

Nos. 13-17430, 14-15108

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IN THE UNITED STATES COURT OF APPEALS  
FOR THE NINTH CIRCUIT

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VIETNAM VETERANS OF AMERICA, et al.,

Plaintiff-Appellants/Cross-Appellees,

v.

CENTRAL INTELLIGENCE AGENCY, et al.,

Defendants-Appellees/Cross-Appellants.

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ON APPEAL FROM THE UNITED STATES DISTRICT COURT  
FOR THE NORTHER DISTRICT OF CALIFORNIA

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**DEFENDANT-APPELLEES/CROSS APPELLANTS'  
PETITION FOR REHEARING AND REHEARING EN BANC**

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## INTRODUCTION AND SUMMARY

Rejecting the Army's reasonable understanding of its own regulation, a divided panel ((Fletcher, Schroeder, JJ; Wallace, J., dissenting in part) held that Army Regulation 70-25 (AR 70-25) creates an independent duty to provide medical care to veterans who many years ago participated in chemical and biological testing programs, even though veterans are already eligible for medical care from the Department of Veterans Affairs (VA). The language on which the panel majority relied states that “[v]olunteers are authorized all medical care for injury or disease that is a proximate result of their participation in research.” Consistent with controlling Department of Defense regulations, the Army reasonably interprets that language to cover the provision of care only during a volunteer's participation in testing.

The panel majority's holding that the Army is nevertheless required to provide ongoing medical care long after a veteran last participated in a testing program departs from Supreme Court and Circuit precedent in several respects.

*First*, the Supreme Court has made clear that courts may compel action under 5 U.S.C. § 706(1) only when an agency has failed “to take a *discrete* agency action that it is *required to take*.” *Norton v. Southern Utah Wilderness Alliance (“SUWA”)*, 542 U.S. 55, 64 (2004) (emphases in the original). A duty is enforceable under Section 706(1) only if it is “so clearly set forth that it could traditionally have been enforced through a writ of mandamus.” *Hells Canyon Preservation Council v. U.S. Forest Serv.*, 593 F.3d 923, 932 (9th

Cir. 2010). As Judge Wallace observed in dissent, AR 70-25 contains no “unequivocal command” to provide ongoing medical care to volunteer test participants. Op. 34.

*Second*, the panel majority erred in failing to accord any deference to the Army’s interpretation of its own regulation simply because it was first advanced in this case. Contrary to the majority’s approach, this Court has held that the proposition that interpretations advanced in litigation are not entitled to deference does not apply in Section 706(1) cases where agencies will typically have had no occasion to set out a formal interpretation supporting a failure to take action. *See Independence Mining Co. v. Babbitt*, 105 F.3d 502, 511-12 (9th Cir. 1997). In fact, the Army has never interpreted the language on which the panel majority relied to require care in Army facilities after a volunteer’s participation in testing has ceased, as evidenced by controlling DoD regulations to the contrary and the fact that the Army has not furnished such care to former test participants over the past decades.

*Third*, the panel majority erred in concluding that the district court lacked discretion to deny injunctive relief requiring the Army to furnish medical care to the plaintiffs on the ground that such care is already provided by the VA. The majority declared that, because Section 706(1) uses the word “shall,” it “requires a reviewing court to issue injunctive relief whenever it finds that an agency action has been unlawfully withheld.” Op. at 28 (citing *Forest Guardians v. Babbitt*, 174 F.3d 1178, 1187 (10th Cir. 1999)). However, this Court has expressly rejected the Tenth Circuit’s reading of Section 706(1) and instead has adopted the approach taken by the D.C.

Circuit, holding that “a statutory violation does not always lead to the automatic issuance of an injunction” under Section 706(1). *Biodiversity Legal Found. v. Badgley*, 309 F.3d 1166, 1177 (9th Cir. 2002).

As discussed in section II, *infra*, for similar reasons, the panel erred in holding that the Army has an ongoing duty to seek out and provide “notice” to former test participants of any new information that could potentially affect their health in addition to the extensive notice that the government has already provided.

The panel’s reasoning conflicts with decisions of the Supreme Court and this Court, and threatens significant practical consequences by requiring the Army to divert substantial resources to establish new mechanisms to provide medical care outside the comprehensive scheme Congress established to provide care to veterans and new procedures to determine what additional notice (if any) should be provided to former test participants. This case should accordingly be reheard en banc.

### **STATEMENT**

1. Between World War II and 1976, the Army conducted tests that exposed thousands of volunteer members of the armed forces to chemical and biological agents. In 2009, two veterans’ groups and a number of veterans filed this class action against the Army and other agencies allegedly involved in the testing programs. As now relevant, plaintiffs seek to compel agency action under 5 U.S.C. § 706(1) that they claim is required by AR 70-25, an Army regulation first issued in its current form in 1988 and revised in 1990.

In their medical-care claim, plaintiffs contend that Section 3-1(k) of AR 70-25 requires the Army to provide former test participants with medical care for any conditions caused by their participation in the tests. That provision simply states that “[v]olunteers are authorized all medical care for injury or disease that is a proximate result of their participation in research.”

In their notice claim, plaintiffs assert that Section 3-2(h) of AR 70-25 requires the Army to provide former test participants with any new information potentially relevant to their health. Section 3-2(h) provides:

Commanders have an obligation to ensure that research volunteers are adequately informed concerning the risks involved with their participation in research, and to provide them with any newly acquired information that may affect their well-being when that information becomes available. The duty to warn exists even after the individual volunteer has completed his or her participation in research.

2. After certifying a class action, the district court (Wilken, J.) granted in part and denied in part the parties’ cross-motions for summary judgment, ruling for plaintiffs on the notice claim and for the government on the medical-care claim.

The district court acknowledged that it was not clear whether AR 70-25 establishes duties “owed to individuals who participated in experiments before 1988.” ER 44. Nevertheless, the court held that Section 3-2(h) requires the Army to provide former test participants with additional “notice” about the potential health effects of the tests, and further held that this duty is enforceable under Section 706(1). The district court also held that Section 3-1(k) entitles former test participants to ongoing

medical care for conditions proximately caused by their participation in testing programs. However, the court declined to order the Army to provide such care because Congress assigned the task of providing medical care to veterans to the VA. The court held that it would not “enjoin one government agency to provide health care when another agency has been congressionally mandated to do so.” ER 58.

3. Both sides appealed. The panel (Fletcher, Schroeder, Wallace JJ.) ruled for plaintiffs on both claims. Judge Wallace dissented on the medical-care claim.

With regard to the notice claim, the panel rejected the government’s argument that the duty in Section 3-2(h) is limited to individuals involved in tests conducted after the relevant language was added to the regulation in 1988. Op. at 16-20. The panel noted that Section 3-2(h) contains no temporal limitation and asserted that the regulatory history confirms that the notice obligation applies to former test subjects. *Id.* at 16-18. The panel declined to defer to the Army’s contrary interpretation because it viewed the Army’s reading as merely a “convenient litigating position.” *Id.* at 19.

