



Veterans-For-Change Newsletter

A Voice of the Veterans

Week Ending Sunday, December 10, 2017

Volume 8, Issue 46



This-N-That

For many years now, one issue on our "hit list" of issues regarding the VA are their hiring practices for medical professionals, namely doctors.

The Department of Veterans Affairs has been and still is hiring doctors with malpractice claims and even felony convictions in their professional histories and some even without a license at all.

There are a number of doctors being hired over the past three or four years despite highly questionable black marks in their backgrounds. In one case, a Department hospital in Oklahoma hired a psychiatrist in 2013 who had been

professionally reprimanded for sexual misconduct.

Veterans-For-Change has been continually requesting a National Clearing House Database which would not only help the Civilian world but the VA world of healthcare.

With a National Clearing House Database, it would allow all 50 states of civilian and VA Hospitals to check that database for any criminal backgrounds, malpractice claims, license suspensions, and license revocations which would further the ability to all Hospitals nationwide in making far better hiring decisions and prevent the harm of or loss of life of anyone, Veteran or Civilian.

Currently VFC is working with one Veteran due to ineffective VA Healthcare came close to losing his life! But thankfully the VA had to refer him out to a civilian doctor and hospital for life saving care, and thankfully today is still alive, and doing well.

And over the past few years Veterans have screamed for the ability to go to a civilian doctor and hospital, and the CHOICE ACT was born.

However, when Veterans demanded this, either they didn't think it through clearly, or simply relied on a member of Congress to do "right". And the bill passed with flying colors, no hesitation, pause, or amendments. And the reason it passed as there was nothing spelled out in detail for allowance of use and/or coverage and the amount of funding needed would be minimal as the plan was not spelling out in detail the real needs of Veterans and the real

coverage it would provide.

For some Veterans, it's worked great for them, but for many more Veterans it has not due to it's limitations vs. ability to help.

Another thing Veterans have been screaming for is to shut down the VA and allow all Veterans to use civilian care. And again no one is thinking this through!

I've personally spent a number of years researching this very thing. What I did find were hundreds of ways to save money which in turn could be "re-invested" into actual care being provided in VA Hospitals and ability to fund other medical issues and benefits not currently covered or allowed.

The biggest problem I still see thirteen years later is that Veterans just won't be or get involved, part of which I understand being pride. But that begs the question which is more important, pride or health.

We have forty million plus Veterans in the Country. And if we could only get even 70% of that same forty million Veterans involved, seriously we could win the battle, get the best medical care provided, the proper benefits paid out, claims and appeals approved more quickly and less costly.

Let me explain a little further.

If we could get the 70% involved in making calls to their reps in DC, sending messages via their individual websites,

and for those who have the ability to send faxes, do this on a weekly basis which doesn't take but maybe 20-30 minutes of your time. Then add to that sending the information out in an E-Mail to all your family, friends, and Veteran friendly people and asking each of them to do the same thing this would pretty much shut down their day to day operations.

The one thing members of Congress are truly great at is lining their pockets. So clogging up phone lines and e-mails would prevent them from their favorite job, LINING THEIR POCKETS.

Once we're successful in stopping their day to day activities, I could almost guarantee they would stop, listen, and take immediate action to resolve the problems if for nothing more than to get back to their favorite thing, LINING THEIR POCKETS.

And while contacting them, you simply remind them that the Veteran votes make up 7-8% of their constituency and that very same 7-8% could make or break any bid for re-election!

We have many Veterans who have been fighting for benefits and medical care for 50+ years, and many more who have been fighting for benefits and medical care for 15+ years. So, isn't it time we all stand up, make our voices heard and fight for what is long over due, well earned, not to mention promised?

On behalf of our Volunteers nationwide and myself, we

wish you and your family a very Merry Christmas and good health!

Respectfully,

Jim Davis

Founder

Jim.Davis@Veterans-For-Change.org



State of Emergency in California due to Wildfires

The governor of California has declared a State of Emergency in Ventura county due to Wildfires. Emergency refill procedures are in place through December 16, 2017.

