Defining Renal Toxicity

Hi (b) (6),

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(b) (6)

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Kind Regards,

(b) (6)

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(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Thursday, September 24, 2015 9:51 AM
To: (b) (6)
Subject: RE: CLCW: expedite case

I will move it to the top of the pile. I did a new review on (b) (6), but there is no exam request which means that I can't release it. Can you help?

From: (b) (6)
Sent: Thursday, September 24, 2015 8:01 AM
To: (b) (6)
Subject: CLCW: expedite case

Please expedite this case below, it was assigned today (9/24)

(b) (6)

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Tuesday, September 08, 2015 3:28 PM
To: (b) (6)
Subject: RE: CLCW: kidney condition

(b) (6)

I don't know (b) (6) but will get with Louisville management tomorrow to discuss this.

(b) (6)

From: (b) (6)
Sent: Tuesday, September 08, 2015 3:23 PM
To: (b) (6)
Cc: (b) (6); (b) (6)
Subject: FW: CLCW: kidney condition

(b) (6)

Below is a message I received from the Louisville RO. Please advise on the status of updating your training letter to define renal toxicity based on our last call.

Thanks,

(b) (6)

From: (b) (6)
Sent: Tuesday, September 08, 2015 1:30 PM
To: (b) (6); (b) (6)
Cc: (b) (6); (b) (6); (b) (6); (b) (6); (b) (6); (b) (6)
Subject: RE: CLCW: kidney condition
Importance: High

(b) (6); (b) (6)

I apologize for the late response to your emails. I have been out of the office for a couple of weeks.

For the issue below, until we are provided with specific guidance on the types of conditions we require SMEs for, we cannot change our current procedures. As of right now, until we receive the guidance, we must request SME opinions for the following conditions (as long as we have a medical diagnosis):

1. esophageal cancer
2. lung cancer
3. breast cancer
4. bladder cancer
5. kidney cancer
6. adult leukemia
7. multiple myeloma
8. myelodysplastic syndromes

9. renal toxicity* – we will request an SME for any diagnosed kidney condition
10. hepatic steatosis* – must be fatty liver/hepatic steatosis
11. female infertility
12. miscarriage, with exposure during pregnancy (must be pregnant during CLCW exposure)
13. scleroderma
14. neurobehavioral effects* – they must have symptoms while they are being exposed.
15. **All Diagnosed Cancers**

I spoke with (b) (6) about a similar issue a few weeks ago. If we can get that guidance pushed out, it would dramatically decrease the amount of SME opinions being requested. Until then, we are required to request these SME opinions.

Thanks,

(b) (6)

From: (b) (6)
Sent: Wednesday, August 26, 2015 5:02 PM
To: (b) (6)
Cc: (b) (6)
Subject: CLCW: kidney condition

(b) (6)

I just ask one of the VSR about a case with the contention kidney damage. She stated all kidney conditions are related. This explains why we need to work on guidance on renal toxicity. I informed her the conditions are chronic kidney disease, end stage renal disease and kidney cancer. We are working with (b) (6) to provide the guidance.

(b) (6)

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810 Vermont Ave NW
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(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Wednesday, September 16, 2015 11:49 AM
To: (b) (6)
Subject: RE: CLCW: Kidney Conditions Guidance

Excellent. Thanks, (b) (6)

From: (b) (6)
Sent: Wednesday, September 16, 2015 11:13 AM
To: (b) (6)
Cc: (b) (6); (b) (6) (b) (6)
Subject: CLCW: Kidney Conditions Guidance

(b) (6)

Please see the updated document with the updated definition of renal toxicity.

(b) (6)
Office of Disability & Medical Assessment
Department of Veterans Affairs
810 Vermont Ave NW
Washington, DC 20420

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Wednesday, August 26, 2015 10:55 AM
To: (b) (6)
Subject: RE: CLCW: Kidney Disease

I know. The IOM report was requested to determine what those terms mean for health care. It doesn't really mean much for compensation. At least, that is how I see it.

(b) (6)

From: (b) (6)
Sent: Wednesday, August 26, 2015 10:54 AM
To: (b) (6)
Subject: RE: CLCW: Kidney Disease

(b) (6)

The document is providing a definition of renal toxicity. Right now we receive a request for any thing that says renal or kidney. This is similar to what was provided to define neurobehavioral effects.