With respect to the medical-care claim, the panel majority held that the district court erred in relying on the availability of care from the VA to deny injunctive relief. *Id.* at 27-29. The majority reasoned that, because Section 706(1) uses the word “shall,” it “requires a reviewing court to issue injunctive relief whenever it finds that an agency action has been unlawfully withheld.” *Id.* at 28 (citing *Forest Guardians v. Babbitt*, 174 F.3d 1178, 1187 (1999)). The majority declared that the duty to provide care under Section 3-1(k) is not “excused by the availability of medical care from another

government agency, even if that care would overlap to some degree and in some manner with the care that the Army is required to provide.” *Id.* at 29.

Dissenting with regard to the medical-care ruling, Judge Wallace emphasized that a duty is enforceable under Section 706(1) only if the relevant statute or regulation “contains an ‘unequivocal command’ about which an official has ‘no discretion whatever.’” Op. 31 (quoting *SUWZA*, 542 U.S. at 63). In his view, that standard requires a reviewing court to “focus exclusively on the text of the relevant statutes or regulations.” *Ibid.* Judge Wallace concluded that Section 3-1(k) is not an “unequivocal command” to the Army to provide medical care to former test participants, *id.* at 34-35, and that its general “authorization” for medical care “is not discrete agency action” enforceable under Section 706(1). *Id.* at 35.

## DISCUSSION

### **I. The Panel Erred In Holding That Plaintiffs Are Entitled To An Injunction Requiring The Army To Provide Medical Care In Addition To the Care Available From The Department Of Veterans Affairs.**

The panel majority held that (1) Section 3-1(k) of AR 70-25 imposes a duty on the Army to provide medical care to plaintiffs for any conditions caused by their participation in tests many years ago; (2) the required actions are sufficiently discrete to be compelled under Section 706(1); and (3) plaintiffs are entitled to an injunction notwithstanding the availability of medical care from the VA. As explained below, the majority erred in each step of its analysis, and its ruling conflicts in several important ways with decisions by the Supreme Court, this Court, and other courts of appeals.

**A. No Unequivocal Command to Provide Medical Care.**

The panel majority acknowledged Supreme Court and Ninth Circuit precedent holding that a duty is enforceable under Section 706(1) only if it is “so clearly set forth that it could traditionally have been enforced through a writ of mandamus.” Op. 15 (quoting *Hells Canyon*, 593 F.3d at 932); *see also SUWA*, 542 U.S. at 63-65. But the majority departed from that demanding standard in finding an obligation to provide care to plaintiffs – who are former volunteer test participants – in Section 3-1(k)’s general statement that “[v]olunteers are authorized all necessary medical care for injury or disease that is a proximate result of their participation in research.”

The Army construes Section 3-1(k) to govern medical care only during a volunteer’s participation in testing, and has never understood that provision to impose an ongoing obligation to provide medical care long after testing has been completed. Instead, veterans who are former test participants are eligible for medical care for any “service-connected” injuries or conditions through the comprehensive scheme Congress established specifically to provide care to veterans, which is administered by the VA. *See* 38 U.S.C. § 7301(b).

The panel majority rejected the Army’s reading of its own regulation because the text of Section 3-1(k) does not expressly limit care to the duration of the testing program, Op. 26-27, expressing the view that the most “natural reading” of the term “authorized” in Section 3-1(k) is that test participants are legally “entitled to” medical care. Op. 25. As Judge Wallace explained in dissent, however, “regardless of how

‘natural’ the majority believes its reading to be, it is not the only plausible reading.” *Id.* at 34. By rejecting the Army’s interpretation and adopting what it regarded as the most “natural reading” of Section 3-1(k), the majority violated the fundamental rule – grounded in separation-of-powers principles – that only a “specific, unequivocal command” to act is enforceable under Section 706(1). *See SUWA*, 542 U.S. at 65.

Even the specific part of Section 3-1(k) relied on by the panel majority does nothing more than “authorize” medical care, with no specific mention of care for former test participants who have left the military. That provision does not constitute an “unequivocal command” to the Army to provide such care, much less specify the circumstances or duration for such care.

The Army’s interpretation of this generally-worded provision not to require the provision of medical care to veterans long after they participated in testing programs is buttressed by the four additional paragraphs of Section 3-1(k) that focus on care *during* a testing program and prescribe the rates at which care provided in military treatment facilities will be reimbursed. For example, Section 3-1(k)(2) provides:

Medical care costs for all [non-civilian] personnel, who under the provisions of AR 40-3 are routinely authorized care in a military [medical treatment facility,] will be waived for the volunteer while in the hospital, if the volunteer would not normally enter the hospital for treatment but is requested to do so to facilitate the research. This also applies to a volunteer’s extension of time in a hospital for research when the volunteer is already in the hospital.

The recognition in the regulation that test participants will already be authorized to receive care in military facilities confirms that it applies only during testing, and

cannot be squared with a duty to provide care many years later – after a volunteer has left the Army. Moreover, the regulation’s discussion of volunteers who are asked to enter or remain in the hospital “to facilitate the research” likewise demonstrates that Section 3-1(k) is focused on care during testing itself. Finally, the contrast between these relatively detailed provisions governing the provision of care during testing and the total absence of any mention, much less any detail, about how care would be provided at some later time provides further support for the view that Section 3-1(k) was not intended to govern future care.

More fundamentally, the majority’s reading of Section 3-1(k) is inconsistent with statutes, regulations, and DoD instructions specifying the limited circumstances under which the Army is authorized to provide medical care. In particular, Congress provided discretionary authority for the Secretary of Defense and the service branches to promulgate regulations establishing eligibility for medical care not otherwise created by statute, *see* 10 U.S.C. § 1074(c)(1), but the controlling Defense Department regulation implementing Section 1074 explicitly allows medical care to be provided to research volunteers *only* “during the pendency of the volunteer’s involvement in the research.” 32 C.F.R. § 108.4(i). That regulation notes that care “*may* be extended further upon the approval of the [Under Secretary of Defense for Personnel and Readiness],” *id.* (emphasis added), but such discretionary language plainly forecloses mandamus relief to compel such care. *See also* DoD Instruction No. 6025.23 § 4(i), available at <http://www.dtic.mil/whs/directives/corres/pdf/602523p.pdf>.

In short, the majority’s expansive construction of one sentence in AR 70-25 – to require the provision of medical care to individuals long after their participation in testing programs has ceased – conflicts with the limited authorization to provide care to research volunteers provided in 10 U.S.C. § 1074(c)(1), 32 C.F.R. § 108.4(i), and applicable DoD instructions. Although the government made this argument on appeal (Govt. Br. 27-28), the panel majority simply ignored it.

