



# Federal Health Matters

## Easier Process for Patients with Posttraumatic Stress Disorder

In July, VA Secretary Eric K. Shinseki announced the publication of a final regulation in the *Federal Register* that simplifies the process for veterans who are seeking health care and disability compensation for posttraumatic stress disorder (PTSD). The VA believes that an easier process will enable more timely decisions for veterans.

Shinseki said, "This nation has a solemn obligation to the men and women who have honorably served this country and suffer from the often devastating emotional wounds of war. This final regulation goes a long way to ensure that veterans receive the benefits and services they need."

According to the VA's "Questions and Answers Fact Sheet" about the new regulations, a veteran now will be able to establish the occurrence of an in-service stressor through his or her own testimony, provided certain criteria are met: (1) PTSD has been diagnosed; (2) a VA psychiatrist or psychologist (or one contracted by the VA) confirms that the claimed stressor is adequate to support a PTSD diagnosis; (3) the veteran's symptoms are related to the claimed stressor; and (4) the claimed stressor is consistent with the places, types, and circumstances of the veteran's service and the record provides no clear and convincing evidence to the contrary.

With the final regulation, the VA no longer will have to search records in order to verify claimed stressors—often a lengthy and involved process—and the time required to adjudicate a PTSD compensation claim in accordance with the law will be reduced significantly. Prior to this

rule, VA adjudicators were required to corroborate that noncombat veterans actually experienced claimed stressors related to hostile military activity.

The VA believes that the new regulation, when combined with its shorter claims form, allows for faster and more accurate decisions for the more than 400,000 veterans currently receiving compensation benefits that are service connected for PTSD.

House VA Committee Chairman Bob Filner (D-California) said, "Currently, veterans who apply for PTSD-related disability benefits must meet a stringent level of evidence, which certainly delays and often denies benefits to thousands of veterans. The new rule will make it easier for all veterans suffering from PTSD to receive VA health care and disability compensation."

## Veterans May Have Been Exposed to HIV While Receiving VA Care

More than 1,800 veterans who received treatment at a St. Louis-area VA hospital may have been exposed to HIV, hepatitis C, or hepatitis B. On June 29, officials from the John Cochran Division of the St. Louis VA Medical Center (VAMC), Missouri, began sending letters to veterans who received dental treatment at the facility between February 1, 2009, and March 11, 2010, informing them of free blood tests to screen for HIV, hepatitis C, and hepatitis B. The letter was sent to 1,812 veterans and, according to the Associated Press on July 15, the VA reported that 950 veterans have been tested, with some of them testing positive for illness. Which viruses have been detected has not been disclosed,

nor has the source of infection, as the VA is performing more testing to determine this information.

Rep. Russ Carnahan (D-Missouri), who represents St. Louis, asked the White House, the VA, and the House VA Committee to investigate the possibility that potentially deadly viruses were transmitted through dental equipment used at the facility during the 13-month period. In a hearing held July 13, Earlene Johnson, a former employee of the St. Louis VAMC, testified that she had warned management at the John Cochran facility of the sterilization problems. Johnson's warnings were not heeded, however, and it was not until March that the improper processing of dental instruments was identified by the National Infectious Diseases Program Office while conducting an announced inspection of the St. Louis VAMC.

According to VA Undersecretary for Health Robert A. Petzel, MD, the instruments were not "sterilized to the exact specifications of the manufacturers' guidelines" because they should have been cleaned with a detergent before sterilization.

After the problem was discovered, the St. Louis facility underwent a thorough examination in which the center's leadership, medical staff, and VA's Supply Processing and Distribution program office teams immediately conducted in-depth staff training and management reviews. The dental clinic at the hospital was shut down while the examination was performed, and a newly renovated space—which was already under construction during the period under question—opened in May. Another site inspection that month determined "that all issues at the dental clinic had resolved," said Petzel.

Continued on next page

Continued from previous page

An Administrative Investigation Board is reviewing the issues identified at the St. Louis VAMC and will determine what further action needs to be taken. Petzel promised to submit a letter “describing the improvements and our standards for ensuring compliance by our facilities to Committees on Veterans’ Affairs by August 15.”

## Federal Health Care Web Site Launched

In conjunction with President Obama’s Affordable Care Act, in July, the HHS launched its new \$3.5 million Web site ([www.healthcare.gov](http://www.healthcare.gov)), which is designed to provide clear information to help people sort through public and private health insurance options.

The core of the site is the insurance options finder, which prompts site visitors to input information, such as where they live, their age, their health status, and why they currently are searching for a plan. It then provides information about insurance options that will fit their circumstances. Small businesses also are able to use the site to search for plans that fit their needs. In addition, the site features a section outlining ways to stay healthy and an area where visitors can compare the quality of care they are receiving.

A portion of the site is devoted to information about the new law, including a timeline running until 2015 that describes what changes are occurring and when they will take place. Some of the information on the site, such as benefit and pricing data (including premiums, deductibles, and coverage limitations), will not be available until October.

“We’ve passed a comprehensive health care reform bill that will make affordable health insurance available to every American by 2014, but the

law will only work if people understand how it benefits them,” said Rep. Jim Oberstar (D-Minnesota). “This is an excellent tool for people to use to find out how the new law will benefit them and to quickly find information about the insurance plans offered in their states.”

## \$10 Million Awarded to National Organizations

On July 7, the HHS announced the awarding of \$10 million to 10 national, nonprofit organizations. The money was granted to support public health efforts to reduce tobacco use and obesity through increased physical activity and improved nutrition. The awards are part of the Communities Putting Prevention to Work (CPPW), which is a comprehensive prevention and wellness initiative funded under the American Recovery and Reinvestment Act of 2009.

HHS Secretary Kathleen Sebelius said this initiative “will transform the environments where Americans live, work, learn, and play to promote health and prevent heart attack, cancer, diabetes, and stroke.... As our nation’s health care system evolves, preventing disease will improve Americans’ quality of life.”

The awardees of the \$1 million grants include the American Academy of Pediatrics, the American Heart Association, the American Lung Association, the Association of American Indian Physicians, BlazeSports America, the Community Food Security Coalition, the National Association of Latino Elected and Appointed Officials Educational Fund, the National Recreation and Parks Association, Sesame Workshop, and the Society for Public Health Education. Seven of these organizations will receive funding for obesity prevention while the remaining 3 will

receive funding for tobacco prevention and cessation.

The hope is that the funding will enable these national organizations to help communities implement prevention policies—which in turn will make it possible for residents to live longer and healthier lives. Some examples of the organizations’ strategies will include increasing incentives targeted at food retailers to locate and offer healthier options in underserved areas; providing healthier food choices in child care, school, and the workplace; offering subsidized memberships to recreational facilities; creating safer routes to school; and utilizing evidence-based approaches that both discourage tobacco use and increase use of cessation programs.

The CPPW program has 4 other initiatives in addition to the National Organization initiative—the Community Initiative, the States and Territories Change initiative, the States Chronic Disease Self-Management initiative, and a National Prevention Media initiative. For the Community Initiative, \$372 million was awarded to 44 communities around the nation in prevention and wellness grants. For the States and Territories Change initiative, more than \$119 million was awarded to states and U.S. territories to support public health efforts to reduce obesity, increase physical activity, improve nutrition, and decrease smoking. For the States Chronic Disease Self-Management initiative, \$27 million was awarded to allow states to provide self-management programs to older adults with chronic diseases, build statewide delivery systems, and develop the workforce that delivers these programs. The Academy for Educational Development has been awarded a \$28 million contract by the CDC to develop the National Prevention Media initiative. ●