(b) (6)

From: (b) (6)
Sent: Wednesday, August 26, 2015 10:51 AM
To: (b) (6)
Subject: RE: CLCW: Kidney Disease

Now I understand what this is about. I am glad to have the call, but I can tell you that we cannot accept the recommendation. We have a statutory duty to assist Veterans who file claims. At the initial stage of the claim, there must be evidence of a current disability, which could be lay evidence; evidence of an injury, disease, or event (such as a toxic exposure); and evidence of a link between the current disability and service. The Veterans court has held that there is a very low threshold for determining the adequacy of the link. For example, a statement from a podiatrist that the Veteran's lung cancer is due to drinking the contaminated water at Lejeune is satisfactory to establish the "link." However, unless the statement is supported by reference to medical or scientific treatises, the statement from the podiatrist is insufficient to decide the claim. Under the provisions of 38 U.S.C. 5103A(d) and 38 CFR 3.159(c)(4), "VA will provide a medical examination or obtain a medical opinion based upon a review of the evidence of record if VA determines it is necessary to decide the claim." This is necessary if the information or evidence provided by the claimant "does not contain sufficient competent medical evidence to decide the claim."

As each claim is decided on the basis of the facts in each particular claim, I don't believe we could prevail in litigation by discounting competent evidence provided by a Veteran solely on the basis of the IOM report as our decision makers cannot insert their own unsubstantiated medical opinion into the decision process.

At the request of the Secretary, ATSDR is looking at a number of conditions that may have a relationship with exposure to the toxins at Lejeune. One of them is chronic kidney disease. They reviewed the IOM report cited in your paper which noted "...there is some evidence for increased mortality from solvent-incuded hypertensive end-stage renal disease (ESRD), the association between TCE and PCE and chronic kidney disease is less clear, although there does appear to be an association between exposures to high levels of these slovents and ESRD." They also cited several other studies finding evidence of increased risk of nephritis and nephrosis; non-malignant chronic renal disease; acute

glomerulonephritis/nephrotic syndrome/acute renal failure. They concluded their review by stating: Using the IOM classification, TCE and/or PCE should be classified as having sufficient evidence of an association.

(b) (6)

From: (b) (6)
Sent: Wednesday, August 26, 2015 9:57 AM
To: (b) (6)
Subject: CLCW: Kidney Disease

(b) (6)

Please see the attached document in support of our meeting at 1pm today.

(b) (6)

Office of Disability & Medical Assessment
Department of Veterans Affairs
810 Vermont Ave NW
Washington, DC 20420

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Wednesday, August 26, 2015 10:51 AM
To: (b) (6)
Subject: RE: CLCW: Kidney Disease

Now I understand what this is about. I am glad to have the call, but I can tell you that we cannot accept the recommendation. We have a statutory duty to assist Veterans who file claims. At the initial stage of the claim, there must be evidence of a current disability, which could be lay evidence; evidence of an injury, disease, or event (such as a toxic exposure); and evidence of a link between the current disability and service. The Veterans court has held that there is a very low threshold for determining the adequacy of the link. For example, a statement from a podiatrist that the Veteran's lung cancer is due to drinking the contaminated water at Lejeune is satisfactory to establish the "link." However, unless the statement is supported by reference to medical or scientific treatises, the statement from the podiatrist is insufficient to decide the claim. Under the provisions of 38 U.S.C. 5103A(d) and 38 CFR 3.159(c)(4), "VA will provide a medical examination or obtain a medical opinion based upon a review of the evidence of record if VA determines it is necessary to decide the claim." This is necessary if the information or evidence provided by the claimant "does not contain sufficient competent medical evidence to decide the claim."

As each claim is decided on the basis of the facts in each particular claim, I don't believe we could prevail in litigation by discounting competent evidence provided by a Veteran solely on the basis of the IOM report as our decision makers cannot insert their own unsubstantiated medical opinion into the decision process.

At the request of the Secretary, ATSDR is looking at a number of conditions that may have a relationship with exposure to the toxins at Lejeune. One of them is chronic kidney disease. They reviewed the IOM report cited in your paper which noted "...there is some evidence for increased mortality from solvent-incuded hypertensive end-stage renal disease (ESRD), the association between TCE and PCE and chronic kidney disease is less clear, although there does appear to be an association between exposures to high levels of these slovents and ESRD." They also cited several other studies finding evidence of increased risk of nephritis and nephrosis; non-malignant chronic renal disease; acute glomerulonephritis/nephrotic syndrome/acute renal failure. They concluded their review by stating: Using the IOM classification, TCE and/or PCE should be classified as having sufficient evidence of an association.