**B. Providing Medical Care Is Not Discrete Action.**

Aside from not constituting an “unequivocal command” to provide medical care for former service members whose participation in testing ended long ago, the “authorization” for medical care in Section 3-1(k) “lack[s] the specificity requisite for agency action,” *SUWA*, 542 U.S. at 66, with respect to such persons. As Judge Wallace explained, Section 3-1(k) “leaves us to guess at which agency officer is obligated to provide the medical care, \* \* \* what such medical care would consist of, or when and how long medical care must be provided.” Op. 36. In the absence of specific directives on these points, the panel majority was not free to fill in the blanks and order the Army to establish a new program of medical care.

Nor could the “discrete” action requirement under 5 U.S.C. § 706(1) be satisfied by a broad injunction directing the Army to provide a new program of medical care to plaintiffs while allowing the Army some flexibility to choose the means of compliance. Indeed, the Supreme Court rejected similar attempts to evade the discrete agency action requirement in *SUWA*, explaining that Section 706(1) is

limited to discrete actions in order “to avoid judicial entanglement in abstract policy disagreements.” 542 U.S. at 66. The Court warned that

If courts were empowered to enter general orders compelling compliance with broad statutory [or regulatory] mandates, they would necessarily be empowered, as well, to determine whether compliance was achieved -- which would mean that it would ultimately become the task of the supervising court, rather than the agency, to work out compliance with the broad statutory mandate, injecting the judge into day-to-day agency management.

*Id.* at 66-67. Nowhere does the panel majority explain how the district court could enter an injunction on the medical-care claim that would avoid the kind of judicial entanglement in the day-to-day management of the Army that *SUWA* prohibits.

**C. No Injunction Was Warranted Given the Availability of Medical Care from the VA.**

Even if Section 3-1(k) imposed a duty enforceable under Section 706(1), the panel majority separately erred in overruling the district court’s determination that it would be inappropriate to enjoin one agency to provide medical care that Congress has expressly directed another agency (the VA) to provide to veterans. The majority held that the district court lacked the discretion it would ordinarily have not to issue an injunction, *see eBay Inc. v. MercExchange, L.L.C.*, 547 U.S. 388, 391 (2006), asserting that “§ 706(1) requires a reviewing court to issue injunctive relief whenever it finds that an agency action has been unlawfully withheld.” Op. 28 (citing *Forest Guardians*, 174 F.3d at 1187). That reading of Section 706(1) – which the Tenth Circuit adopted in a Section 706(1) case decided long before *SUWA* – directly conflicts with prior decisions by this Court and the D.C. Circuit.

For example, in *Biodiversity Legal Found. v. Badgley*, 309 F.3d 1166 (9th Cir. 2002), this Court stated that “a statutory violation does not always lead to the automatic issuance of an injunction” under Section 706(1), explaining that the appropriateness of an injunction instead depends on whether such relief “is necessary to effectuate the congressional purpose behind the statute” that imposed the requirement. *Id.* at 1177. In reaching that conclusion, this Court rejected the Tenth Circuit’s approach in *Forest Guardians* and opted instead to adopt the more flexible approach taken by the D.C. Circuit, which has held that a court retains equitable discretion when deciding whether to issue an injunction under Section 706(1). *See In re Barr Laboratories*, 930 F.2d 72, 74 (D.C. Cir. 1991) (“Equitable relief, particularly mandamus, does not necessarily follow a finding of a violation.”). *See also In re United Mine Workers of Am. Int’l Union*, 190 F.3d 545, 551 (1999). The panel majority ignored this binding Circuit precedent.

Finally, the majority failed to address the government’s argument that the provision of medical care by the VA provides an adequate alternative remedy within the meaning of 5 U.S.C. § 704, which forecloses an APA claim for the same relief from the Army – an argument this Court treats as jurisdictional. *See Gallo Cattle Co. v. USDA*, 159 F.3d 1194, 1198 (9th Cir. 1998). The majority made no finding that the medical care available from the VA is not an “adequate” remedy for purposes of Section 704. Nor could it have done so, as the district court found that plaintiffs had failed to present any evidence to show that VA care was inadequate. ER 60. In declaring that the district court could “take the VA’s provision of medical care into

account in formulating an injunction on remand,” Op. at 29, the majority opinion can be read to envision proceedings on remand to determine whether the care provided by the VA is generally inferior to care provided by the Army. But that would be the very type of systemic evaluation of VA benefits programs that this Court recently confirmed that federal courts lack jurisdiction to undertake. *See Veterans for Common Sense v. Shinseki*, 678 F.3d 1013 (2012) (en banc).

**II. The Panel Erred In Holding That Plaintiffs Are Entitled To An Injunction Requiring The Army To Provide Additional Notice To Plaintiffs Of Any Newly-Acquired Information That Could Potentially Affect Their Health Beyond The Notice Already Provided.**

The panel’s ruling on the notice claim was erroneous for many of the same reasons discussed above with respect to the medical-care claim. Most notably, given the conceded ambiguity on the question whether AR 70-25 even applies to testing programs terminated long before the current version of that regulation was adopted, *see* ER 44, the panel erred in holding that Section 3-2(h) imposes a clear and unequivocal duty on the Army to provide ongoing notice of newly-acquired information to former test participants that is enforceable under Section 706(1), and further erred in affirming an injunction that requires the Army to seek out such information – a duty that has no basis in the text of Section 3-2(h). The panel also erred in at least two additional ways in upholding the district court’s notice injunction.

*First*, the panel completely ignored the notice the government has already provided – and continues to provide – to former test participants. After extensive

research concluding that, in general, there were no long term health effects from the testing programs (a scientific judgment that was never challenged), the Army worked with the VA to identify former test participants and sent letters to them in 2005 and 2006. The Army also established (and continues to maintain) public websites and telephone hotlines to provide information to test participants and provided individual test files to every test participant who so requested. Like the district court, the panel apparently believed these efforts were inadequate, but it is well-established that plaintiffs may not challenge the adequacy of agency action under Section 706(1). *See Ecology Ctr., Inc. v. United States Forest Serv.*, 192 F.3d 922, 926 (9th Cir. 1999) (refusing to allow “complaints about the sufficiency of agency action dressed up as an agency’s failure to act”). Because the notice injunction affirmed by the panel necessarily rests on the premise that the Army’s prior (and ongoing) notification efforts are inadequate, the panel’s decision conflicts with binding Circuit precedent foreclosing Section 706(1) claims challenging the sufficiency of agency action.

