Meeting Notes

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Subject: Meeting Notes - DG Trudie MacKinnon

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To: Donald MacPhail bdrcole@gmail.com, Randy Hladun Rhladun@outlook.com

Randy, Don,

I had a meeting this morning with VAC DG Trudie MacKinnon. She is truly on our side and is changing VAC processes to remove barriers for veterans with cancer. As I recall Chris mentioning, VAC is a large administration and it requires time and incremental steps to turn a big ship around.

I started by confirming what we discussed last day which was that veterans with cancer no longer need their doctor to state that their cancer was service related but rather rely on 50(g). She confirmed this but when I asked if cancer veterans were given a unique form letter with the offending paragraph removed she wasn't sure but she committed to verify this.

In regard to Red Zone she agreed that it was her objective to Red Zone all veterans with cancer who are in active treatment e.g.. those under the care of an oncologist. I think this will cover 80% of cancer claims. In this case you would both qualify but I wouldn't since my tumor was removed and currently there are no signs that my cancer has metastasized. I think this is a big movement for VAC. I asked if there was a directive going out and could we advertise this change. She asked that we hold off until she got this change through the system.

We also discussed the need for cancer veterans to be assigned a Case Manager given the mental health challenges that often accompany a cancer diagnosis. She agreed and pointed out that veterans can call a 1-800 number at anytime and ask for a case manager if they needed help.

I told her that we would advertise this number on our website. I asked if that number could be added to the unique form letter that goes out to veterans with cancer. This is where she wasn't sure if there was a unique form letter. I commented that given that they removed the requirement for cancer veterans to get a doctor's letter there must be. She said she would look into this and get back to us at our next meeting which will be scheduled for January. I don't find this too unusual since those in government at the DG or ADM level don't have the details on exactly how their direction was implemented.

I think that the process changes that she has accepted is a very good sign of her commitment to tailor VAC processes to meet the needs of veterans with cancer and the fact that she is assuming on-going meetings with us clearly suggests that she is envisioning the need for future changes.

Your thoughts or comments?

Jim