

U.S. Department of Labor

**Advisory Board on Toxic Substances and
Worker Health**

October 30, 2024

Division of Energy
Employees
Occupational Illness
Compensation
(DEEOIC)

Advisory Board on Toxic
Substances and Worker
Health

▼ **Membership**

Scientific Community:

CHAIR: Aaron Bowman, Ph.D., Purdue University

Mark Catlin, MDC Consulting & Training, Retired

Kevin Feak, PE, MPA, LaBella Associates

Andrew Loebel, Ph.D, Oak Ridge National Laboratory, Retired

Medical Community:

Sammy Almashat, MD, MPH, University of Maryland School of Medicine

Khaula Khatlani, MD. MSc, Queens College, City University of New York

Marek Mikulski, MD, MPH, Ph.D, University of Iowa

Kevin Vlahovich, MD, MS, FACOEM, University of New Mexico

Claimant community:

Kirk Domina, Hanford Site, Retired

Clifford Gordon, Department of Energy, Retired

Jim H. Key, USW Atomic Energy Council

Gail Splett, Department of Energy, Retired

Designated Federal Officer (DFO):

Ryan Jansen, Deputy Director of Coal Mine Workers' Compensation, OWCP

Morning Schedule

10:00 am	Introductions	Ryan Jansen, Board DFO Dr. Aaron Bowman, Chair
10:20	OWCP Welcome to the Board	Chris Godfrey, OWCP Director
10:30	DOE Welcome to the Board	Kevin Dressman and Greg Lewis, DOE
10:40	Review of Agenda	Dr. Aaron Bowman
10:50	FACA Review (brief)	Ryan Jansen
11:00	Overview and brief history of EEOICPA	Rachel Pond, DEEOIC Director
11:30	Program Updates, Last 6 Months	John Vance, DEEOIC Branch Chief Policy, Regulations, and Procedures
12:00	Ethics Rules	Vanessa Myers, Ethics Counsel
12:30	Lunch	

Afternoon Schedule

- | | | |
|------|---|-----------------------------------|
| 1:30 | Program Updates Continued,
SEM Demonstration | John Vance |
| 2:00 | Board Discussion: | Dr. Aaron Bowman
Board Members |
- a. Review of past working groups and group assignments**
 - b. Review of May 2024 recommendations and DOL responses**
 - a. Rec 1: Facilitate Conversation between board and contract IHs
 - b. Rec 2: Work process associated exposure have parkinsonism presumptions
 - c. Rec 3: Add work processes to SEM that are in HazMap linked to parkinsonism
 - d. Rec 4: Associated aliases for parkinsonism include primary parkinsonism
 - e. Rec 5: Support working group evaluating new parkinsonism presumptions
 - f. Rec 6: DOL inform board about changes to SEM prior to public release
 - g. Rec 7: DOL work with SEM contractor to document changes in SEM
 - h. Rec 8: Board and DOL work to continue in-person meetings with SEM contractor
 - i. Rec 9: Provide OHQ with IH reports to physicians asked to consider causation
 - j. Rec 10: DOL accept PTS recommendation on IARC2a carcinogens, add to SEM
 - c. Review of June 2024 Information Requests and DOL responses**
 - a. Info 1: 2022-2023 referee reports
 - b. Info 2: Data on re-reviews of claims with 3+ borderline BeLPT results
 - c. Info 3: 2022-2023 claims for consequential conditions
 - d. Info 4: Future DOE site visits to include info on site occupational activities
 - e. Info 5: Update on efforts with IH contractors to improve exposure reports
 - f. Info 6: Documentation that 1990's safety programs reduced worker exposures
 - g. Info 7: Additional references since 2017 related to hearing loss claims decisions
 - d. Plan for 24 new case reviews, requested June 2024**
 - a. John Vance and others from DOL program to review the structure of claims file, description and structure of key documents contained, how to read these files...
 - b. Carrie Rhoads to describe the process of case file distribution to the board
 - c. Board members to discuss process for claims review
 - e. Additional and new issues**
- | | | |
|------|-----------------------|------------------|
| 3:45 | Board Work Plan | Dr. Aaron Bowman |
| 4:00 | End of Meeting | |

