



Veterans-For-Change Newsletter

A Voice of the Veterans

Week Ending Sunday, April 21, 2019

Volume 10, Issue 16



This-N-That

As many have noticed there have been quite a few "Take Action" posts in the newsletter, and the number of take action notices is growing which means finally Congress is taking action for Veterans.

But, as we all know sometimes it's just smoke to keep a politician in the "good graces" of Veterans and most won't go any further than that.

But, Veterans and civilians alike can help make those come to life, get to the floor, be voted on and with enough people harassing those in office, politely of course can make sure they pass!

I agree some bills won't help all Veterans, but it will help your fellow Veteran who is suffering just like you are, and other bills will help you, and not others. The point being, if everyone does their part, we can make change happen.

One of the things I say quite frequently is: What Employer any where in the world hires staff, walks off, and assumes they will do what they were hired for? The answer is simple, NO ONE!

However, here in the United States, that's precisely what we do. When you cast your vote, and whether the person you voted for or someone else gets that seat in Congress, their salaries are paid for by Taxpayer Dollars, this means they are our Employees and we are their Employers.

So it's our duty to constantly remind them of our concerns, expectations, and demands! Failing to do so automatically gives them carte blanche to do as they damn well please.

If we continually send off the Pre-Written E-Mails, follow those with phone calls every single week, sharing the information in an E-Mail and send off to our entire E-Mail address book, asking them to also send off the Pre-Written E-Mails and follow those up with telephone calls too, we increase our chances dramatically.

Sad part is most will come up with more excuses than carter has little pills. That attitude needs to be overcome and whether or not you believe your Reps listen, the more we stir the pot, and the more people who become involved,

the more we increase chances of getting legislation out of committee, to the floor, voted on, hopefully passed and change will happen.

I'm constantly disappointed, I'm used to disappointment, but I am seriously hoping many of you will jump in and send the E-Mails, make the calls, and share it with as many as is humanly possible.

Over the next few days we will be adding almost 200 new web links, and hopefully by a week from today, another 200+ more documents will be added to the website.

We're still looking for a new hosting service and a web master who is very familiar with our software as we are currently experiencing a few minor issues that need attention, so if you've attempted to create an account so you can access the entire system, not just a sampling, send me an E-Mail and I will create an account for you through the back office.

If you post a comment, please be patient and give me 24-48 hours, and I will also approve those manually through the back office as well.

On behalf of our Volunteers nationwide and myself, we wish you and your family good health!

Respectfully,

Jim Davis

Founder

Jim.Davis@Veterans-For-Change.org



VA Struggles to Curb 'Parking Lot' Suicides at Its Own Facilities

The VA's top health care official is asking Americans for help in addressing the crisis of veteran suicides. "I wish it was as simple as me saying I could do more patrols in a parking lot that would stop this," Dr. Richard Stone, the executive in charge of the Veterans Health Administration, said Wednesday of the department's efforts to curb veteran suicides and suicide attempts, which often occur at its own facilities. Stone made the remark in response to questions from the Senate Veterans Affairs Committee about three recent suicides: two in early March at Georgia VA facilities and one at an Austin, Texas, VA clinic. Read more about his remarks [here](#).



TRICARE Beneficiary Bulletin #497

Listen to this week's podcast to hear about:

- Military Children's Health Month
- April TRICARE Pharmacy Webinar
- Breastfeeding Supplies and Services

Visit the Multimedia Center for this podcast and previous podcasts [here](#).



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 for Mental Health and are currently seeking a new Licensed Mental Health Worker, where you can seek help or just ask questions.

We average **2,557** hits per day, and downloads average **2,307** per day with a total **4,900,505** 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 **17,242** documents on-line (Updated: 04/11/19)
- 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 (*Counselor Needed*)
 - 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: 10/30/18) (37 Added)
- News (Articles On-Line: **8,429**)
- Polls

- Web Links, more than **4,709**, Added 4 New Links
(Updated: 04/05/19)

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



H.R. 1527, the Long-Term Care Veterans Choice Act

Representative Clay Higgins introduced H.R. 1527, the Long-Term Care Veterans Choice Act. This bill would provide veterans who are no longer capable of living independently an alternative to nursing home care, in which the veteran would continue to receive the care that they need in an intimate home-like environment through VA's Home-Based Primary Care program, and the Medical Foster Home (MFH) attendant program.

Started in 2000, VA Medical Foster Homes provide veterans who need nursing home level of care an alternative to being placed in a nursing home. VA Medical Foster Homes merge traditional adult foster care with comprehensive longitudinal care provided in the home by a VA interdisciplinary team that includes a physician, nurse, social worker, rehabilitation therapist, mental health provider, dietitian, and pharmacist. Since its inception, over 4,000 veterans have resided in Medical Foster Homes.