*Second*, the panel erred in refusing to defer to the Army’s reasonable construction of its own regulation, which is normally entitled to deference under *Auer v. Robbins*, 519 U.S. 452 (1997). The primary reason the panel gave for withholding *Auer* deference was that the Army had advanced its interpretation in the context of this litigation. *See Op. 19*. But the Army’s practices over the past decades reflect its understanding of the notice undertaking and are fully consistent with the Army’s interpretation. Moreover, this Court has held that the proposition that interpretations

of regulations advanced for the first time in litigation are not entitled to deference does not apply in Section 706(1) cases where agencies typically have no occasion to set forth written interpretations of regulations prior to litigation challenging a failure to act. *See Independence Mining Co.*, 105 F.3d at 511-12. The panel's refusal to accord any deference to the Army's construction of AR 70-25 thus conflicts with binding Circuit precedent and Supreme Court decisions recognizing similar principles. *See Chase Bank USA, N.A. v. McCoy*, 131 S. Ct. 871, 880-81 (2011); *Talk America, Inc. v. Michigan Bell Tel. Co.*, 131 S. Ct. 2254, 2263-64 (2011).

### CONCLUSION

For the foregoing reasons, this case should be reheard en banc.

Respectfully submitted,

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**CERTIFICATE OF COMPLIANCE PURSUANT TO  
CIRCUIT RULES 35-4 AND 40-1**

I hereby certify that the attached petition for rehearing is proportionately-spaced, has a typeface of 14 points or more, and contains 3,874 words, as permitted by the alternate length limitations applicable to rehearing petitions under Circuit Rules 35-4 and 40-1.

**/s/ Charles W. Scarborough**  
CHARLES W. SCARBOROUGH

**CERTIFICATE OF SERVICE**

I hereby certify that on September 4, 2015, I electronically filed the foregoing with the Clerk of the Court for the United States Court of Appeals for the Ninth Circuit by using the appellate CM/ECF system. The participants in the case are registered CM/ECF users and service will be accomplished by the appellate CM/ECF system.

/s/ Charles W. Scarborough  
CHARLES W. SCARBOROUGH

**PANEL OPINION (June 30, 2015)**

**FOR PUBLICATION**

**UNITED STATES COURT OF APPEALS  
FOR THE NINTH CIRCUIT**

VIETNAM VETERANS OF AMERICA;  
SWORDS TO PLOWSHARES, Veterans  
Rights Organization; TIM MICHAEL  
JOSEPHS; WILLIAM BLAZINSKI;  
BRUCE PRICE; FRANKLIN D.  
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MUTH; DAVID C. DUFRANE;  
KATHRYN MCMILLAN-FORREST,  
*Plaintiffs-Appellants–  
Cross-Appellees,*

Nos. 13-17430  
14-15108

D.C. No.  
4:09-cv-00037-  
CW

OPINION

v.

CENTRAL INTELLIGENCE AGENCY;  
JOHN BRENNAN, Director of the  
Central Intelligence Agency; UNITED  
STATES DEPARTMENT OF DEFENSE;  
ASHTON CARTER, Secretary of  
Defense; UNITED STATES  
DEPARTMENT OF THE ARMY; JOHN  
M. MCHUGH, Secretary of the Army;  
UNITED STATES OF AMERICA;  
UNITED STATES DEPARTMENT OF  
VETERAN AFFAIRS; ROBERT A.  
MCDONALD, Secretary of Veterans  
Affairs,

*Defendants-Appellees–  
Cross-Appellants.*

2 VIETNAM VETERANS OF AMERICA V. CIA

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Appeal from the United States District Court  
for the Northern District of California  
Claudia Wilken, District Judge, Presiding

Argued and Submitted  
September 11, 2014—San Francisco, California

Filed June 30, 2015

Before: J. Clifford Wallace, Mary M. Schroeder,  
and William A. Fletcher, Circuit Judges.

Opinion by Judge W. Fletcher;  
Partial Concurrence and Partial Dissent by Judge Wallace

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### SUMMARY\*

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#### **Veterans Affairs**

The panel affirmed in part and reversed in part the district court's judgment and injunction entered in an action brought by veterans organizations, and individuals who were subjects in chemical and biological weapons experiments conducted by the United States military, seeking declaratory and injunctive relief against federal agencies.

The panel agreed with the district court that the U.S. Army had an ongoing duty under Army Regulation 70-25 to provide former test subjects with newly available information

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\* This summary constitutes no part of the opinion of the court. It has been prepared by court staff for the convenience of the reader.

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relating to their health, and that this duty was judicially enforceable under § 706(1) of the Administrative Procedure Act. The panel held that the district court did not abuse its discretion in entering its injunction to enforce that duty.

The panel also agreed with the district court that the Army had an ongoing duty to provide medical care. The panel disagreed with the district court's denial of relief on the ground that the Department of Veterans Affairs provided medical care that to some degree duplicated the care the Army was obligated to provide. The panel held that the district court could not, in the absence of mootness, categorically deny injunctive relief to former volunteer subjects seeking necessary medical care because some former subjects may be entitled to receive medical care from another government agency. The panel vacated the district court's summary judgment for the government on this claim and remanded to the district court.

Judge Wallace joined the majority in affirming the district court's judgment and injunction compelling the Army to comply with Army Regulation 70-25's clear regulatory mandate, but wrote separately in concurrence because he did not join the majority's analysis of regulatory history to support its textual analysis. Judge Wallace dissented from the majority's conclusion that Army Regulation 70-25 also contained a command that the Army provide medical care to former research volunteers. He would affirm the district court's summary judgment against plaintiffs on their claims for medical care, but on the alternative ground that their claim was not judicially enforceable under § 706(1) of the Administrative Procedure Act.

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**OPINION**

W. FLETCHER, Circuit Judge:

From the inception of the United States' chemical weapons program during World War I until the mid-1970s, the United States military conducted chemical and biological weapons experiments on human subjects. In these experiments, tens of thousands of members of the United States armed services were intentionally exposed to a range of chemical and biological agents.

Plaintiffs are veterans' organizations and individuals who were subjects in these experiments. They filed an individual and class action complaint seeking declaratory and injunctive relief against the Department of Defense ("DOD"), the Army, the Central Intelligence Agency ("CIA"), and the Department of Veterans Affairs ("VA"). The class comprises "[a]ll current or former members of the armed forces, who, while

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serving in the armed forces, were test subjects” in these experimentation programs. Two of Plaintiffs’ claims, brought under § 706(1) of the Administrative Procedure Act (“APA”), are at issue in this appeal. Plaintiffs claim, first, that the Army has unlawfully failed to notify test subjects of new medical and scientific information relating to their health as it becomes available. They claim, second, that the Army has unlawfully withheld medical care for diseases or conditions proximately caused by their exposures to chemicals during the experiments.

