DEPARTMENT OF VETERANS AFFAIRS (VA)

Statement of Regulatory Priorities

The Department of Veterans Affairs (VA) administers services and benefit programs that recognize the important federal obligations to those who served this Nation. VA's regulatory responsibility is almost solely confined to carrying out mandates of the laws enacted by Congress relating to programs for veterans and their families. VA's major regulatory objective is to implement these laws with fairness, justice, and efficiency.

Most of the regulations issued by VA involve at least one of three VA components: the Veterans Benefits Administration, the Veterans Health Administration, and the National Cemetery Administration. The primary mission of the Veterans Benefits Administration is to provide high-quality and timely nonmedical benefits to eligible veterans and their dependents. The primary mission of the Veterans Health Administration is to provide high-quality health care on a timely basis to eligible veterans through its system of medical centers, nursing homes, domiciliaries, and outpatient medical and dental facilities. The primary mission of the National Cemetery Administration is to memorialize eligible veterans, members of the Reserve components, and their dependents in VA National Cemeteries and to maintain those cemeteries as national shrines in perpetuity as a final tribute of a grateful Nation to commemorate their service and sacrifice to our Nation.

VA's regulatory priorities also reflect our robust engagement process with stakeholders and our strong culture of evidence-based decision making. Through regular stakeholder meetings, public hearings, Small Business Advocacy Review Panels, and public comments on proposed regulations, the Department engages with diverse stakeholders to seek input on our regulatory agenda overall or feedback on proposed rules. When VA publishes a proposed rule, it is current practice to send a Plain Language Summary Document (PLSD) to VSOs, Congress and Intergovernmental Affairs offices notifying them that a proposed rule is open for public comment. We also do this for Final rules and in some instances, we send a Press Release document in lieu of the PLSD. A Press Release and a PLSD is a summary of the published rule, its impacts, why the rule is necessary and who the rule impacts.

Among the specific rules described below, we include further details on previous stakeholder engagement

and future opportunities for stakeholder engagement. VA's regulatory priority plan consists of thirteen (13) priority regulations. The regulations listed below are not in any priority order.

AR96 - Amendments to the Caregivers Program

Summary: The rule will propose amendments to the eligibility criteria, definitions used, and consider other changes to evaluation processes for the Program of Comprehensive Assistance for Family Caregivers, which provides services and benefits, including a monthly stipend, for eligible caregivers of veterans who sustained a serious injury or illness in the line of duty.

Rule Type: Proposed Rule EO 12866: 3(f)(1) Significant

EO 14094: Yes

1

3

Estimated Publication Date: 3/00/24

AS00 - Revision of Veterans Community Care Program (VCCP) Access Standards

Summary: VA proposes to revise its designated access standards for purposes of the Veterans Community Care Program to consider a veteran's preference for telehealth when scheduling appointments. VA additionally proposes to consider whether and how to address standards for when a VA provider is not available within the existing average drive time standards.

Rule Type: Proposed Rule EO 12866: Other Significant

EO 14094: No

Estimated Publication Date: 4/00/24

AQ95 - Update and Clarify Regulatory Bars to Benefits Based on Character of Discharge

Summary: The Department of Veterans Affairs (VA) is amending its regulations regarding character of discharge determinations. The amendments will modify the regulatory framework for discharges considered "dishonorable" for VA benefit eligibility purposes, such as discharges due to "willful and persistent misconduct," an offense involving "moral turpitude," and homosexual acts involving aggravating circumstances or other factors affecting the "performance of duty." This rule contains early public participation/engagement in the rulemaking process in accordance with Executive Order 14094.

Rule Type: Final Rule

EO 12866: 3(f)(1) Significant

EO 14094: Yes

Estimated Publication Date: 1/00/24

AR10 - Updating VA Adjudication Regulations for Disability or Death Benefit Claims Related to Herbicide Exposure.