However, many service-connected veterans who wish to reside in a VA Medical Foster Home are unable to do so because of substantial out-of-pocket costs of approximately \$1,500 to \$3,000 per month. Because VA does not have the authority to cover these costs, veterans are placed in nursing homes which VA pays for but cost more than twice as much.

As the veteran population continues to age, the need for long-term care services will continue to grow. Home-based community programs like MFHs will enable VA to meet the needs of aging veterans in a manner closer to independent

living than institutionalized care. With the passage of this bill, veterans would have the option of care that more closely aligns with their independence while maintaining their quality of life.

This bill is in accordance with DAV Resolution No. 085, which calls for legislation to improve the comprehensive program of long-term services and supports for service-connected disabled veterans regardless of their disability ratings.

Please use the prepared letter to write your Representative to cosponsor and support passage of H.R. 1527, the Long-Term Care Veterans Choice Act. Thank you for your efforts and support of the Commander's Action Network.

Take Action



Webinar on TRICARE Pharmacy Program

Join the "Make the Most of Your TRICARE Pharmacy Benefit" webinar on April 25, 2019, from 1 to 2 p.m. ET. The webinar will focus on how to fill and manage prescriptions, as well as pharmacy-covered services, costs, and more. A pharmacy expert will provide detailed information about the TRICARE Pharmacy Program and answer questions. [Learn More.](#)





~Follow Veterans-For-Change on MEWE Social Media~

Follow us on [MEWE](#)! We've move to [MEWE](#) and after three months, membership has grown and the support staff at [MEWE](#) is responsive, open to suggestions and works very hard to protect your personal information.

**IMAGINE A SOCIAL NETWORK WITH ALL THE
FEATURES YOU LOVE AND NONE OF THE BS.**

Where you are the customer to serve and not data to sell.

Where you share your real life and celebrate, not censor,
diversity.

We know most people don't like change, however, this new Social Media Site, [MEWE.COM](#) has no advertisers, truly respects privacy and protects your security far better than *Face Book* ever could. They also have a fantastic customer

service group who actually does respond to your messages, suggestions, ideas and more!

We hope you will join us on this new site.

VETERANS-FOR-CHANGE

www.mewe.com/join/veterans-for-change

HOMELESS HEROES PROGRAM OF VETERANS-FOR-CHANGE

www.mewe.com/join/homelessheroesprogramofveterans-for-change

AMVETS GROUP

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VETERANS SOCIAL GROUP

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{USAVET} SUPPORTING GOD & ALL WHO SERVED OUR GREAT NATION

www.mewe.com/join/usavetsupportinggodallwhoserveandserve

AMERICANS FOR SOVEREIGNTY

www.mewe.com/join/americansforsovereignty





H.R. 303, the Retired Pay Restoration Act

On January 8, 2019, Representative Gus Bilirakis (FL) introduced H.R. 303, the Retired Pay Restoration Act. This bill would extend concurrent receipt authority to longevity retirees with service-connected disabilities rated less than 50 percent disabling. Under current law disabled veterans with longevity retirement from active military service who are also in receipt of a Department of Veterans Affairs (VA) disability determination of 50 percent or higher may retain both military retirement pay and their compensation.

DAV strongly supports H.R. 303 as it would end the unfair policy of forcing many military longevity retirees to forfeit some of their retired pay in order to receive equal amounts of disability compensation from the VA. This legislation is in accord with DAV Resolution No. 104 and would eliminate concurrent receipt for all longevity retirees.

Please use the prepared electronic letter or draft your own to urge your Representative to support and cosponsor H.R. 303. As always, we appreciate your support for DAV and your grassroots activism in participating in DAV CAN. Thank you for all you do for America's veterans and their families.

Take Action





Trump Picks Navy's Next CNO, VCNO

The president has selected Adm. Bill Moran to replace retiring Adm. John Richardson as the Navy's 32nd chief of naval operations, and Vice Adm. Bob Burke for promotion to full admiral and assignment as the Navy's new vice chief of naval operations. Moran, a native of the Hudson Valley town of Walden, N.Y., currently serves as the Navy's VCNO. He is a graduate of the U.S. Naval Academy and National War College, and is a P-3 Orion pilot by trade. Moran previously served as the Navy's top personnel officer, a position the newly selected VCNO currently occupies. Burke, a submariner by trade, is a native of Portage, Mich., and a graduate of Western Michigan University and the University of Central Florida. Both selectees require Senate approval.