[Read more](#)





White House VA Hotline Now Fully Staffed and Operational Around the Clock to Serve Nation's Veterans

WASHINGTON - The U.S. Department of Veterans Affairs (VA) announced that the White House VA Hotline, first launched in June as part of President Donald J. Trump's commitment to reforming VA, is now fully staffed with live agents working to serve Veterans 24-hours a day, 365 days a year.

The hotline, which became 24-hour operational in mid-October, is now staffed by a team consisting of 90 percent Veterans or employees who have a Veteran family member, and is in [response to Veterans' requests](#) to talk to agents who could relate to their experiences.

"The White House VA Hotline provides our nation's

Veterans with a direct, dedicated contact line that allows them to interact with highly trained, live agents to answer their needs and concerns," said VA Secretary David J. Shulkin.

"Since the initial launch of the hotline in June, we listened to our Veterans, who indicated that they prefer speaking with other Veterans and Veteran family members, and we adjusted our hiring based on that feedback," added Shulkin.

"We're proud that the hotline is now staffed 24/7 by a team of mostly Veterans or Veteran family members who have direct knowledge of their particular concerns and can use their experience to address them in the best way possible with the resources of the VA. This represents a true win-win for Veterans and their loved ones."

Since 24/7 coverage began in October, the hotline has served more than 10,000 callers.

Hotline agents answer inquiries, provide directory assistance, document concerns about VA care, benefits and services, and expedite the referral and resolution of those concerns. Agents undergo regular updates and training on VA services based on hotline trends and are assisted by newly implemented tracking software to help VA capture and improve its response, referral and resolution processes to best support Veterans.

The hotline can be accessed at 855-948-2311 and is VA's first non-clinical, non-emergency around-the-clock call center. It provides Veterans a supplemental option to report issues if they are not being addressed through VA's normal

customer service channels.

The hotline's agents are located at a VA facility in Shepherdstown, West Virginia. Agents have access to a multitude of resources and contact information to help Veterans. The hotline also generates real-time reports to VA experts who can help address the specific issues of Veterans as well as make better-informed decisions on where program improvements are needed.

Source: TREA



Merry Christmas



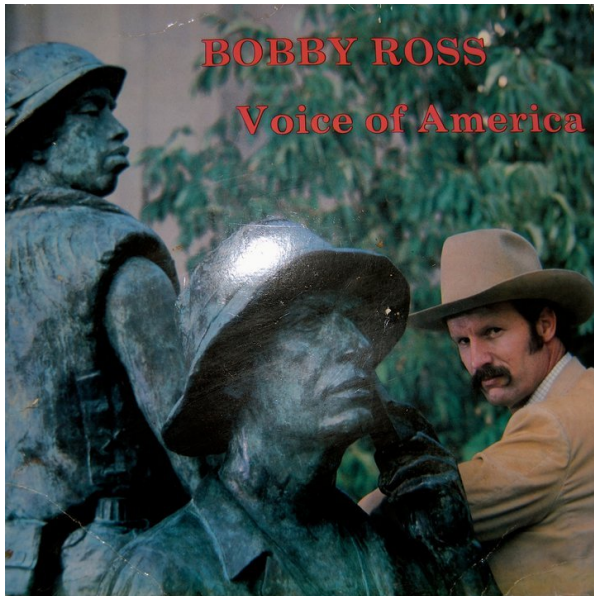
State of Emergency in California Expanded

The governor of California has declared a State of Emergency in Los Angeles, Santa Barbara, San Diego and Ventura counties. Emergency refill procedures are in place through December 16, 2017.

[Read more](#)



30 Year Anniversary for LT Bobby Ross LRRP Network



Thirty years ago this month I had produced my "[Voice of America](#)" shortly after I had moved to Nashville in 1986. I had just graduated from the world famous [Music Department of San Francisco State University](#) singing opera.