(b) (6)

From: (b) (6)
Sent: Wednesday, August 26, 2015 9:57 AM
To: (b) (6)
Subject: CLCW: Kidney Disease

(b) (6)

Please see the attached document in support of our meeting at 1pm today.

(b) (6)

Office of Disability & Medical Assessment
Department of Veterans Affairs
810 Vermont Ave NW
Washington, DC 20420

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Wednesday, August 26, 2015 1:02 PM
To: (b) (6)
Subject: RE: CLCW: Kidney Disease

Are you dialing in?

From: (b) (6)
Sent: Wednesday, August 26, 2015 9:57 AM
To: (b) (6)
Subject: CLCW: Kidney Disease

(b) (6)

Please see the attached document in support of our meeting at 1pm today.

(b) (6)

Office of Disability & Medical Assessment
Department of Veterans Affairs
810 Vermont Ave NW
Washington, DC 20420

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Wednesday, December 16, 2015 5:12 PM
To: (b) (6)
Subject: RE: CLCW: Letter

Thank you.

From: (b) (6)
Sent: Tuesday, December 15, 2015 3:30 PM
To: (b) (6)
Cc: (b) (6)
Subject: CLCW: Letter

See attached document.

(b) (6)
Office of Disability & Medical Assessment
Department of Veterans Affairs
810 Vermont Ave. NW
Washington, DC 20420

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Monday, December 21, 2015 12:06 PM
To: (b) (6); (b) (6); (b) (6)
Subject: RE: CLCW: Press Release Update

I argued this point specifically before they made their recs to the Sec but to no avail.

From: (b) (6)
Sent: Monday, December 21, 2015 11:08 AM
To: (b) (6); (b) (6) VHA CO CLCW SME
Subject: RE: CLCW: Press Release Update

Yes, once it becomes a presumptive condition

From: (b) (6)
Sent: Monday, December 21, 2015 10:59 AM
To: (b) (6) VHA CO CLCW SME
Subject: RE: CLCW: Press Release Update

Thanks!

Will liver cancer in the presence of hepatitis C still count as a presumptive service-connected disease?

From: (b) (6)
Sent: Monday, December 21, 2015 9:51 AM
To: VHA CO CLCW SME
Subject: CLCW: Press Release Update

Good Morning,

I wanted to clarify a couple of points below concerning the CLCW presumptives.

- VBA continue to process claims, they will grant those that they can, and defer denials for one of the 8 presumptives until the regulations are published.
 - The presumptives are: Kidney cancer; Liver Cancer; non-Hodgkin Lymphoma; Leukemias; Multiple Myeloma; Scleroderma; Parkinson's disease; and Aplastic Anemia/Myelodysplastic Syndromes.
- This is the highest priority regulation for the Secretary so they will do all they can to get a final rule published.
- In general, it usually take 2 years to complete the regulations, they are aiming for 18 months.
- Please address all conditions listed on the 2507s, even though it may be on the presumptive list

Thanks,

(b) (6)

From: U.S. Department of Veterans Affairs [<mailto:veteransaffairs@public.govdelivery.com>]

Sent: Thursday, December 17, 2015 2:33 PM

To: (b) (6)

Subject: [EXTERNAL] VA Plans to Propose Expanded Disability Benefits Eligibility for Veterans Exposed to Contaminated Water at Camp Lejeune

VETERANS AFFAIRS



VA News Release

VA Plans to Propose Expanded Disability Benefits Eligibility for Veterans Exposed to Contaminated Water at Camp Lejeune

12/17/2015 02:27 PM EST

VA Plans to Propose Expanded Disability Benefits Eligibility for Veterans Exposed to Contaminated Water at Camp Lejeune

WASHINGTON – The Department of Veterans Affairs (VA) announced today that it plans to propose expanded disability compensation eligibility for Veterans exposed to contaminated drinking water while assigned to Marine Corps Base Camp Lejeune.

From 1953 to 1987, water sources at the base were contaminated with industrial solvents that are correlated with certain health conditions. Secretary of Veterans Affairs Robert A. McDonald decided to propose presumptions of service connection for certain conditions associated with these chemical solvents following discussions between environmental health experts at the Veterans Health Administration and the Department of Health and Human Services Agency for Toxic Substances and Disease Registry (ATSDR).