US Military Is America's Heaviest-Drinking Profession, Survey Finds

"This comes as a surprise," said no one, ever, of a new analysis that finds military members drink alcohol more than workers in any other job. A review of the Centers for Disease Control and Prevention's survey data from 2013 through 2017 by a behavioral health company has found that troops spend more days a year consuming alcohol than people in any other industry. They also binge-drink more, imbibing at least four or five alcoholic beverages a day in one sitting at least 41 days a year, the most of any occupation. That's the CDC's definition of binge-drinking, depending on gender. The military personnel surveyed said they binge-drank about a third of the days they consumed alcohol. Read more about the findings [here](#).



April's Featured Song

Finally Welcomed Home

By

LT Bobby Ross

LT Bobby Ross - Voice Of America

Previous Featured Songs



S. 514, the Deborah Sampson Act to Improve VA Services for Women Veterans

Senator Jon Tester (MT), Ranking Member of the Senate Veterans' Affairs Committee, introduced S. 514, the Deborah Sampson Act. This legislation, a comprehensive measure addressing gender disparities, aims to improve and expand Department of Veterans Affairs (VA) programs and services for women veterans.

The bill would permanently authorize counseling for

veterans recently separated from military service and accompanying family members in group retreat settings, including in women-exclusive settings. It would extend the number of days, from seven to 14, VA may cover the cost of care for newborns of women veterans. It would also provide adoption assistance to veterans who have infertility conditions incurred or aggravated in the line of duty.

S. 514 aims to eliminate barriers to care by:

- Adding \$20 million to retrofit VA medical facilities to comply with environment of care deficiencies;
- Requiring every VA medical facility to have at least one full-time or part-time designated women's health provider on staff;
- Studying the staffing needs of Women Veteran Program Managers in addition to determining the need for a Women Veterans Ombudsman;
- Conducting mini-residency training for women's health providers;
- Requiring VA to create a training module for community providers specific to women veterans' unique medical needs;
- Providing support services for women veterans seeking legal assistance;
- Authorizing grants for organizations supporting women veterans and their families;
- Requiring VA to report on its use of various primary care models serving women veterans;
- Requiring VA to provide information on staffing levels of women's health providers including PACT team members

and gynecologists;

- Requiring data collection and reporting on all VA programs serving veterans, by gender and minority status;
- Requiring VA to report on the availability of prosthetics for women veterans; and
- Centralizing all information for women veterans in one easily accessible place on VA's website.

DAV's 2018 report, [Women Veterans: The Journey Ahead](#) identified many of these gaps in VA programs for women and calls for comprehensive VA women's health services that appropriately recognize and honor their military service and sacrifices. This bill is also consistent with DAV Resolution No. 019, which supports enhanced medical services and benefits for women veterans.

Please contact your Senators to urge co-sponsorship and passage of S. 514. A letter has been prepared for this purpose or you may write your own to express your personal views.

As always, thank you for your advocacy and support of our nation's women veterans.

Take Action



Military Retirees Flock to Federal Dental and Vision Program

Military retirees seemed to get the message to sign up for federal dental benefits before the Tricare Retiree Dental Program ended Dec. 31, with nearly 1.2 million of those eligible making the switch, according to data released by the Defense Department. As of March 15, 1,424,521 Tricare beneficiaries were enrolled in the Federal Employees Dental and Vision Insurance Program, including 1,197,158 beneficiaries who were previously enrolled in TRDP. The remainder — more than 225,000 retirees and family members — were new enrollees to FEDVIP. Read more [here](#).



Facilitating 12-Step Approaches to Change for Service Members with Problematic Drinking

Philip R. Magaletta, Ph.D.

The interrelated sets of practices, beliefs, and experiences of the 12-step approach to change have helped many service members to initiate and/or sustain recovery from alcohol use disorders. As April is Alcohol Awareness Month, we have an opportunity to review and consider the distinctions between group mutual help programs, such as [Alcoholics Anonymous](#) (AA), and 12-step facilitation (TSF), an evidence-based treatment that can be delivered to service members with problematic alcohol use.

The VA/DoD Clinical Practice Guideline (CPG) for the Management of Substance Use Disorders supports involvement in group mutual help programs for service members in early recovery, and summarizes strong evidence for TSF as an effective intervention for service members presenting with alcohol use disorders.

Read the full Clinician's Corner Blog [here](#).