So, I put on my cowboy uniform, and moved to Music City dreaming to become a Country Music recording artist. Down the road from my University was [Silicon Valley](#), where my Dad had an office. I was on the ground floor of this 'new' stuff going on with computers and this really new thingie called "[The Internet](#)". I was the first in Nashville to have a web site in Cyberspace, and this month 30 years ago I started my LRRP Network. It is presently one of the largest on the Internet. So have fun with my newsletter and remember it is an "Interactive Adventure". All the pictures and highlighted words are capable of taking you to other locations with two little clicks of your mouse. Have a great Christmas and New Years and I look forward to being with you, again, in 2018.



Veterans-For-Change Web Site

The Veterans-For-Change website has been under construction since day one back in 2009 and every day since then. The looks pretty much stay the same, but in the background constant improvement and change is being done to make our website the most user friendly “One-Stop-Shop” website to find almost everything you might have tried to find searching the internet.

Almost a hundred people have been involved; collecting web links to documents now houses on the VFC website, collecting thousands of web links for various issues, illnesses and benefits. Creating forums for all eras of service and two forums one just for men and one just for woman where you can go question, comment, share medical and personal concerns, what ever you’d like it to be.

We also have a forum with a licensed Mental Health Worker, again where you can seek help or just ask questions.

We average **2,200** hits per day, and downloads average **1,200** per day with a total **3,737,976** visitors as of Friday.

If you subscribe you will have full access to the entire website and best of all it’s FREE of charge! You just need a valid E-mail address so the system can send you a

confirmation E-Mail. Once received, click on the link to be authorized automatically.

->www.veterans-for-change.org<-

- Documents Library with over **16,155** documents on-line (Updated: 11/13/17)
- FAQ's with more than **1,600** FAQ's and answers
- Multiple Forums
 - o Afghanistan Veterans
 - o FMP - Foreign Medial Program
 - o Gulf War & Desert Storm Veterans
 - o Iraq Veterans
 - o Korean Veterans
 - o Men Veterans Forum
 - o Mental Health for Veterans
 - o Political Issues
 - o Suggestion Box
 - o The Mess Hall
 - o VA Hospitals and Medical Centers
 - o Veteran Affairs
 - o Vietnam Veterans
 - o Welcome Mat
 - o Women Veterans Forum
 - o WW II Veterans
- Job Postings
- Memorial Pages (Updated: 11/02/17)
- News (Articles On-Line: **6,958**)
- Polls
- Web Links, more than **3,614**, Added 2 New Links

(Updated: 11/12/17)

If you have a submission for the memorial pages, E-Mail:
Jim.Davis@veterans-for-change.org



Merry Christmas



Senate Tries to Pass VA Healthcare Bill Before End of Year

The Senate Veterans' Affairs Committee is mounting a late push to improve veterans' health care before the end of the year.

Last week the Senate Veterans' Affairs Committee passed S. 2193, the Caring for our Veterans Act of 2017, introduced by committee chair Sen. Johnny Isakson (R-GA.), which would reform and streamline VA health care and services. Ranking Member Senator Jon Tester (D-MT) supports it as well. Provisions include:

- Establishing a single program to provide care to veterans through community providers

- Requiring the VA to be the primary coordinator of veterans' health care and directing the VA to establish an integrated, high-performing network to include VA and private providers
- Requiring the VA to establish clinical standards and an appeals process for accessing care based on medical need, empowering the veteran and the VA primary care provider to work together in deciding how to obtain care in the community when access and quality measures are deficient in the VA direct-care system
- Establishing a number of improvements to strengthen the VA direct-care system, including expanding graduate medical education, loan repayment, and residency programs for physicians, enhancing delivery of telemedicine, expanding VA's Comprehensive Assistance for Family Caregivers Program to veterans of all eras, and strengthening workforce management and development programs for recruiting, retention, and training, as well as specific funding for improving internal VA medical capacity and facilities management.

The bill is estimated to cost \$54 billion over the next five years-about \$15 billion higher than the House version. TREA will keep you updated on the status of the bill as more becomes known.

Source: TREA





Tax Bill Goes to Conference - How Does It Affect You?

Tax legislation has passed both the House of Representatives and the Senate, meaning that Republicans are negotiating among themselves to try and hammer out a signature legislative win.