"The water at Camp Lejeune was a hidden hazard, and it is only years later that we know how dangerous it was," said Secretary McDonald. "We thank ATSDR for the thorough review that provided much of the evidence we needed to fully compensate Veterans who develop one of the conditions known to be related to exposure to the compounds in the drinking water."

ATSDR determined that the drinking water at Camp Lejeune was contaminated with

perchloroethylene, trichloroethylene, vinyl chloride, benzene and other petroleum contaminants from leaking storage tanks from 1953 to 1987. ATSDR also determined that prolonged exposure to these chemicals increases the risk of certain health conditions.

Based upon VA's review of current medical science and ATSDR's findings, Secretary McDonald intends to propose creation of a presumption of service connection for the following conditions:

- Kidney Cancer
- Liver Cancer
- Non-Hodgkin Lymphoma
- Leukemia
- Multiple Myeloma
- Scleroderma
- Parkinson's Disease
- Aplastic Anemia / Myelodysplastic Syndromes

The Secretary's proposal would also expand benefits eligibility to Reserve and National Guard personnel who served at Camp Lejeune for any length of time from August 1, 1953, through December 31, 1987. These personnel would be presumed to have been exposed to the contaminated water during their Reserve or National Guard service and, in appropriate circumstances, to have been disabled by such exposure during service, thus allowing them to qualify for VA benefits under the statutory definition of "Veteran."

This would make them eligible for VA disability compensation and medical care for any of the presumptive conditions, and their surviving dependents would be eligible for dependency and indemnity compensation and burial benefits.

VA is working on regulations that would establish these presumptions, making it easier for affected Veterans to receive VA disability compensation for these conditions. While VA cannot grant any benefit claims based on the proposed presumption of service connection for these conditions until it issues its final regulations, it encourages Veterans who have a record of service at Camp Lejeune between August 1, 1953, and December 31, 1987, and develop a condition that they believe is related to exposure to the drinking water at the base, to file a disability compensation claim with VA.

VA will continue to grant claims for disabilities claimed to be associated with exposure to the contaminants that can be granted under current regulations and review of the evidence in each case. If a claim for service connection for one of the proposed presumptive conditions would be denied under current regulations, the denial will be stayed until VA issues its final regulations. VA will announce when the regulations are final and presumptive benefits can begin to be awarded. For more information on applying for these benefits, visit:

http://benefits.va.gov/compensation/claims-postservice-exposures-camp_lejeune_water.asp.

Veterans who served at Camp Lejeune for 30 days or more between August 1, 1953, and December 31, 1987, are already eligible to receive VA healthcare for up to 15 health conditions. More information, including a full list of covered conditions, can be found online at: <http://www.publichealth.va.gov/PUBLICHEALTH/exposures/camp-lejeune/index.asp>.

Veterans can establish eligibility for healthcare benefits by submitting VA Form 10-10EZ online at www.1010ez.med.va.gov/, downloading it at

www.va.gov/vaforms/medical/pdf/1010EZ-fillable.pdf and returning it to any VA Medical Center or Clinic, or by calling 1-877-222-VETS (8387), Monday through Friday, between the hours of 8:00 AM and 8:00 PM (Eastern Time).

VA is reimbursing certain veterans' family members for eligible out-of-pocket medical expenses related to the 15 covered conditions. More information can be found at: <https://www.clfamilymembers.fsc.va.gov>

###

Keep updated & let us know how we're doing.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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If you are in crisis and need immediate help, please call 1-800-273-8255 and TDDing 202-696-6000 or visit **<http://www.veteranscrisisline.net/>**

Please remember the only secure way to ask personal questions is at **<https://iris.custhelp.com>**

Explore VA benefits at **explore.va.gov**

Sent to kathleen.andrews@va.gov on behalf of US Department of Veterans Affairs
810 Vermont Avenue, NW • Washington, DC 20420

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Friday, December 18, 2015 3:38 PM
To: (b) (6)
Subject: RE: CLCW: Press Release

Yes. I'll send it to you.

From: (b) (6)
Sent: Friday, December 18, 2015 3:24 PM
To: (b) (6)
Subject: CLCW: Press Release

(b) (6)

Was there a press release concerning the CLCW presumptives? I have not seen anything yet.