Prior working groups - member assignments

SEM – Gail Splett, Kirk Domina, Jim Key

IH/CMC – Aaron Bowman, Mark Catlin, Marek Mikulski

Scientific Community:

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Kevin Feak, PE, MPA, LaBella Associates

Andrew Loebel, Ph.D, Oak Ridge National Laboratory, Retired

Exposure Health Science – Marek Mikulski, Kevin Vlahovich, Aaron Bowman: (parkinsonism; Sensorineural Hearing Loss; others)

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Khaula Khatlani, MD. MSc, Queens College, City University of New York

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May 2024 Recommendations and DOL Responses

b. Review of May 2024 recommendations and DOL responses

- a. Rec 1: Facilitate Conversation between board and contract IHs
- b. Rec 2: Work process associated exposure have parkinsonism presumptions
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May 2024 recommendations and DOL Responses

Recommendation 1

Directly related to the April 5, 2024 DOL response to the ABTSWH, we recommend that the Program facilitate a conversation between a subset of the next Board and DEEOIC Industrial Hygienists (IH) to gain insight into IH processes. Prior to this conversation, a subset of the Board would develop and submit to DOL a framework for this conversation, to include planning and conducting a subsequent meeting that includes at least two contract IHs.

The Department of Labor (DOL) agrees to work with the next Board to develop a framework to discuss IH processes. DOL also agrees to facilitate a meeting with a subset of the next Board and designated Division of Energy Employees Occupational Illness Compensation's IHs. DOL asks that the Board identify a set of specific questions or topics that the Board wants to include as part of the conversation.

May 2024 recommendations and DOL Responses

Recommendation 2

The Board requests that DOL ensure that all work processes associated with chemical exposures that have presumptions for Parkinsonism in the Procedure Manual also have associated linkages to Parkinsonism in the SEM.

The Site Exposure Matrices (SEM) already identifies the toxic substance exposure listed in its Procedure Manual (PM), Exhibit 15-4.20 pertaining to causation presumptions for Parkinsonism as having a disease link associated with Parkinsonism (carbon monoxide). It is important to make the distinction that Exhibit 15-4.20 describes a presumptive causation standard that allows for the acceptance of Parkinsonism (or its aliases) once particular parameters are satisfied. The standard in the PM does not include a causation presumption involving manganese or steel, as suggested by the Board in their rationale ...

... the SEM also already contains data that documents that the same work processes listed in the PM could bring the employee into contact with the listed toxic substance. Based on the ... rationale for this recommendation, [the board] may be confused about where to find these in the SEM and how this is different from Direct Disease Linked Work Processes.... As such, [the DOL] would be happy to include a discussion of this issue when the IH's meet with the Board, or a subsection of the Board, as recommended above.

May 2024 recommendations and DOL Responses

Recommendation 3

The Board also requests that DOL add work processes to the SEM and Procedure Manual that are currently found in HazMap that link Parkinsonism to exposures that are already on the current presumption list for Parkinsonism (i.e. manganese, carbon monoxide).

Currently, HazMap provides no information about associations between toxic substances and Parkinsonism. The health effect data listed in SEM originates from other sources. The health effect link listed in SEM for Parkinsonism is one of the over 136 disease links in SEM that are not referenced in HazMap. DOL maintains a listing in the SEM of the toxic substances that the DOL recognizes as having an established Parkinsonism health effect including manganese and carbon monoxide.

Recommendation 4

In addition, the Board also recommends that all associated aliases for Parkinsonism be updated in the SEM and Procedure Manual to include “Primary Parkinsonism”.

DOL agrees with the recommendation and will add the alias to SEM.

May 2024 recommendations and DOL Responses

Recommendation 5

Finally, we recommend that a working group continue a review of the literature to evaluate whether associations between Parkinsonism and solvents, or other chemicals likely to be present at DOE sites, warrant consideration for new exposure presumptions.