On cross-motions for summary judgment, the district court held that Army Regulation 70-25 (“AR 70-25”) imposes on the Army an ongoing duty to notify former test subjects of relevant new health information as it becomes available. The court issued an injunction requiring the Army to comply with that duty. The court held, further, that AR 70-25 imposes on the Army an ongoing duty to provide medical care, but the court declined to compel the Army to provide such care on the ground that Plaintiffs could seek medical care from the VA.

We affirm in part and reverse in part. We agree with the district court that the Army has an ongoing duty under AR 70-25 to provide former test subjects with newly available information relating to their health, and that this duty is judicially enforceable under § 706(1). We also agree with the district court that the Army has an ongoing duty to provide medical care. However, the district court denied relief on the ground that the VA provides medical care that to some degree duplicates the care the Army is obligated to provide. We disagree with the district court that relief should have been denied on this ground.

## I. Background

As relevant to this suit, beginning in 1942 the War Department (as it was then called) approved the use of human subjects in experiments to test the effects of chemical weapons. Some experiments tested the effectiveness of various chemical agents, while others tested the effectiveness of protective clothing and other defenses. By the end of World War II, more than 60,000 service members had served as subjects in the United States' chemical weapons research program.

During the World War II-era tests, “soldier volunteers” were intentionally exposed to a variety of chemical agents. According to a 1993 report by the National Academy of Sciences, they were exposed to Lewisite (an arsenic-based blister agent) and mustard gas, as well as other “gases such as phosgene (a choking agent), hydrogen cyanide and cyanogen chloride (blood poisoning agents), and chloroacetophenone (tear gas).” A 2006 VA report recounted that these subjects “were exposed commonly to acutely toxic levels . . . of agents via small drops applied to the arm or to clothing, or in gas chambers, sometimes without protective clothing.” “Some experiments apparently involved less protected subjects who were reported to have experienced severe burns to the genital areas, including cases of crusted lesions to the scrotum . . . . Documented injuries among experimental subjects . . . [were] initially ‘quite high’—one study of accidental injuries identified over 1,000 cases of acute mustard agent toxicity resulting in eye, ear, nose and throat symptoms . . . over a 2-year period.”

In the 1950s, DOD initiated a new wave of chemical weapons research and experimentation, focused on “agents

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perceived to pose greater threats than sulfur mustard or Lewisite,” such as nerve agents and chemicals with “intense psychoactive properties.” These experiments were conducted over the course of about twenty years, from 1955 to 1975. During the course of this research, DOD exposed about 6,700 human subjects to more than 250 different chemical and biological agents.

Beginning in the 1950s, the Army established policies and issued regulations governing the use of human subjects. On February 26, 1953, Secretary of Defense Charles Wilson sent a memorandum (“the Wilson Directive”) to the Secretaries of the Army, Navy, and Air Force. The Wilson Directive set conditions for “the use of human volunteers by the Department of Defense in experimental research in the fields of atomic, biological and/or chemical warfare.” It stated that “[t]he voluntary consent of the human subject is absolutely essential,” and instructed that a volunteer subject “should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him to make an understanding and enlightened decision” about participating.

On June 30, 1953, Brigadier General John Oakes, Secretary of the General Staff of the Army, sent a memorandum (“CS:385”) to the Army’s Chief Chemical Officer, the Army Surgeon General, and other top Army officials, reiterating the policies articulated in the Wilson Directive. CS:385 provided that “[a]gents used in research must have” several “limiting characteristics,” including “[c]ontrollable lethality,” “[n]o serious chronicity anticipated,” “[e]ffective therapy available,” and “[a]dequate background of animal experimentation.” The memorandum provided further, that “[a]s added protection for volunteers,

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[other] safeguards will be provided,” including that “[a]ll apparatus and instruments necessary to deal with any emergency situations must be available,” and that “[m]edical treatment and hospitalization will be provided for all casualties of the experimentation as required.”

In 1962, the Army promulgated AR 70-25, a regulation prescribing policies and procedures to govern the use of volunteers in Army research involving human subjects. AR 70-25 reiterated the policies in the Wilson Directive, including the requirement of voluntary consent. The regulation provided:

[The volunteer] will be told as much of the nature, duration, and purpose of the experiment, the method, and means by which it is to be conducted, and the inconveniences and hazards to be expected, as will not invalidate the results. He will be fully informed of the effects upon his health or person which may possibly come from his participation in the experiment.

The regulation also provided, in language similar to CS:385, that “[a]ll apparatus and instruments necessary to deal with likely emergency situations will be available,” “[r]equired medical treatment and hospitalization will be provided for all casualties,” and “[a] physician approved by The Surgeon General will be responsible for the medical care of volunteers.” The Army reissued AR 70-25 in 1974 with the foregoing language unchanged.

In 1975, the Army ceased performing large scale experiments exposing human subjects to chemical agents. In

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the late 1970s, against a backdrop of mounting public concern about the long-term effects of such experiments, Army officials exchanged a series of memoranda outlining a program for notifying past subjects about the health consequences of their participation in the experiments. On August 8, 1979, Army General Counsel Jill Wine-Volner wrote a memorandum to a number of high-level Army officials and to the Army Surgeon General. She wrote that the Secretary of the Army

has concluded that, as a policy matter, some type of notification program is necessary. Moreover, the legal necessity for a notification program is not open to dispute. The Department of Justice has concluded that another Federal agency ‘may well be held to have a legal duty to notify those . . . drug-testing subjects whose health [it] has reason to believe may still be adversely affected by their prior involvement in [the] drug-testing program.’

(Omission and alterations in original.)

On September 24, 1979, Wine-Volner wrote another memorandum, this time to the Director of the Army Staff, providing “broad guidance” about “a program to notify participants in Army drug or chemical/biological agent research programs.” The memorandum provided, *inter alia*:

The Army should review all research programs, regardless of whether conducted by the Army or on behalf of the Army by independent contractors, that were initiated to





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reissued version provided, “Volunteers are authorized all necessary medical care for injury or disease that is a proximate result of their participation in research.”

The reissued regulation also stated that “commanders will . . . [e]nsure that research volunteers are adequately informed concerning the risks associated with their participation, and provide them with any newly acquired information that may affect their well-being when that information becomes available.” Chapter 3–2(h) (“subsection (h)”) specified:

*Duty to warn.* Commanders have an obligation to ensure that research volunteers are adequately informed concerning the risks involved with their participation in research, and to provide them with any newly acquired information that may affect their well-being when that information becomes available. The duty to warn exists even after the individual volunteer has completed his or her participation in research. To accomplish this, the MACOM [(Major Army Commands)] or agency conducting or sponsoring research must establish a system which will permit the identification of volunteers who have participated in research conducted or sponsored by that command or agency, and take actions to notify volunteers of newly acquired information.