(b) (6)

Office of Disability & Medical Assessment
Department of Veterans Affairs
810 Vermont Ave. NW
Washington, DC 20420

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Friday, December 18, 2015 1:31 PM
To: (b) (6)
Subject: RE: CLCW: VBA Data Report

My PIV card reader is not working. I'm going to have to order a new one so I can't open anything encrypted right now

From: (b) (6)
Sent: Friday, December 18, 2015 8:37 AM
To: VHA CO CLCW SME
Subject: CLCW: VBA Data Report

Good Morning,

Please see the attached report from VBA concerning grant rates for CLCW as of November 2015.

<< File: Camp_Lejeune-NOV 2015_BY_VET.doc >>

(b) (6)
Office of Disability & Medical Assessment
Department of Veterans Affairs
810 Vermont Ave. NW
Washington, DC 20420

(b) (6)



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Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Wednesday, December 16, 2015 3:31 PM
To: (b) (6)
Subject: RE: don't have my PIV card in right now

I'm on medical leave til at least Jan 4. Let me think about it. They would let me and not count it as sick time.

From: (b) (6)
Sent: Wednesday, December 16, 2015 11:39 AM
To: (b) (6)
Subject: RE: don't have my PIV card in right now

Are you able to complete a medical opinion are on you on leave?

From: (b) (6)
Sent: Wednesday, December 16, 2015 11:37 AM
To: (b) (6)
Subject: don't have my PIV card in right now

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Wednesday, December 16, 2015 4:30 PM
To: (b) (6)
Subject: RE: don't have my PIV card in right now

It's ok. Maybe I will. I am doing some stuff anyway. I had to clear out my queue earlier today.

From: (b) (6)
Sent: Wednesday, December 16, 2015 4:29 PM
To: (b) (6)
Subject: RE: don't have my PIV card in right now

I was just asking, I don't want you to work on your sick leave.

From: (b) (6)
Sent: Wednesday, December 16, 2015 3:31 PM
To: (b) (6)
Subject: RE: don't have my PIV card in right now

I'm on medical leave til at least Jan 4. Let me think about it. They would let me and not count it as sick time.

From: (b) (6)
Sent: Wednesday, December 16, 2015 11:39 AM
To: (b) (6)
Subject: RE: don't have my PIV card in right now

Are you able to complete a medical opinion are on you on leave?

From: (b) (6)
Sent: Wednesday, December 16, 2015 11:37 AM
To: (b) (6)
Subject: don't have my PIV card in right now

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Thursday, October 15, 2015 12:35 AM
To: (b) (6)
Subject: RE: LCW SME - Homeless

Hi,

Thank you. Is (b) (6) still cancelled?

From: (b) (6)
Sent: Wednesday, October 14, 2015 11:48 AM
To: (b) (6)
Subject: RE: LCW SME - Homeless

Hello,

1. (b) (6) is the Veteran, I requested the 2507 again

From: (b) (6)
Sent: Friday, October 09, 2015 2:44 PM
To: (b) (6)
Subject: RE: LCW SME - Homeless

Hi (b) (6)

I plan on doing it today or Sunday.

Did (b) (6) get reinstated? It was cancelled two weeks ago, but my C&P administrator checked because I received a 2507. There is an open request in CAPRI.

Can you please verify that (b) (6) is really (b) (6)? Also there is no open request for the only (b) (6).

Thanks,

(b) (6)

From: (b) (6)
Sent: Thursday, October 08, 2015 8:15 AM
To: (b) (6)
Subject: LCW SME - Homeless
Importance: High

Please expedite this case.

(b) (6)

Chronic Kidney Disease Stage IV
Camp Lejeune – (b) (6) 1976 – (b) (6) 1978

A SME assignment was requested 7/28/2015, yet to be assigned.

Congressman Chris Gibson's office (NY) is inquiring. They indicate the Veteran is 'basically' homeless, though he is not flashed as such. VAMC records indicate he has chronic kidney disease Stage IV. SME sought is for renal toxicity.

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Monday, December 21, 2015 12:29 PM
To: (b) (6); (b) (6); (b) (6)
Subject: RE: Please redirect claim.

Please make sure this case is cancelled asap.

From: (b) (6)
Sent: Friday, December 18, 2015 8:43 AM
To: (b) (6); (b) (6)
Cc: (b) (6); (b) (6)
Subject: RE: Please redirect claim.

Hello,

(b) (6) is out on a medical and will not return to the office until January 2016.
For the benefit of our Veterans, we are under strict guidelines to complete these claims under 30 days.

Are you saying that (b) (6) will complete this claim from home?