DOL agrees to continue its collaboration with the Board regarding consideration of additional causation presumptions involving Parkinsonism, or its aliases, and to ensure that health effect information maintained in SEM about the condition is accurate.

May 2024 recommendations and DOL Responses

Recommendation 6

The ABTSWH recommends that the Department of Labor (DOL) inform and submit to the Board (after classification review), in writing, a list of any and all changes to the SEM, prior to and with each change in the public SEM [i.e. the internet accessible SEM (IAS)].

DOL agrees to provide the Board with four files Paragon Technical Services (PTS) prepares for DOE classification review. These identify the changes made to the SEM since the last data freeze. DOL will transmit the files for the latest Freeze #27 update that occurred on June 25, 2024, to the Board separately because they are electronic Excel spreadsheets.

Given that PTS does not send information to DOE about information removed from SEM, DOL is working with PTS concerning the creation of a listing about information deleted from SEM for each data freeze. PTS is in the process of changing their procedure to better capture data deletions and it has already instructed its researchers not to delete data without approval. Once a process is established for reporting data removal, DOL will provide the Board with an update and the output from such an effort. **The intent will be for DOL to provide the Board with an inventory of SEM data deletions along with the above-mentioned reports for each public update.**

Separately, DOL and PTS are also exploring options to communicate publicly a more detailed accounting of revisions made for each semi-annual public SEM update.

May 2024 recommendations and DOL Responses

Recommendation 6

The ABTSWH recommends that the Department of Labor (DOL) inform and submit to the Board (after classification review), in writing, a list of any and all changes to the SEM, prior to and with each change in the public SEM [i.e. the internet accessible SEM (IAS)].

...These files will include:

- File 1 lists the sites that have been revised since the last freeze. Note that some sites may have only been revised to fix editorial problems
- File 2a Part 1 lists new toxic materials added to SEM since the last freeze. This list is not site-specific.
- File 2a Part 2 lists existing toxic materials with new or changed aliases in SEM since the last freeze. This list is not site-specific.
- The File 2b report lists all changes for each site since the last freeze. The format for this file was developed to meet the requests from the DOE Office of Classification for the classification reviewer's benefit. It is different from most other spreadsheets in that....

May 2024 recommendations and DOL Responses

Recommendation 7

The Board recommends that DOL direct their contractor (currently Paragon Technical Services, Inc.) to prospectively and retrospectively provide notation of any changes to toxic substances, labor categories, facilities and work processes that are/were altered in the SEM, with documentation of the rationale for the change in the SEM.

DOL respectfully does not agree with the Board's recommendation. Every entry in the SEM spreadsheet includes a document citation and source notes that provides the overall justification for the data output. However, to add a requirement for PTS researchers to provide a detailed accounting of their decision-making process in the review of often thousands of pages of DOE documents as well as the individual data elements extracted from these document reviews would hamper the ability of PTS to update Site Profiles in a timely manner. *As an example, two site profiles undergoing a 10-year facility update (one is well into the process, and one is only at the tier one document request) involve the review of over 3000 documents. Based on these reviews, over 2700 rows of captured data have been added to the Los Alamos National Laboratory spreadsheet (the tier one document capture) and over 16,000 rows of data captured have been added to the Kansas City National Security Campus spreadsheet. To explain the rationale for each data element captured would be a significant administrative hurdle, and DOL does not believe this to be an effective use of contractor time or resources.*

May 2024 recommendations and DOL Responses

Recommendation 8

The Board recommends that DOL continue the in-person meetings with PTS, or the current contractor for the SEM, with members of the board's SEM subcommittee on a routine basis and in person (up to three times a year) to discuss ongoing improvements of the SEM.

DOL found that the previous in-person meeting between select members of DOL, the Board and PTS was informative and beneficial. Given the time and cost associated with these meetings, DOL will agree to requests from the Board for ad hoc, versus routine, meetings if both parties agree on the necessity and utility for such a meeting.

May 2024 recommendations and DOL Responses

Recommendation 9

The ABTSWH seeks reconsideration of its previous recommendation to provide the OHQ to any physician asked to address causation in a case along with the accompanying IH reports that would address the validity of OHQ information thereby mitigating the concerns noted by the program for providing the OHQ expressed in the March 21, 2024 DOL response memo.

