

Congress of the United States
Washington, DC 20515

June 22, 2016

The Honorable Robert McDonald
Secretary
U.S. Department of Veterans Affairs
810 Vermont Avenue NW
Washington, D.C. 20420

Dear Secretary McDonald:

We write today with serious concerns regarding the Department of Veterans Affairs' (VA) Spring 2016 Notice of Proposed Rulemaking entitled "Removing Gender Alterations Restriction From the Medical Benefits Package," which seeks to change current VA policies regarding coverage for certain gender alteration procedures. More specifically, the proposal aims to reverse a long-standing prohibition on the use of VA funds to pay for gender alteration surgeries.

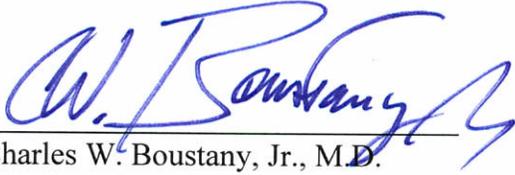
Currently, the Veterans Health Administration (VHA) employs classification groups to help ensure the Department's limited resources are focused first on veterans with service-connected disabilities. Many veterans struggle to receive appropriate and timely treatment for service-connected conditions, such as Post-Traumatic Stress Disorder (PTSD), due to significant backlogs and inadequate access within the VA's health care system. While we are aware that Gender Dysphoria is not classified as a service-connected condition, and would therefore not be factored as part of a service-connection rating determination, we do not believe the VA should be discussing the potential coverage of gender alteration surgeries as the Agency faces challenges in delivering health care to those veterans whose service directly resulted in their need for medical treatments.

Additionally, you will recall that in 2015, the VA's financial mismanagement led to a budget crisis that resulted in Congress passing, and the President enacting, the *Surface Transportation and Veterans Health Care Choice Improvement Act of 2015* (P.L. 114-41), in order to shore up the \$3.3 billion needed to pay for veterans' health care through the remainder of the fiscal year. This is a clear demonstration that the VA is struggling to manage payments for currently-authorized medical services, and we do not believe policies should be altered to allow for gender reassignment surgeries in this environment.

Finally, current VHA policy on the provision of health care to transgender and intersex veterans delineates that the VA cover only those treatments deemed "medically necessary" (VHA Directive 2013-003). The proposed rule references "recent medical research" that has demonstrated "severe medical consequences for certain patients if transition-related surgeries and procedures are not provided," however the research used to come to that conclusion is not formally cited in the proposal. If the VA is proposing this misguided potential policy change, we strongly believe the agency should at least provide the relevant research reviewed during its consideration.

We respectfully request the VA withdraw this notice immediately. Additionally, we ask that the VA provide us with the "recent medical research" referred to, but not cited, in the proposal's language. Thank you for your consideration in this matter.

Sincerely,



Charles W. Boustany, Jr., M.D.
Member of Congress



Brian Babin
Member of Congress



Warren Davidson
Member of Congress



Mike Kelly
Member of Congress



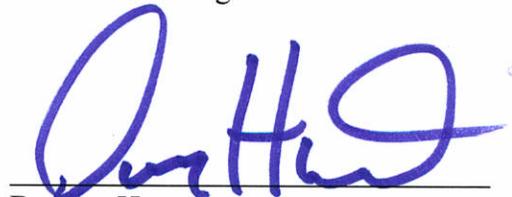
Joe Pitts
Member of Congress



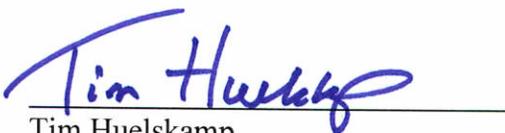
Walter B. Jones
Member of Congress



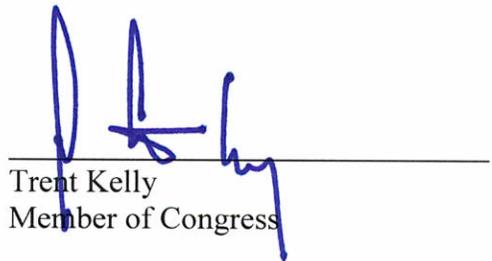
John Fleming, M.D.
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Trent Kelly
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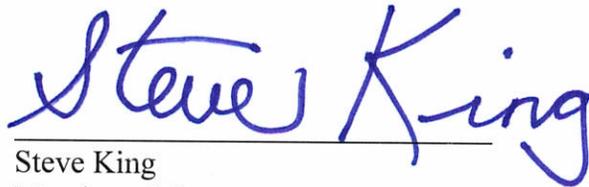
Diane Black
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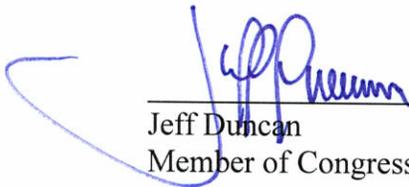
Kevin Cramer
Member of Congress



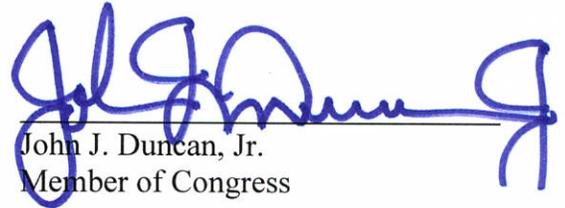
Peter J. Roskam
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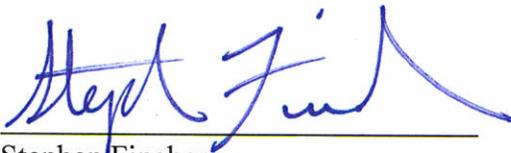
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Andy Harris, M.D.
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