Here are some ways that it could affect TREA members:

- Tax exclusion from gain of sale of a principal residence: the House requires 5 years of residency, up from 2; the Senate does the same.
- Qualified medical expense deductions: the House repeals the deduction, the Senate preserves it
- The Work Opportunity Tax Credit (VOW To Hire A Hero Act): the House repeals it, the Senate preserves it (until it expires after 2019).

- Moving expense deduction: the House and Senate both preserve the deduction if you have to move on orders - but it's unclear whether that counts for the Public Health Service and NOAA.

Other issues that are subject to change as well are the mortgage interest rate deductions, qualified moving expense reimbursements, alimony payments, effects on the Yellow Ribbon Program from the tax on school endowments and the student loan interest deduction.

With all of this yet to be settled, there are lots of larger issues to square as well; it remains to be seen how smoothly the conference process will go. It seems that the hard work has been done already, but TREA will keep you in the loop.

Source: TREA



Missing Man Table

The Missing Man Table, also known as the Fallen Comrade Table, is a place of honor, set up in military dining facilities of the U.S. armed forces and during



occasions such as service branch birthday balls, in memory of fallen, missing, or imprisoned military service-members. The table serves as the focal point of ceremonial remembrance, originally growing out of US concern of the Vietnam War POW/MIA issue.

Observance

Beyond permanent displays in dining facilities, the missing man table is traditionally part of military dining-in ceremonies and service balls. In recent years, the ceremony has been frequently performed in conjunction with Veterans Day and Memorial Day services. When presented in a dining-in or service ball, a narration given to the audience explains the symbolism of each item. The practice of the missing man table has evolved over time and is not currently governed by any US Department of Defense or service-specific guidance.

Symbolism

The listed items are considered traditional. Some commands and units may place headcovers or other items at the place setting as well.

- Table: set for one, is small, symbolizing the frailty of one isolated prisoner. The table is usually set close to, or within sight of, the entrance to the dining room. For large events of the Missing Man Table is set for six places: members of the five armed services (Army, Navy, Marine Corps, Air Force, and Coast Guard) and a sixth place setting

reminiscent of the civilians who died during service alongside the armed forces or missing during armed conflict. Table is round to represent everlasting concern on the part of the survivors for their missing loved ones.

- Tablecloth is white, symbolic of the purity of their intentions to respond to their country's call to arms.
- Single red rose in the vase, signifies the blood that many have shed in sacrifice to ensure the freedom of our beloved United States of America. This rose also reminds us of the family and friends of our missing comrades who keep the faith, while awaiting their return.
- The red ribbon (yellow ribbon for Air Force ceremonies) represents the love of our country, which inspired them to answer the nation's call.
- Slice of lemon on the bread plate: represents the bitter fate of the missing.
- Salt sprinkled on the bread plate: symbolic of the countless fallen tears of families as they wait.
- Inverted glass: represents the fact that the missing and fallen cannot partake.
- The Bible represents the strength gained through faith to sustain those lost from our country, founded as one nation under God. (The Bible has been removed from several displays at federal facilities due to pressure from the Military Religious Freedom Foundation)
- Lit candle: reminiscent of the light of hope which lives in our hearts to illuminate their way home, away from their captors, to the open arms of a grateful nation.
- Empty chair: the missing and fallen aren't present.



VA Failed to Protect Patients from Inept Docs

In one of the most disturbing recent Government Accountability Office audits of [VA health care](#), a new report criticizes medical leaders at all levels of the Department of Veterans Affairs for failing to follow their own policies for reporting incompetent and unprofessional health care providers. The VA acknowledged years of lax oversight by VA medical center directors, regional supervisors and top leaders. Read the full [article](#).



**CONTACT YOUR
MEMBERS OF CONGRESS!**

To Call your Representative:

202-225-2305

To Call your Senators:

202-224-3841 or 202-224-3553

To call Different Members of Congress:

202-224-3121

TOLL FREE: 866-272-6622

PLEASE... STOP Making Excuses!

www.veterans-for-change.org



**VA Announces Rollout and
Application Process for New
Veterans ID Card**

WASHINGTON - Today the U.S. Department of Veterans Affairs (VA) announced that the application process for the national Veterans Identification Card (VIC) is now available for Veterans - yet another action honoring their service.