DOL has fully reviewed the Board's request to reconsider; however, DOL's position remains that the Occupational History Questionnaire (OHQ) should not be provided to a physician assessing causation. **Submitting both the OHQ and the IH report to the physician could lead to situations where the physician is provided with conflicting or inconsistent data pertaining to toxic substance exposures.**

DOL continues to consider the Division of Energy Employees Occupational Illness Compensation (DEEOIC) IH-produced exposure characterization to represent the best, most accurate information about the nature, extent, and frequency of occupational exposure to toxic substances.

Therefore, DOL's position remains that physicians should be provided with the IH report (which is informed by the OHQ), but not provided with the OHQ document itself, which contains statements about exposure that DOL has not been able to confirm.

May 2024 recommendations and DOL Responses

Recommendation 10

The ABTSWH recommends that the Department of Labor [DOL or Department] accept the determination of Paragon Technical Services that trivalent antimony (lung cancer) and 1,1,1 trichloroethane (multiple myeloma) are two IARC 2a carcinogens, as documented in the report of the Paragon Technical Services dated August 3, 2023. The Board recommends that these toxic substances and their specific cancer links be added to the Site Exposure Matrices.

The Department agrees with the Board's recommendation.

On May 10, 2024, the Department instructed PTS to add the aforementioned health effects into SEM. Trivalent antimony and 1,1,1 trichloroethane, as well as the associated health effects of lung cancer and multiple myeloma, respectively, are currently available within the internal SEM for Department staff to reference while adjudicating claims. The health effects will also be available in the public SEM in the next Internet Accessible Site (IAS) update, which is scheduled for release in November 2024.

June 2024 Information Requests and DOL responses

c. **Review of June 2024 Information Requests and DOL responses**

- a. Info 1: 2022-2023 referee reports
- b. Info 2: Data on re-reviews of claims with 3+ borderline BeLPT results
- c. Info 3: 2022-2023 claims for consequential conditions
- d. Info 4: Future DOE site visits to include info on site occupational activities
- e. Info 5: Update on efforts with IH contractors to improve exposure reports
- f. Info 6: Documentation that 1990's safety programs reduced worker exposures
- g. Info 7: Additional references since 2017 related to hearing loss claims decisions

June 2024 Information Requests and DOL responses

The Board requests a report on the referee reports in finalized claims of the EEOICP during the two-year period, 2022 and 2023. The report should include the number of referee reports, the types of issues addressed (causation, impairment, diagnosis, other), the specialty of the referees, and whether the referee's opinion aligns or agrees with the opinion expressed in the CMC report in the same claim.

DEEOIC has worked with its CMC contractor, QTC, to provide the requested report; however, DEEOIC does not track all the items listed above. From 2022-2023, QTC has delivered 191 referee reports, with the reports being the result of a request for a causation file review. The breakdown of provider specialty is: Allergist (1); Dermatologist (2); Endocrinologist (1); Internal Medicine (2); Nephrologist (1); Neurologist (5); Occupational Medicine (150); Oncologist (1); Otolaryngologist (1); Pulmonologist (27). Neither QTC nor DEEOIC tracks whether the referee's opinion aligns or agrees with the opinion expressed in CMC reports in the same claim.

June 2024 Information Requests and DOL responses

The Board requests data on outcomes of re-review of claims that involve 3 or more borderline BeLPT results following the recent change in EEOICP policy.

DEEOIC is currently in the process of reviewing 1,153 previously denied claims for beryllium sensitivity based on the updated criteria published in its January 30, 2024, Bulletin 24-01, *Updated Criteria for Establishing Beryllium Sensitivity*. DEEOIC has identified seven (7) previously denied claims that now likely meet the updated criteria and have been reopened to allow for acceptance. DEEOIC has also identified an additional seventeen (17) claims that require additional development; specifically, these cases do not contain evidence of three (3) borderline BeLPTs performed on blood cells over a three (3) year period, but instead have two prior borderline BeLPTs or other evidence that warrants investigation. In these cases, DEEOIC is sending claimants a development letter advising of the updated criteria and requesting they submit the required borderline BeLPTs (if available) to satisfy the new criteria.