Finally, in what the Army later conceded was a “serious” editing error, Appendix F provided that “[r]esearch involving deliberate exposure of human subjects to nuclear weapons

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effect, to chemical warfare agents, or to biological warfare agents” was “exempt from this regulation.”

The Army reissued AR 70-25 two years later. This 1990 revision remains in force today. This revision was, in all relevant respects but one, the same as the 1988 revision. There was, however, one important change — the correction of the erroneous exemption from coverage of human subjects who had been deliberately exposed to “nuclear weapon effect” and to chemical and biological agents. The 1990 “Summary of Change” specified, “This change is published to correct a serious error that occurred during the final editing of the current revision. In attempting to respond to guidance from the Office of The Judge Advocate General that a subparagraph be moved from the text of the regulation to appendix F, the wrong sub-paragraph was moved.” Chapter 1–4(d)(4) of AR 70-25 was changed to state explicitly, “The guidance in this regulation pertains to . . . [r]esearch involving deliberate exposure of human subjects to nuclear weapons effect, to chemical warfare agents, or to biological warfare agents.”

In the decades since the termination of chemical testing on human subjects, Defendants have identified, contacted, and notified some of the former subjects. For example, in 1990 DOD contacted 128 veterans who had participated in World War II mustard gas testing. In 2004, DOD identified 6,387 individuals who had been exposed to mustard gas or other agents during World War II-era experiments. Beginning in March 2005, the VA sent letters to the 319 of those individuals for whom it could find contact information.

In 2009, Plaintiffs filed suit against DOD, the Army, the CIA, the VA, and a number of individuals in their official



factual findings for clear error, and the scope of the injunction for abuse of discretion. *Id.*

### III. Discussion

Section 706(1) of the APA provides that a court “shall compel agency action unlawfully withheld or unreasonably delayed.” 5 U.S.C. § 706(1). A court can compel agency action under this section only if there is “a specific, unequivocal command” placed on the agency to take a “discrete agency action,” and the agency has failed to take that action. *Norton v. S. Utah Wilderness Alliance (SUWA)*, 542 U.S. 55, 63–64 (2004) (citation omitted). The agency action must be pursuant to a legal obligation “so clearly set forth that it could traditionally have been enforced through a writ of mandamus.” *Hells Canyon Pres. Council v. U.S. Forest Serv.*, 593 F.3d 923, 932 (9th Cir. 2010). Plaintiffs argue that AR 70-25 imposes unequivocal commands on the Army to provide former test subjects with current information about their health, and to provide medical care for diseases caused by the experiments. We agree.

#### A. Duty to Warn

We conclude that Chapter 3–2(h) of AR 70-25 (“subsection (h)”), as promulgated in 1988 and 1990, requires the Army to provide former test subjects with “newly acquired information” regarding their health as that information becomes available. We agree with the district court that this “duty to warn” applies not only to future human subjects, but also to test subjects who participated in experiments predating the regulation. We hold, further, that the district court did not abuse its discretion in issuing an injunction enforcing this duty.

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1. Duty to Warn Under AR 70-25

AR 70-25 obligates the Army to warn volunteers of the risks of participating in the experiments, and to provide them with new information “that may affect their well-being” as it becomes available. Subsection (h) of AR 70-25 provides:

*Duty to warn.* Commanders have an obligation to ensure that research volunteers are adequately informed concerning the risks involved with their participation in research, and to provide them with any newly acquired information that may affect their well-being when that information becomes available. The duty to warn exists even after the individual volunteer has completed his or her participation in research. To accomplish this, the MACOM [(Major Army Commands)] or agency conducting or sponsoring research must establish a system which will permit the identification of volunteers who have participated in research conducted or sponsored by that command or agency, and take actions to notify volunteers of newly acquired information.

Subsection (h) was added to AR 70-25 in 1988. The text makes clear that the duty to provide notice applies not only to possible future subjects but also to former subjects. There is nothing in subsection (h) that limits its application to those who volunteered in experiments after the promulgation of the regulation in 1998. Indeed, subsection (h) specifically requires Army commanders to identify the volunteers “who *have participated* in research conducted or sponsored by that

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command or agency, and take actions to notify volunteers of newly acquired information.” (Emphasis added.) Similarly, subsection (h) provides that “[t]he duty to warn exists even after the individual volunteer has completed his or her participation in research.”

The Army’s revision of AR 70-25 in 1990 makes even more compelling our reading of subsection (h). The 1990 version retains the provision of the 1988 regulation that requires notice to human subjects. But the Army made an important change in 1990 in stating explicitly that the notice requirement under AR 70-25 applies to “[r]esearch involving deliberate exposure of human subjects to nuclear weapons effect, to chemical warfare agents, or to biological warfare agents.” Chapter 1–4(d)(4). The 1990 revision would have made little sense if the notice requirement applied only prospectively. The only subjects to whom Chapter 1–4(d)(4) could apply are those who had previously been part of Army experiments. As the district court stated, “Because the Army did not [in 1988 or 1990] — and does not — engage in such ongoing testing, there would have been no reason to add this language to AR 70-25 in 1990 if the regulation did not encompass those who had already become such test subjects.”

Our reading of AR 70-25 is consistent with the internal agency discussions in the years leading up to the 1988 and 1990 revisions of the regulation. Army memoranda discussing proposed notification programs all recognized an obligation to warn individuals who had been subjects in past research and testing about the potential long-term health risks, as well as to provide additional information about those risks when such information became available. For example, Army General Counsel Jill Wine-Volner wrote in her August 1979 memorandum that “the legal necessity for a notification

program is not open to dispute.” That led Wine-Volner to write a second memorandum in September 1979 stating that “[i]f there is reason to believe that any participants in [the biological and chemical weapons testing] programs face the risk of continuing injury, those participants should be notified of their participation and the information known today concerning the substance they received.” She wrote, further, “This notification should be [e]ffected regardless of whether the individuals were fully informed volunteers at the time the research was undertaken.”

Our reading is also consistent with the amending and creating of databases in 1981 and 1986. As we describe above, in 1981 the Army amended a database that included members of the military who had previously volunteered for human testing in order “to follow up on individuals who voluntarily participated in Army chemical/biological agent research projects for the purpose of assessing risks/hazards to them.” *Privacy Act of 1974; Amendment to System Notice*, 46 Fed. Reg. 60,639, 60,640 (Dec. 11, 1981). Then, in 1986, the Army created a new database that included members of the military “participating in current and future research” in order to “contact individuals who participated” in such research in order to provide them with “newly acquired information, which may have an impact on their health.” *Privacy Act of 1974; New Record System*, 51 Fed. Reg. 23,576, 23,577 (June 30, 1986). The Army clearly anticipated using these databases to provide ongoing medical health information to the volunteers who had participated in the Army’s chemical and biological research experiments before 1988.

