

Suggested Process Changes

to Level the Playing Field for Veterans with Cancer

1. **Regulation 50(g)** – Reconsider the need for a doctor’s letter stating that the veteran’s cancer is service related. Instead apply the presumption given by Regulation 50(g); i.e. if the veteran can show that they were exposed to a known carcinogen while in uniform then unless there is evidence to the contrary the veteran’s cancer is presumed to be service related.
2. **Judicial Precedent** – When it comes to injuries sustained in the field, no two injuries are the same. Therefore, applying the legal doctrine of stare decisis or judicial precedent is not possible, given that each case is distinctly different. However, cases involving veterans with cancer, are often identical; particularly when the veterans develop the same cancer from exposure to the same chemicals. Hence, VAC is encouraged to assess veterans with the same cancer as a distinct group and veterans who develop cancer from exposure to the same chemical as a distinct group. Given this, it is suggested that VAC consider applying judicial precedent whenever there was a past case involving the same cancer/exposure as the case at hand.
3. **Assign a Case Manager** – Veterans with cancer are often so focused on their cancer treatment that they have difficulty navigating complex processes. As well, those receiving hormone treatments for testicular or prostate cancer, for example, can get emotionally challenged when confronted with VAC requirements. Therefore, VAC could significantly speed up the process for all veterans if a case manager was assigned to each veteran with cancer to guide them through the process.
4. **Red-Zone** – Many veterans’ cancers are terminal and all cancers can become terminal at any time. Therefore, time is of the essence when cancers are involved. All veterans submitting claims involving cancers should be automatically ‘Red-Zoned’ upon application.
5. **Duty to Inform** – We suggest that VAC has a duty to inform veterans when the existence of a service-related carcinogen becomes known and awards are made. Veterans with cancer who have been denied pensions involving the same or similar conditions should be personally advised. As well, at a minimum, a national advertisement is warranted and appropriate postings on veteran’s related social media platforms should be made in an effort to inform all veterans.