June 2024 Information Requests and DOL responses

The Board requests information on claims for consequential conditions: number of claims (2022 and 2023); nature (disease) of condition specified by claimant to have occurred as a consequence of previous claimed condition, outcome of claim (denial versus accepted), reason for denial.

Currently, DEEOIC is only able to pull the number of claims for consequential illnesses that contain a letter decision to accept. We do not currently have a breakdown of the nature of the condition or information on denials. From 2022 to 2023, DEEOIC accepted 15,520 claims for consequential illnesses. With the upcoming introduction of the Claim for Consequential Illness Form (Form EE-1A), DEEOIC will be able to more accurately track the number of consequential claims received, as well as the claimed condition, and decision outcome.

June 2024 Information Requests and DOL responses

The Board requests that future DOE site tours conducted in association with Board meetings include, to the extent possible, information about site activities that occurred from 1960 to 2000, that is, the period of time when most living former workers began employment at DOE sites.

To the extent possible, DEEOIC will work with DOE to provide site tours that are relevant to the Board. DOE takes the lead on scheduling site tours and provides guides for such tours. DEEOIC will request that site tours provide information about DOE site activities that occurred from 1960 to 2000.

June 2024 Information Requests and DOL responses

The ABTSWH requests that the Program provide an update on the status and timeline of their efforts to “work with its IH contractor to develop feasible changes to IH reports to better communicate the examination of case-specific exposure data” from the March 21, 2024 DOL response memo from the program to the Board.

DEEOIC continues to work with its industrial hygiene contractor to improve the communication of case-specific exposure data within their toxic substance exposure assessments. The contractor has provided DEEOIC several examples demonstrating its inclusion of this data, and after reviewing these examples, DEEOIC submitted requested revisions. Attached for your review are three exhibits, which have been redacted of personally identifiable information (PII) and include DEEOIC’s incorporated edits. Within the document, DEEOIC has highlighted the newly proposed language in yellow.

3 redacted documents were provided with the response for board review

June 2024 Information Requests and DOL responses

The ABTSWH requests documentation in support of the assertion that environmental health and safety programs implemented in the mid-1990s greatly reduced the potential for workers (both DOE and contractors/subcontractors) to have had significant exposures to toxic substances at DOE facilities, and that any such work processes, events, or circumstances leading to significant exposure would likely have been identified and documented.

DEEOIC is responsible for making informed judgments regarding the biological or chemical materials to which a covered employee may have had credible exposure by applying the body of available industrial knowledge concerning the work processes affiliated with production, manufacture and testing of atomic weapons.... DEEOIC IHs continue to assess exposures for the entire work history of each employee, regardless of the temporality of that employment, and use their best judgment in characterizing an employee's potential toxic substance exposure. ... the IH's do apply judgement about the nature of operational functions that brought employees into contact with toxic substances. This includes consideration of the systemic operational changes that occurred in the mid-1990s, during which DOE established standardized Occupational Safety and Health protocols for its federal and contract employees. ... Assignment of exposure by DEEOIC IH's does not assume that an employee working after the mid-1990s worked in a completely safe occupational health environment ... However, evidence must exist to persuasively document a reasonable basis to assign significant exposure...

Weblinks provided to documents which support EHS programs implemented in mid-1990s

June 2024 Information Requests and DOL responses

The Board notes and appreciates the Department's prior provision of the reference list for its decision-making in its noise- and solvent-related hearing loss policy in 2017. The Board requests any additional references that the Department has used since 2017 on scientific or medical aspects of its decision-making on hearing loss claims.