This has been mandated through legislation since 2015 to honor Veterans, and today's rollout of the ID card fulfills that overdue promise.

Only those Veterans with honorable service will be able to apply for the ID card, which will provide proof of military service, and may be accepted by retailers in lieu of the standard DD-214 form to obtain promotional discounts and other services where offered to Veterans.

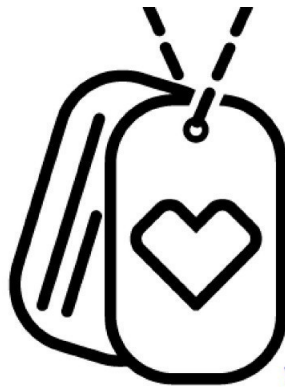
"The new Veterans Identification Card provides a safer and more convenient and efficient way for most Veterans to show proof of service," said VA Secretary Dr. David J. Shulkin. "With the card, Veterans with honorable service to our nation will no longer need to carry around their paper DD-214s to obtain Veteran discounts and other services."

The VIC provides a more portable and secure alternative for those who served the minimum obligated time in service, but did not meet the retirement or medical discharge threshold. Veterans who served in the armed forces, including the reserve components, and who have a discharge of honorable or general (under honorable conditions) can request a VIC.

To request a VIC, Veterans must visit vets.gov, click on "[Apply for Printed Veteran ID Card](#)" on the bottom left of the page and sign in or create an account.

Veterans who apply for a card should receive it within 60 days and can check delivery status of their cards at vets.gov. A digital version of the VIC will be available online by mid-December.

Source: TREA



**Our values
match yours.**



www.veterans-for-change.org



Benefit Update: New TRICARE Select

On Jan. 1, 2018, TRICARE Select will replace TRICARE Standard and TRICARE Extra. As a result, beneficiaries will notice improved coverage for [preventive services](#) with TRICARE Select. This type of health care allows you to [address health problems before they become life threatening](#). Examples of TRICARE-covered preventive services include cancer screenings and vaccines, in addition to well-woman and well-child exams. A new preventive service added this year for both TRICARE Prime and TRICARE Select is aimed at adults with a Body Mass Index (BMI) of 30 kg/m² or higher. For more information on the upcoming changes on January 1, 2018, visit the [TRICARE section](#) to learn about how the changes will impact you.



DoD Offers SMART Scholarships

The SMART Scholarship Program offers students pursuing an undergraduate or graduate degree in Science, Technology, Engineering, and Mathematics, (or STEM) disciplines the chance to receive full scholarships and serve the Defense Department after they complete their degree. Applicants must pursue a technical degree in one of the 19 STEM disciplines. Once accepted into the program, SMART scholars receive \$25,000 to \$38,000 a year. The scholarship application deadline for the 2018 class is Dec. 8, 2017. The next submission window runs from Aug. 1 to Dec. 1, 2018, for the 2019 class. For more information, visit the [SMART](#) website.



VA to Provide Hyperbaric Oxygen Therapy to Some Veterans with Chronic PTSD

WASHINGTON - Today, the U.S. Department of Veterans Affairs (VA) announced it will offer Hyperbaric Oxygen Therapy (HBOT) as a treatment option for a small number of Veterans with persistent post-traumatic stress disorder (PTSD) symptoms resistant to standard options.

Providers from the Eastern Oklahoma VA Health Care System and the VA Northern California Health Care System will partner with HBOT providers at the Tulsa Wound Care and Hyperbaric Center at Oklahoma State Medical Center in Tulsa, Oklahoma, and the David Grant Medical Center on Travis Air Force Base, California, respectively, to provide this care.

"There is nothing more important to us than caring for our nation's Veterans, and that care must include finding different approaches that work best for them," said VA Secretary Dr. David J. Shulkin. "We have to explore every avenue, particularly for our most medically vulnerable Veterans, and be open to new ideas and strategies for their optimal health and well-being."