Despite the foregoing, Defendants contend that subsection (h) applies only to human subjects upon whom experiments



We do not believe that the interpretation of the notice provision of AR 70-25 that the Army now advances is the “agency’s fair and considered judgment on the matter in question.” *Auer*, 519 U.S. at 462. The Army supported its interpretation of AR 70-25 by relying on the testimony of Dr. Michael Kilpatrick, Director of Strategic Communications for the Office of the Under Secretary of Defense for Health Affairs. However, we have reason to doubt Dr. Kilpatrick’s analysis. As the district court observed, “Notably, the agency representative upon whose interpretation Defendants rely was mistaken about the date on which the operative parts of the regulation were amended, suggesting that he did not have a clear understanding of the context in which these changes were made.”

The text of AR 70-25 requires the Army to provide ongoing notice to volunteers who “have participated” in the Army’s testing programs. We conclude that this duty applies to human subjects in the pre-1990 experiments.

## 2. Enforceability Under § 706(1)

Even though AR 70-25 imposes a duty on the Army to provide notice to prior test subjects of information regarding their well-being, we can enforce that duty only if the text of the regulation is a “specific, unequivocal command” to take “discrete agency action.” *SUWA*, 542 U.S. at 63–64 (citation omitted). The duty to warn contained in subsection (h) is such a command.

We recognize that § 706(1) poses an obstacle for parties seeking to compel agency action. In *SUWA*, the Court explained that parties are entitled to relief under § 706(1) only if the agency “failed to take a *discrete* agency action that





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agents since June 30, 2006, or will be acquired in the future. The injunction directs the Army to file with the court a report “describing the efforts it has undertaken to locate the Newly Acquired Information,” “confirming whether Newly Acquired Information has been found and describing generally its nature,” “explaining the plan it has in its discretion developed for transmitting Newly Acquired Information to the class members entitled to notification,” “committing to transmit the Newly Acquired Information” within 120 days of the entry of the injunction, and “outlining the plan and policies it has in its discretion developed for (i) periodically collecting and transmitting Newly Acquired Information that becomes available to it after the Entry Date and (ii) providing any necessary update reports to the Court regarding such future efforts.”

We hold that the injunction is appropriately tailored to direct the Army to carry out its duty to warn. In requiring the Army to tell former test subjects about “newly acquired information that may affect their well-being,” the injunction merely reiterates the plain language of AR 70-25’s duty to warn. As subsection (h) stated, “Commanders have an obligation to ensure that research volunteers are adequately informed concerning the risks involved with their participation in research, and to provide them with any newly acquired information that may affect their well-being when that information becomes available.”

The district court did not abuse its discretion in entering this injunction. It expressly preserves the Army’s ability to act “in its discretion” to develop the appropriate policies in order to carry out that duty. It does not prescribe particular policies that the Army should follow. It does not even specify the means by which the Army must give that notice.

In this respect, the injunction does not amount to programmatic oversight or “judicial entanglement in abstract policy disagreements which courts lack both expertise and information to solve.” *SUWA*, 542 U.S. at 66. The injunction simply directs the Army to fulfill its duty under subsection (h).

### B. Duty to Provide Medical Care

Chapter 3–1(k) of AR 70-25 (“subsection (k)”) provides, “Volunteers are authorized all necessary medical care for injury or disease that is a proximate result of their participation in research.” Plaintiffs seek an injunction that would require the Army to provide that care. The parties agree that the Army and DOD do not currently provide medical care to former test subjects “in the absence of those [individuals] being retirees of the military, medical retirees, reservists or active duty military.”

We conclude that subsection (k), as promulgated in 1988 and 1990, requires the Army to provide former test subjects with medical care for any injuries or diseases that were proximately caused by Army experiments in which they participated. The fact that the VA provides medical care to some former test subjects, for reasons independent of AR 70-25, does not relieve the Army of its duty under that subsection.

#### 1. Duty to Provide Care Under AR 70-25

The text of subsection (k) compels the conclusion that the Army must provide care to former test subjects. It provides that “[v]olunteers are authorized all necessary medical care” for any injuries or diseases that are the proximate result of







In *Forest Guardians v. Babbitt*, 174 F.3d 1178 (10th Cir. 1999), the Tenth Circuit held that once a failure to act has been established under § 706(1), the reviewing court must compel the agency to act. *Id.* at 1187. The Tenth Circuit recognized that while a court generally has discretion to deny injunctive relief to remedy a statutory violation, “Congress may ‘restrict[] the court’s jurisdiction in equity’ by making injunctive relief mandatory for a violation.” *Id.* (alteration in original) (quoting *Weinberger v. Romero-Barcelo*, 456 U.S. 305, 313 (1982)). The Tenth Circuit held that “when a statute uses the word ‘shall,’” as § 706(1) does, “Congress has imposed a mandatory duty upon the subject of the command.” *Id.* We agree with the Tenth Circuit that § 706(1) requires a reviewing court to issue injunctive relief whenever it finds that an agency action has been unlawfully withheld. *Id.*

The district court concluded that the Army is required under subsection (k) to provide necessary medical care on an ongoing basis, but held that an injunction was unnecessary, given the availability of medical care from the VA. The court explained that it would “not enjoin one government agency to provide health care when another agency has been congressionally mandated to do so.” Notably, however, the district court did not hold that the availability of medical care from the VA rendered Plaintiffs’ request for an injunction moot. Nor do Defendants argue to us that the availability of medical care from the VA renders the Plaintiffs’ request moot. We can readily see why they do not make such an argument, for there is nothing in the record upon which to base a conclusion that the medical care available from the VA would be equal in scope and quality to the medical care that Plaintiffs claim is owed to them by the Army. Indeed, the government admitted in the district court that it does not provide medical care to former test subjects “in the absence

of those [former subjects] being retirees of the military, medical retirees, reservists or active duty military.” In the absence of mootness, we cannot agree that the Army’s duty to provide care is excused by the availability of medical care from another government agency, even if that care that would overlap to some degree and in some manner with the care that the Army is required to provide.

We hold that the district court may not, in the absence of mootness, categorically deny injunctive relief to former volunteer subjects seeking necessary medical care because some former subjects may be entitled to receive medical care from another government agency. Given the present posture of the case, however, we do not address whether and in what manner the district court might nonetheless take the VA’s provision of medical care into account in formulating an injunction on remand.

### Conclusion

We hold that Chapter 3–2(h) of AR 70-25 imposes a duty on the Army to provide all former test subjects with newly acquired information that may affect their well-being, and that this duty is judicially enforceable under § 706(1). We hold that the district court did not abuse its discretion in entering its injunction to enforce that duty. We hold, further, that the district court was right to find that Chapter 3–1(k) imposes a duty to provide medical care. The district court did not, however, have the power to decline to compel care on the ground that another agency was providing similar care to some former test subjects. We therefore vacate the district court’s summary judgment for the government on this claim and remand to the district court.