Summary: The Department of Veterans Affairs (VA) proposes to amend its adjudication regulations relating to exposure to herbicides, such as Agent Orange, in order to incorporate the provisions of the Blue Water Navy Vietnam Veterans Act of 2019 (the BWN Act). This proposed rule would extend the presumed area of exposure to the offshore waters of the Republic of Vietnam and expand the date ranges for presumption of exposure in the Republic of Vietnam and Korea. This rule would also clarify the definition of a *Nehmer* class member and establish entitlement to spina bifida benefits for children of certain veterans who served in Thailand. On the basis of VA's general rulemaking authority, VA also proposes to establish a presumption of herbicide exposure for certain veterans who served in Thailand and also proposes to codify longstanding procedures for searching for payees entitled to *Nehmer* class

action settlement payments. This proposed rule incorporates the provisions contained in VA's RIN 2900-AR45, titled, "Diseases Associated with Exposure to Certain Herbicide Agents (Bladder Cancer, Parkinsonism, and Hypothyroidism)" as a result of VA withdrawing RIN 2900-AR45 from the Fall 2022 Unified Agenda. A future regulation will be published to all of VA's adjudication regulations with controlling statute. This future regulation will also ensure that eligible Veterans are not denied the benefits they are entitled to and will allow VA to correct previous improper denials of service connection.

Rule Type: Proposed Rule

EO 12866: Section 3(f)(1) Significant

EO 14094: No

Estimated Publication Date: 1/00/24

AR25 - Presumptive Service Connection for Respiratory Conditions Due to Exposure to Particulate Matter

Summary: This rulemaking adopts as final, with changes, an interim final rule that amended the Department of Veterans Affairs (VA) adjudication regulations governing presumptive service connection based on presumed exposures to fine particulate matter. The amendment was necessary to provide health care, services, and benefits to Gulf War Veterans who were exposed to fine particulate matter associated with deployment to the Southwest Asia theater of operations, as well as Afghanistan, Syria, Djibouti, and Uzbekistan. The amendment eased the evidentiary burden of Gulf War Veterans who file claims with VA for asthma, rhinitis, and sinusitis, to include rhinosinusitis.

Rule Type: Final Rule EO 12866: 3(f)(1) Significant

EO 14094: No

Estimated Publication Date: 9/1/23

AR44 - Presumptive Service Connection for Rare Respiratory Cancers Due to Exposure to Fine Particulate.

Summary: This rulemaking adopts as final, without changes, an interim final rule amending the Department of Veterans Affairs (VA) adjudication regulations to establish presumptive service connection for nine rare respiratory cancers in association with presumed exposure to fine particulate matter. These presumptions apply to Veterans with a qualifying period of service, i.e., who served on active military, naval, or air service in the Southwest Asia theater of operations during the Persian Gulf War (hereinafter Gulf War), from August 2, 1990, onward, as well as in Afghanistan, Syria, Diibouti, or Uzbekistan, on or after September 19, 2001, during the Gulf War. This rulemaking implements a decision by the Secretary of Veterans Affairs that determined there is sufficient evidence to support these cancers as presumptive based on exposure to fine particulate matter during service in the Southwest Asia theater of operations, Afghanistan, Syria, Djibouti, or Uzbekistan during certain periods and the subsequent development of the following rare respiratory cancers: squamous cell carcinoma (SCC) of the larynx, SCC of the trachea, adenocarcinoma of the trachea, salivary gland-type tumors of the trachea, adenosquamous carcinoma of the lung, large cell carcinoma of the lung, salivary gland-type tumors of the lung, sarcomatoid carcinoma of the lung, and typical and atypical carcinoid of the lung. The intended effect of this rulemaking is to ease the evidentiary burden of this population of Veterans who file claims with VA for these nine rare respiratory cancers.

Rule Type: Final Rule EO 12866: Other Significant

EO 14094: No

Estimated Publication Date: 11/00/23

AR47 - Expanding Veterans Cemetery Grant Program (VCGP) Grants to Include Training Costs.

7

5

Summary: VA proposes to amend its regulations regarding aid for the establishment, expansion, and improvement, or operation and maintenance of Veterans cemeteries to implement new authorities provided in section 2208 of The Veterans Health Care and Benefits Improvement Act of 2020.

Rule Type: Proposed Rule EO 12866: Other Significant

EO 14094: No

Estimated Publication Date: 6/00/24

AR68 - Veteran and Spouse Transitional Assistance Grant Program

Summary: VA, as authorized under the Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020, amends its regulations to establish the Veteran Transitional Assistance Grant Program (VTAGP). VA will establish grant application procedures and evaluative criteria for determining whether to issue funding to eligible organizations providing transition services to members of the Armed Forces who are separated, retired, or discharged, as well as their spouses.