HBOT is a procedure that increases oxygen in the body, under pressure, to encourage healing. Currently, HBOT is commonly used to treat carbon monoxide poisoning, divers' sickness, enhanced healing of some wound problems, skin grafts, heat burns, crush injuries and other acute health-care issues that involve too little blood flow to a part of the body.

This use of HBOT for treatment of PTSD is considered an

"off-label" use and will occur under the supervision of a trained physician. Separately, VA and the Department of Defense are planning a multisite research study to examine more fully the use of HBOT for patients diagnosed with PTSD.

As health-care leaders interested in innovative approaches to care, the VA Center for Compassionate Innovation (CCI) is facilitating use of HBOT for a subset of Veterans who have noticed no decrease of symptoms after receiving at least two evidenced-based treatments. CCI uses innovative approaches to treat conditions where traditional methods have been unsuccessful. VA will monitor the HBOT clinical demonstration project and the HBOT research study to help inform the potential for HBOT usage to treat a larger number of Veterans with PTSD.

For more information about VA's Center for Compassionate Innovation, go to

<https://www.va.gov/healthpartnerships/>.

Source: TREA



**Reduce Your Co-Pays & Rx Costs
Not Covered by TRICARE**

Get a Tricare supplement that pays your cost shares and can pay 100% of covered excess charges. Get **Valuable Coverage Now**.



Veteran Crisis Resources

Veterans Crisis Line 1-800-273-8255 and Press 1
Military Crisis Line 1-800-273-TALK (8255)
National Call Center for Homeless Veterans
1-877-4AID-VET (424.3838)
VA Caregiver Support Line 1-855-260-3274



S. 2193, Caring for Our Veterans Act of 2017



Last week, the Senate Veterans' Affairs Committee approved S. 2193, a comprehensive VA health care bill, which includes provisions to overhaul the agency's community care program, provide additional funds to

improve the VA health care system and extend VA's comprehensive family caregiver program to veterans of all eras.

On December 7, 2017 DAV joined with 25 other service organizations [asking all Senators](#) to push for approval of this landmark legislation (click [here](#) to read the letter), and we need everyone who cares about veterans make sure their voice is heard.

VA has been purchasing care in the community through the Choice Program, but this program has been troubled since its rocky implementation. S. 2193 contains numerous provisions DAV supports based on our resolutions, including one that would leave the decision to receive community care between veterans and their clinicians. To avoid implementation challenges, Choice would continue to operate as the new program is phased in and would provide additional funds for VA to fill thousands of clinical vacancies across the country.

One of DAV's top legislative priorities for the past few years is addressing the inequity in access to VA's comprehensive family caregivers' assistance program, currently limited to veterans severely injured on or after September 11, 2001. Veterans of other eras and their family caregivers have been left to their own devices without the critical and comprehensive support from VA's caregiver program.

Please help DAV and our allies convince the Senate to move this important legislation forward. We ask you to

send the prepared email now.

As always, thank you for your support of the Commander's Action Network.

Click [HERE](#) and send your message!



Links to Other Stories

- 1) [Accused of medical malpractice—a lot? The VA may be the place for you](#)
- 2) [FIX THIS MESS: VA Still Hiring Doctors With Shady Backgrounds](#)
- 3) [Legal Help for Veterans](#)
- 4) [Special Forces instructor reveals ‘cesspool of toxic officers,’ lowering standards at Special Warfare Center and School: SOFREP](#)
- 5) [Tribal Housing and Urban Development-Veterans Affairs Supportive Housing \(HUD-VASH\) Program](#)
- 6) [USA TODAY Investigation: VA knowingly hires doctors with past malpractice claims, discipline for poor care](#)
- 7) [VA kills plan to cut homeless-Vet program after outcry](#)
- 8) [VA reverses plan to cut homeless Veteran housing program after outrage](#)
- 9) [VA Using Simple Fix to Improve E.R. Visits](#)
- 10) [VA won't pay for feeding tube liquid for Army's ‘most wounded commander in history’](#)
- 11) [Veterans Identification Card](#)
- 12) [White House VA Hotline Now Fully Staffed and Operational Around the Clock to Serve Nation's Veterans](#)

You can help VFC by reading articles posted and commenting at the bottom and rate the articles. If you don't have an account, sign up today, it's FREE. Your comments and rankings tell us what type of information you want most.