DEEOIC has made no changes to its decision-making process on hearing loss claims since 2017. However, since that time, DEEOIC has continued to review scientific literature related to the subject to ensure our policy aligns with current scientific consensus. Below are links to published scientific references reviewed since 2017 supporting DEEOIC's existing hearing loss criteria:

Citations list provided

Information Request – new case reviews (June 2024)

d. **Plan for 24 new case reviews, requested June 2024**

- a. John Vance and others from DOL program to review the structure of claims file, description and structure of key documents contained, how to read these files...
- b. Carrie Rhoads to describe the process of case file distribution to the board
- c. Board members to discuss process for claims review

The Board requests a set of 24 claims to review. These claims should have the following attributes:

- a. Claims completed in 2022 and 2023.
- b. Denied claims only
- c. Claims that have both IH and CMC reports.
- d. Causation claims only (no impairment, no consequential disease claims)
- e. No survivor claims
- f. Variety of claimed conditions, including cancer, lung disease, hearing loss and others.
- g. Claims should be indexed.

ABTSWH Data and Claims Request - Employee Claims Denied For Negative Causation on/after 01/01/2022					
Case ID	Current District Office	ICD Code	ICD Code Description	ICD Code Condition Type	ICD Code Part Type
50033853	JAC	J44.9	Chronic obstructive pulmonary disease, unspecified	COPD & Emphysema	E
50034245	CLE	C91.10	Chronic lymphocytic leukemia of B-cell type not having achieved remission	Cancer	E
50034529	CLE	G62.2	Polyneuropathy due to other toxic agents	Nervous System	E
50036100	SEA	D03.59	Melanoma in situ of other part of trunk	Cancer	B
50036172	SEA	C44.519	Basal cell carcinoma of skin of other part of trunk	Cancer	E
50036511	CLE	I10	Essential (primary) hypertension	Circulatory System Disease	E
50036525	SEA	J44.9	Chronic obstructive pulmonary disease, unspecified	COPD & Emphysema	E
50037272	SEA	C61	Malignant neoplasm of prostate	Cancer	E
50037314	DEN	I10	Essential (primary) hypertension	Circulatory System Disease	E
50037733	SEA	C64.2	Malignant neoplasm of left kidney, except renal pelvis	Cancer	E
50038062	FAB	N18.31	CHRONIC KIDNEY DISEASE, STAGE 3A	Genitourinary System	E
50038320	SEA	C50.111	Malignant neoplasm of central portion of right female breast	Cancer	B
50038498	DEN	N18.9	Chronic kidney disease, unspecified	Genitourinary System	E
50038989	JAC	G43.009	Migraine without aura, not intractable, without status migrainosus	Nervous System	E
50040295	DEN	E11.9	Type 2 diabetes mellitus without complications	Diabetes	E
50033015	CLE	J44.9	Chronic obstructive pulmonary disease, unspecified	COPD & Emphysema	E
50033169	JAC	G93.40	Encephalopathy, unspecified	Nervous System	E
50033329	CLE	I70.0	Atherosclerosis of aorta	Circulatory System Disease	E
50033809	JAC	I73.9	Peripheral vascular disease, unspecified	Circulatory System Disease	E
50035323	SEA	C43.62	Malignant melanoma of left upper limb, including shoulder	Cancer	B
50035877	JAC	G20.C	PARKINSONISM, UNSPECIFIED	Parkinson's Disease	E
50036196	SEA	C62.11	Malignant neoplasm of descended right testis	Cancer	B
50036474	DEN	C64.1	Malignant neoplasm of right kidney, except renal pelvis	Cancer	B
50036843	CLE	M51.36	Other intervertebral disc degeneration, lumbar region	Musculoskeletal System	E

Board Work Plan - member assignments

SEM – Gail Splett, Kirk Domina, Jim Key, OTHERS?

IH/CMC – Aaron Bowman, Mark Catlin, Marek Mikulski, OTHERS?

Exposure Health Sciences – Marek Mikulski, Kevin Vlahovich,
Aaron Bowman, OTHERS?

parkinsonism;

Sensorineural Hearing Loss;

others?

Case Reviews – One member each community per case;
6 cases per member;
divide by ICD/disease type or random?

Scientific Community:

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Claimant community:

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End of Meeting

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- e. **Additional and new issues**

3:45 Board Work Plan

Dr. Aaron Bowman

4:00 End of Meeting