Thank you.
Respectfully,

(b) (6)

From: (b) (6)
Sent: Friday, December 18, 2015 8:32 AM
To: (b) (6); (b) (6)
Cc: (b) (6)
Subject: RE: Please redirect claim.

(b) (6)

I spoke to (b) (6) and she will be completing cases.

From: (b) (6)
Sent: Friday, December 18, 2015 8:06 AM
To: (b) (6); (b) (6)

Cc: (b) (6)
Subject: RE: Please redirect claim.
Importance: High

Hello Team,

After 5 requests, the claim mentioned below is still open.

Please let me know if I should redirect my request to another person as this Veterans claim has been sitting for a number of days.

Respectfully,

(b) (6)

From: (b) (6)
Sent: Wednesday, December 16, 2015 11:13 AM
To: (b) (6) (b) (6)
Subject: RE: Please redirect claim.

(b) (6) can you re-assign this one please?

Thanks,

(b) (6)

From: (b) (6)
Sent: Wednesday, December 16, 2015 7:58 AM
To: (b) (6)
Subject: Please redirect claim.
Importance: High

Hello (b) (6),

I have left several messages on your answering machine (this is my 4th attempt to contact you).

Please redirect the claim mentioned below to another facility as our Camp Lejeune doctor (b) (6) is out on a medical and no other doctors are certified to do these exams.

Time is ticking on this claim. Please help me help this Veteran by redirecting this claim.

Name: (b) (6) SSN: (b) (6) C - NUM: (b) (6)

This request was initiated on DEC 1,2015 at 12:19:40

Requester: (b) (6)

Requesting Regional Office: LOUISVILLE-RO

VHA Division Processing Request: ANN ARBOR VA MEDICAL CENTER

Exams on this request: DBQ MEDICAL OPINION;

Thank you.

Respectfully,

(b) (6)

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Thursday, October 15, 2015 9:57 AM
To: (b) (6); (b) (6); (b) (6)
Subject: RE: RESPONSE CAP REQUEST FOR VA Representative - December CAP Meeting : E-mail for (b) (6)

thx

(b) (6)

810 Vermont Avenue, NW
Washington DC 20420

From: (b) (6)
Sent: Thursday, October 15, 2015 9:52 AM
To: (b) (6); (b) (6); (b) (6)
Subject: RE: RESPONSE CAP REQUEST FOR VA Representative - December CAP Meeting : E-mail for (b) (6)

- (b) (6) is an SME and will not attend the CAP meeting.
- (b) (6) of VBA Louisville Regional Office. He is a point of contact I frequently use.
- I am not familiar with the others.

(b) (6)

Office of Disability & Medical Assessment
Department of Veterans Affairs
810 Vermont Ave. NW
Washington, DC 20420

(b) (6)



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From: (b) (6)
Sent: Thursday, October 15, 2015 9:49 AM

To: (b) (6) (b) (6) (b) (6)

Subject: RE: RESPONSE CAP REQUEST FOR VA Representative - December CAP Meeting : E-mail for (b) (6)

I do not.

(b) (6) are the names below familiar to you?

From: (b) (6)

Sent: Thursday, October 15, 2015 9:43 AM

To: (b) (6) (b) (6)

Subject: RE: RESPONSE CAP REQUEST FOR VA Representative - December CAP Meeting : E-mail for (b) (6)

But do you know either of these people?

(b) (6)

810 Vermont Avenue, NW
Washington DC 20420

From: (b) (6)

Sent: Thursday, October 15, 2015 9:40 AM

To: (b) (6) (b) (6)

Subject: RE: RESPONSE CAP REQUEST FOR VA Representative - December CAP Meeting : E-mail for (b) (6)

(b) (6) and someone OPH usually attends. Our SMEs are VA employees so I am not sure about contractors. They (SMEs) are not likely going to agree to attend the meeting give what they have been through with this group.

From: (b) (6)

Sent: Thursday, October 15, 2015 9:33 AM

To: (b) (6) (b) (6)

Subject: FW: RESPONSE CAP REQUEST FOR VA Representative - December CAP Meeting : E-mail for (b) (6)

Importance: High

The Community Advisory Panel for Camp Lejeune is meeting in FL on December 4-5 and requested participation from 2 VHA folks below – when I checked out (b) (6) in the GAL she appears to be a program support assistant.

I know we have some doctors working under contract – do we know names? (also I'd assume we can't pay for a contractor to travel?)