Check us out today: www.veterans-for-change.org



American Legion Outreach for California Vets

The American Legion is hosting a veterans outreach effort for Veterans and active-duty military in two locations in California starting Dec. 7. The effort will take place at the following locations: (1) 9 a.m.-5 p.m. Dec. 7-8 and 9 a.m.-noon Dec. 9 at Rago-Christopher American Legion Post 165, 549 Merchant St., Vacaville; and (2) 9 a.m.-3 p.m. Dec. 8-9 at South Gate American Legion Post 335, 9535 California Ave., South Gate. Veterans will receive information about American Legion programs, and Department of Veterans Affairs and other veterans benefits. A county veterans service officer will be available to assist with VA questions and other benefits-related issues.



H.R. 4146, to Improve Service-Disabled Veterans Insurance



On October 26, 2017, Representative Stevan Pearce (NM) introduced H.R. 4146, the Disabled Veterans Life Insurance Act of 2017, a bill that would improve Service Disabled Veterans Insurance (S-DVI).

Currently, premium rates for S-DVI are based on the Commissioners 1941 Standard Ordinary Table of Mortality. This legislation would no longer use mortality rates from 1941 but would be based on the current industry standards and reduce premium payments.

To apply for S-DVI today, the application must be received within two years from the last date a service-connected disability is granted. If enacted, this bill would change the period from two years to ten years. H.R. 4146 would also increase initial life insurance coverage from \$10,000 to \$95,000.

Currently, supplemental coverage is available for additional costs. If H.R. 4146 is passed, it will increase the amount of supplemental coverage from \$30,000 to \$115,000.

DAV supports this bill as it aligns with DAV Resolutions

Nos. 218 and 220. Please use the prepared email or draft your own to urge your Representative to be a co-sponsor of H.R. 4146.

We appreciate your support for DAV and your grassroots efforts in the DAV Commander's Action Network. Your advocacy makes DAV a highly influential and effective organization in Washington, DC. Your voice makes a difference and we would not be as effective without you.

Thank you for all you do for America's veterans and their families.

Click [HERE](#) and send your message!



Don't Wait: Your \$0 Down 2017 VA Loan Benefit is Ready

There is still time to use your VA Loan benefit in 2017. Qualified borrowers can buy or refi with as little as \$0 down, and have no PMI payments with great rates and financing up to \$424,000. [Use your VA Loan Benefit today.](#)



Some Army Vets May Qualify for Medical Care

The U.S. Army is notifying Veterans that they may be eligible to receive medical care if they participated in U.S. Army chemical or biological substance testing from 1942 to 1975 and have an injury or disease that they believe was proximately caused by their participation. To apply, eligible Veterans must have: (1) a Department of Defense Form 214 or the functional equivalent; (2) served as a volunteer medical research subject in a U.S. Army chemical or biological substance testing program from 1942 to 1975; and (3) a diagnosed medical condition they believe to be a direct result of their participation in a U.S. Army chemical or biological substance testing program. For more information, visit the [Army Medicine website](#).





5 Ways to Help Your Military Child Deal With a Move

Nearly 44 percent of our active duty service members have children, which according to Early Childhood Education Journal, means that there are 1.1 million children who are experiencing a move every two to four years. With so many children undergoing regular relocation, military families must find ways to prepare and support their children as they make this difficult transition. [Here are five ways to support your military children](#) through a move or other military transition.



Resources For Women Veterans

Here are several resources for women veterans. To learn about health care and other resources available to women Veterans, visit the Department of Veterans Affairs (VA) [Women Veterans Healthcare website](#). Need to talk with someone about how you're feeling? Call the Women Veterans Call Center at 1.855.VA.WOMEN. All the representatives there are women, and many are Veterans themselves. They can connect you with the resources you need to start feeling better again. Need immediate help? Call the Veterans Crisis Line at 1-800-273-8255 (Press 1) or visit the [Veterans Crisis Line website](#). For more information, read the VA [VAntage Point Blog](#).