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**AFFIRMED** in part, **REVERSED** and **REMANDED** in part.

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WALLACE, Circuit Judge, concurring in part and dissenting in part:

I agree that the text of AR 70-25 unequivocally commands the Army to provide certain newly acquired information to all former research volunteers when that information becomes available. Because the Army has “unlawfully withheld” agency action by denying that it owes this duty to certain past volunteers, I join the majority in affirming the district court’s judgment and injunction compelling the Army to comply with AR 70-25’s clear regulatory mandate. *See* 5 U.S.C. § 706(1). I write separately in concurrence on this point only because I do not join the majority’s analysis of regulatory history to support its textual analysis.

I dissent, however, from the majority’s conclusion that AR70-25 also contains a “specific, unequivocal command” that the Army provide medical care to former research volunteers. I would affirm the district court’s decision to grant summary judgment against Plaintiffs on their claims for medical care, but on the alternative ground that their claim is not judicially enforceable under section 706(1) of the Administrative Procedure Act (APA).

I.

“Section 706(1) of the APA . . . serves important interests, but [it] does not give us license to ‘compel agency action’

whenever the agency is withholding or delaying an action we think it should take.” *Hells Canyon Pres. Council v. U.S. Forest Serv.*, 593 F.3d 923, 932 (9th Cir. 2010). Rather, our authority to “compel agency action” is “carefully circumscribed to situations where an agency has ignored a specific . . . command,” *id.*, that is located in a federal statute or “agency regulation[] that ha[s] the force of law,” *Norton v. S. Utah Wilderness Alliance (SUWA)*, 542 U.S. 55, 65 (2004). Moreover, the “purportedly withheld action must not only be ‘discrete,’” *Hells Canyon*, 593 F.3d at 932, meaning that it must be a “precise, definite act,” *SUWA*, 542 U.S. at 63, “but also ‘legally required,’” 593 F.3d at 932, meaning that the text of the statute or regulation contains an “unequivocal command” about which an official has “no discretion whatever,” 542 U.S. at 63 (internal quotation marks omitted), such that the duty “could traditionally have been enforced through a writ of mandamus.” *Hells Canyon*, 593 F.3d at 932.

A.

Our analysis must focus exclusively on the text of the relevant statutes or regulations to determine whether this standard is satisfied. This purely textual approach, amounting to a “clear-statement rule,” is not unique to the section 706(1) context. It is indispensable whenever a statute requires us to determine whether a particular text obligates agency actors to assume a specific duty or to perform a discrete act.

Like an action brought under section 706(1) of the APA, for example, a citizen suit may be brought under section 505(a)(2) of the Clean Water Act only where plaintiffs “allege[] a failure of the [EPA] Administrator to perform any act or duty under this chapter which is not discretionary with the Administrator.” 33 U.S.C. § 1365(a)(2). If plaintiffs are





## 1.

The first is Chapter 3-1(k) (subsection (k)), which provides, “Volunteers are authorized all necessary medical care for injury or disease that is a proximate result of their participation in research.” This subsection is not an “unequivocal command” to provide medical care. That is, while the authorization in subsection (k) certainly removes a barrier to volunteers’ receipt of medical care—making it clear, at least, that volunteers should not be denied medical care for lack of authorization—it does not clearly require the Army to provide medical care. This is a far cry from the typical mandatory language we usually require in section 706(1) cases. *See Rivas v. Napolitano*, 714 F.3d 1108, 1111 (9th Cir. 2013) (observing that “[t]he mandatory language used in the regulation makes the act of reconsideration non-discretionary”).

The majority, of course, believes the more “natural reading” of the word “authorized” is that “the volunteers are entitled to receive the ‘necessary medical care’ specified in the subsection.” But regardless of how “natural” the majority believes its reading to be, it is not the only plausible reading. The only thing that subsection (k) makes clear is that volunteers are authorized to receive medical care, which is one or two logical steps away from the majority’s conclusion that the Army has a legal obligation to provide them with that medical care. Although it is possible to read into the text of subsection (k) the assumption that the authorization is the only thing volunteers need in order to be entitled to medical care, and the assumption that the Army has a duty to provide medical care to anyone who is entitled to it, it is also possible to read the text of subsection (k) without those assumptions.

Because the text is reasonably open to interpretation, it does not state an *unequivocal* command.

The majority derives no legitimate support for its position from examining the now-defunct 1962 and 1974 versions of AR 70-25. For the reasons stated in Part I of my separate opinion, this history is simply irrelevant to the textual analysis the Supreme Court requires us to undertake when analyzing a section 706(1) claim. *SUWA*, 542 U.S. at 63.

2.

Subsection (k)'s "authorization" for medical care, in addition to not being legally required, also is not *discrete* agency action. Discrete agency action for purposes of section 706(1) is a "precise, definite act," like the promulgating of a rule or the taking of some decision by a statutory deadline. *SUWA*, 542 U.S. at 63. The phrase "[v]olunteers are authorized all necessary medical care for injury or disease that is a proximate result of their participation in research," does not qualify as "the ordering of a 'precise, definite act . . . about which [an official] ha[s] no discretion whatever.'" *Id.* This is most easily demonstrated by comparing subsection (k) to subsection (h)—the "duty to warn" subsection—which does command discrete agency action.

Subsection (h) unambiguously identifies which agency or officers ("Commanders"; "MACOM") are "legally required" ("have an *obligation*"; "*must* establish") to perform a "discrete action," ("provide [volunteers] with any newly acquired information") which is described "precise[ly]" and "definite[ly]":

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- *What*: “information that may affect their well-being”;
- *When*: “when [it] becomes available” and “even after the individual volunteer has completed his or her participation in research”;
- *To Whom*: “research volunteers”—“[t]o accomplish this, [the Army] must establish a system which will permit identification of volunteers who *have participated* in research . . . and take actions to notify volunteers of newly acquired information.”

Subsection (k), in contrast, leaves us to guess at which agency officer is obligated to provide the medical care (assuming, of course, that “authorized” means “required”—it does not), what such medical care would consist of, or when and how long medical care must be provided (only during research? only in “emergency” situations? forever?). As a result, subsection (k) “lack[s] the specificity requisite for agency action.” *SUWA*, 542 U.S. at 66.

B.

Only one other provision of AR 70-25 could possibly provide the basis for a judicially enforceable duty to provide medical care: Chapter 2-5(j) (subsection (j)). Subsection (j) provides, “The Surgeon General . . . will . . . [d]irect medical followup, when appropriate, on research subjects to ensure that any long-range problems are detected and treated.” Subsection (j), like subsection (k), lacks the usual language of obligation. Subsection (j) contemplates action by the Army Surgeon General only “when appropriate.” That grant of