Fyi I will be going

(b) (6)

(b) (6)

810 Vermont Avenue, NW
Washington DC 20420

From: (b) (6)

Sent: Thursday, October 15, 2015 8:35 AM

To: (b) (6)

Subject: [EXTERNAL] Fw: RESPONSE CAP REQUEST FOR VA Representative - December CAP Meeting : E-mail for (b) (6)

Sent from my BlackBerry 10 smartphone.

From: (b) (6)

Sent: Wednesday, October 14, 2015 5:44 PM

To: (b) (6)

Subject: FW: RESPONSE CAP REQUEST FOR VA Representative - December CAP Meeting

Below us the rationale for the VA invitees. Call if you want to discuss.

The CAP provided me with the following response to why the following people would be important (aka terrific):

1. (b) (6) - VAMC Lexington
2. (b) (6) - VAMC Lexington

We understand (b) (6) of Lexington, KY VAMC and (b) (6) of Louisville, KY VAMC are the environmental coordinators – the “go to” doctors for contamination exposure at each of their VA facilities. They would be the best VA resources for Camp Lejeune veterans and their families that are or will be using VA care and could help both the CAP and the attendees in Tampa understand what is involved

3. (b) (6) - Louisville VARO
4. (b) (6) - Louisville VARO

We understand that (b) (6) is a deputy director and (b) (6) is chief supervisor of Louisville and they have been involved with the groups that have handled Camp Lejeune Contaminated Water claims there. Both the CAP and the meeting attendees could ask these folks questions related to the claims process.

5. (b) (6) - VA Connecticut Healthcare System West Haven Campus

We also understand that (b) (6) is a Camp Lejeune SME. The SME is of great interest to both the CAP and the community. We want to hear more from them about the VBA's claims process and would like a representative to be available for questions from the CAP and attendees.

(b) (6)

From: (b) (6)
Sent: Friday, September 18, 2015 12:37 PM
To: (b) (6) (b) (6)
Cc: (b) (6); (b) (6) (b) (6) (b) (6) (b) (6) (b) (6)
(b) (6)
Subject: RE: E-mail for (b) (6)

Yes

Any background you might be able to offer re. why these people etc would be terrific

(b) (6)

810 Vermont Avenue, NW
Washington DC 20420

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Tuesday, October 27, 2015 1:02 AM
To: (b) (6)
Cc: (b) (6)
Subject: RE: This week #2

Please clarify what I am supposed to address on (b) (6). I did a report on him in September for metastatic squamous cell ca of the tongue.

From: (b) (6)
Sent: Tuesday, October 27, 2015 12:42 AM
To: (b) (6)
Subject: This week

Hi (b) (6),

I just released 10 exams to you. I would have released 11, but (b) (6) has no request in CAPRI. I have not been able to locate (b) (6). I have looked in CPRS and CAPRI under both (b) (6) and (b) (6). Can you help? Not counting these two, I have only four more in queue, not counting the three that (b) (6) has in his queue for me.

Thanks for your help,
(b) (6)

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Tuesday, October 27, 2015 12:42 AM
To: (b) (6)
Subject: This week

Hi (b) (6),

I just released 10 exams to you. I would have released 11, but (b) (6) has no request in CAPRI. I have not been able to locate (b) (6). I have looked in CPRS and CAPRI under both (b) (6) and (b) (6). Can you help? Not counting these two, I have only four more in queue, not counting the three that (b) (6) has in his queue for me.

Thanks for your help,

(b) (6)

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Wednesday, October 07, 2015 6:18 AM
To: (b) (6)
Subject: Update

Hi (b) (6)

Thank you for keeping them coming. I am now officially back at work, so I can once again begin knocking out the cases quickly. I went to upload one that I completed on (b) (6) only to find that it was cancelled. What do I do with my report?

I also noticed that (b) (6), was no longer on the list of my assigned cases. What do I do with his almost finished report?

Thanks,

(b) (6)

Parrillo, Jeffrey M. (VACO)

From: (b) (6)
Sent: Wednesday, December 09, 2015 3:15 PM
To: (b) (6); (b) (6)
Cc: (b) (6); (b) (6)
Subject: Veterans group to seek information on contaminated water at Camp Lejeune - News - The Daily News - Jacksonville, NC

http://www.jdnews.com/article/20151209/NEWS/151209146#151209146/?Start=2&_suid=144969166385508621339200241544

The hits just keep on coming.

(b) (6)