GAO

U.S. Government Accountability
Office Reports

- 1) Department of Defense: Telehealth Use in Fiscal Year 2016
- 2) Federal Employees Health Benefits Program: Enrollment Remains Concentrated Despite More Plan Offerings and Effects of Adding Plan Types Are Uncertain
- 3) Homeland Security: DHS's Chemical, Biological, Radiological, and Nuclear Program Consolidation Efforts
- 4) Low-Dose Radiation: Interagency Collaboration on Planning Research Could Improve Information on Health Effects
- 5) Medicare and Medicaid: CMS Needs to Fully Align Its Antifraud Efforts with the Fraud Risk Framework
- 6) Prescription Opioids: Medicare Needs to Expand Oversight Efforts to Reduce the Risk of Harm
- 7) Preventing Drug Abuse: Low Participation by Pharmacies and Other Entities as Voluntary Collectors of Unused Prescription Drugs
- 8) Transitioning Veterans: Improvements Needed in DOD's Performance Reporting and Monitoring of the Transition Assistance Program
- 9) VA Health Care: Improved Policies and Oversight Needed for Reviewing and Reporting Providers for Quality and Safety Concerns
- 10) Veterans Affairs Contracting: Improvements in Buying Medical and Surgical Supplies Could Yield Cost Savings and Efficiency
- 11) Veterans Affairs Information Technology: Historical Perspective on Health System Modernization Contracts and Update on Efforts to Address Key FITARA-Related Areas



**~We Proudly Support our
Military Personnel & Families~**



GI Bill Changes Coming

A few weeks ago we ran a story about the changes coming with the new Forever GI Bill. Up until recently, VA hadn't said too much about when exactly we could expect to see everything contained in the law. Last week the VA let us know what exactly those changes are, and when we can expect to see them. Here now are the [major changes coming to the GI Bill](#), broken down by expected implementation date.



VA Offers Care Provider Database

The [Department of Veterans Affairs \(VA\) database](#) offers a directory of more than 40,000 full time and part time VA health care providers who are independently licensed to provide care to veterans, and who may be a member of your treatment team. Information about VA physicians, dentists, chiropractors, optometrists, podiatrists, psychologists and other medical professionals can be found there. Veterans and their families can learn where their health care professionals received their medical training. They can also filter their search for specific providers based on needs and preferences. For more information, read the [VA Vantage Point Blog](#).



TRICARE Reserve Select Policy Change

A significant change will be made to the TRICARE Reserve Select (TRS) policy regarding re-reinstatement, beginning January 1, 2018. Those TRS Reserve Citizen Airmen who lose their TRS coverage and are dis-enrolled for failure to pay monthly premiums due to financial reasons within their control will no longer have the second option of seeking a new TRS enrollment. For reinstatement requests received by the contractor beyond 90 days from last paid-through-date/dis-enrollment will be locked out from purchasing new TRS coverage for 12 months. Reserve Citizen Airmen can update their contact information by calling 1-800-538-9552 (TTY/TDD:1-866-363-2883).



If you received this newsletter as a courtesy or a forward from a friend or relative, you can sign up to receive in your E-mail every week.



Veterans-For-Change, Inc.

Riverside County, CA

Visit our website today

www.Veterans-For-Change.org

Serving those who served!

Please pass on to all your Veteran Friends and Family!



Please do not reply to this E-Mail, this is an unattended E-Mail address, please send all correspondence to:

Jim.Davis@veterans-for-change.org



Distribution

Express Mail	145,080
Boston	76,634
Courtesy Copies	3,500
Department of VA	13,341
DoD	30,801
Face Book Pages	3,518
Google	29,346
Los Angeles	137,900
Microsoft	10,065
National Guard	4635
New York	155,666
Other Social Media	48,671
San Francisco	80,566
Twitter	44
US House of Reps & Staff	1002
US Senators & Staff	135
University of So. California	5,812
US Air Force	27,877
US Army	70,927
US Marines	30,508
US Navy	40,139
Veterans	19,096,647
Washington DC	145,332
Yahoo	185
	20,158,331

Powered by
[GoDaddy Email Marketing](#)®