Rule Type: Final Rule EO 12866: Other Significant

EO 14094: No

Estimated Publication Date: 11/00/23

AR75 - Updating VA Adjudication Regulations for Disability or Death Benefits Based on Toxic Exposure.

Summary: The Department of Veterans Affairs is proposing to amend its adjudication regulations to implement provisions of the Sergeant First Class Heath Robinson Honoring our Promise to Address comprehensive Toxics Act of 2022, Public Law 117-168 (PACT Act). The statute amended procedures applicable to claims based on toxic exposure and modified or established presumptions of service connection related to toxic exposure. Pursuant to the Act, VA is proposing to remove the manifestation period requirement and the minimum compensable evaluation requirement from Gulf War claims based on undiagnosed illness and medically unexplained chronic multi-symptom illnesses. VA is also proposing to expand the definition of a Persian Gulf Veteran and update the list of locations eligible for a presumption of exposure to toxic substances, chemicals, or hazards based on Gulf War service. To implement additional provisions of the Act, VA is also proposing to codify the procedure for determining when examinations and medical nexus opinions are required for claims based on toxic exposure.

Rule Type: Proposed Rule EO 12866: Other Significant

EO 14094: No

Estimated Publication Date: 1/00/24

AR76 - Reevaluation of Claims for Dependency and Indemnity Compensation Based on Public Law 117-168

Summary: The Department of Veterans Affairs (VA) amends its adjudication regulations concerning certain awards of Dependency and Indemnity Compensation (DIC). Under this amendment, relevant claimants will be eligible to elect to have certain previously denied DIC claims reevaluated pursuant to changes that establish or modify a presumption of service connection. Any award as a result of the reevaluation may be made retroactive as if the establishment or modification of the presumption of service connection had been in effect on the date of the submission of the original claim. This amendment incorporates legislative changes enacted by the PACT Act and will bring Federal regulations into conformance with those changes.

Rule Type: Final Rule

EO 12866: Section 3(f)(1) Significant

9

10

EO 14094: No

Estimated Publication Date: 11/00/23

AR91 - Evidence Requirements for Direct Service Connection of Covered Mental Health Conditions Based on In-Service Personal Trauma.

Summary: VA is proposing to amend regulations concerning the type of evidence that may be used to support a veteran's statement regarding the occurrence of an in-service personal trauma. VA is also proposing to define key terms relevant to such claims. These amendments will provide greater specificity and clarity to the regulatory text and aid claims processors who develop and decide claims based on inservice personal trauma. The intent of this change is to ease the evidentiary requirements for veterans claiming a mental health condition based on in-service personal trauma.

Rule Type: Proposed Rule EO 12866: Other Significant

EO 14094: No

Estimated Publication Date: 2/00/24

AR73 - Technical Revisions to Expand Health Care for Certain Toxic Exposure and Overseas Contingency Service (Section 103 PACT Act)

Summary: The Department of Veterans Affairs (VA) is issuing this rule to amend its medical regulations governing eligibility for VA health care and copayment requirements to conform to recent statutory changes made by section 103 of the Sergeant First Class Heath Robinson Honoring our Promise to Address Comprehensive Toxics Act of 2022, Public Law 117-168 (PACT Act). VA is changing its medical benefits enrollment criteria to include toxic-exposed veterans and veterans who supported certain overseas contingency operations, to exempt such veterans from copayments for certain care, and to provide per diem for nursing home care for such veterans.

Rule Type: Proposed Rule EO 12866: Other Significant

EO 14094: No

Estimated Publication Date: 8/00/24

AQ30 - Modifying Copayments for Veterans at High Risk for Suicide

Summary: The Department of Veterans Affairs (VA) is finalizing a proposed rule s to amend its medical regulations governing copayments for VA outpatient medical care and medications (to include outpatient medical care and medications provided by VA directly or community care obtained by VA through contracts, provider agreements or sharing agreements) by eliminating the copayment for outpatient care and reducing the copayment for medications dispensed to veterans identified by VA as being at high risk for suicide. These copayment changes will be applied until VA determines that the veteran is no longer at high risk for suicide.

Rule Type: Final Rule EO 12866: Other Significant

EO 14094: No

Estimated Publication Date: 9/00/24

13

12

11