H.R 445, Help Hire Our Heroes Act

On January 10, 2019, Representative Julia Brownley introduced H.R. 445, the Help Hire Our Heroes Act. This bill would amend the VOW to Hire Heroes Act of 2011 to make permanent the Veterans Retraining Assistance Program (VRAP).

The VRAP was started in 2012 to provide training assistance to unemployed veterans between the ages of 35

and 60 who are no longer eligible for the GI Bill. It provided up to 12 months of training benefits at community colleges and technical schools in occupations that the Department of Labor has identified as "high demand." Since funding for this program expired in March 2014, the VA has not been able to enroll new veterans in VRAP. This program gap means that thousands of older, qualified veterans have been unable to access the resources which could help them find work.

This bill would strike the end dates of the Veterans Retraining Assistance Program and would replace it with year to year authorizations. This bill is in accord with DAV Resolution No. 190 which seeks adequate funding and permanency for veterans' employment and training programs.

Please use the prepared letter to write to your Representative to cosponsor and support passage of H.R. 445, the Help Hire Our Heroes Act. Thank you for your efforts and support of the Commander's Action Network.

Take Action



**Retired General is New US
Ambassador to Saudi Arabia**

The Senate last week overwhelmingly confirmed retired Army Gen. John Abizaid as the new U.S. ambassador to Saudi Arabia. Abizaid, who commanded U.S. Central Command from 2003 to 2007, was also the recipient of the VFW Armed Forces Award at the 108th VFW National Convention in Kansas City, Mo., in 2007. The 34-year Army veteran served in Grenada, the Persian Gulf, Bosnia, Kosovo, Afghanistan and Iraq.



Military, Vets' Groups Want Scrutiny of Commissary-Exchange Merger Proposal

Military and veterans' organizations have asked Congress to increase oversight of the Pentagon's proposal to merge the commissary and exchange systems, asking for a review by government auditors and congressional hearings. The Military Coalition, a group of 27 organizations, asked House and Senate Armed Services committee leaders in March to pay attention to the proposal, which would consolidate the three exchange systems and some Defense Commissary Agency functions. Military Coalition members said they aren't opposed to the idea but urged caution in implementing changes to what they described as a "fragile military community ecosystem that may impact other important programs." Read more about the request on [here](#).



**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



Sexually Transmitted Diseases

[Sexually transmitted diseases](#), or STDs, are infections that are passed from one person to another through sexual contact. The causes of STDs are bacteria, parasites, yeast, and viruses. Many STDs have no symptoms.

If you are sexually active, getting tested for STDs is one of the most important things you can do to protect your health. There are many clinics that provide [free or low cost testing](#).



Committee Will Study Respiratory Diseases Related to Military Burn Pits, Dust

A National Academies of Sciences, Engineering and Medicine panel has launched a study on the respiratory effects of burn pits and other pollution encountered by U.S. troops in the Middle East and Afghanistan. The planned 21-month review marks the second time a National Academies committee has explored the subject: In 2011, a group of physicians and scientists, under what was known then as the Institute of Medicine, concluded there was insufficient evidence to link troops' illnesses to exposure to burn pit smoke at Joint Base Balad in Iraq. The new committee, which includes just one member from the 2011 group, will review all available scientific and medical research on burn pits and airborne hazards and related illnesses. It will then evaluate and summarize them and make recommendations as warranted to the Department of Veterans Affairs, which requested the study. Read more about the panel [here](#).



AMERICAN SOLDIERS

**WILLING TO DIE FOR THE COUNTRY
THAT ISN'T WILLING TO PAY THEM!**



Bill Would Align Age Eligibility for CHAMPVA with Tricare, Affordable Care Act

For the sixth straight Congress — since the Affordable Care Act (ACA) passed in 2010 — lawmakers are trying to increase eligibility for the Civilian Health and Medical Program of the Department of Veterans Affairs, or CHAMPVA, to age 26. The move would align CHAMPVA, the program that provides private-sector health coverage for the spouses and children of 100%-disabled veterans, among others, with ACA requirements, as well as Tricare eligibility. CHAMPVA beneficiaries usually pay 25% of the cost of their medical care, up to an annual catastrophic cap of \$3,000, plus an annual outpatient deductible of \$50 per individual or \$100 per family. Read more about the proposal [here](#).



H.R. 840, the Veterans' Access to Child Care Act

Representative Julia Brownley introduced H.R. 840, the

Veterans' Access to Child Care Act, authorizing the Department of Veterans Affairs (VA) to pay for or provide child care for veterans traveling to and returning from a VA facility for regular or intensive mental health treatment or necessary health care services. Veterans-particularly younger women veterans returning from recent deployments-have indicated that lack of child care is a significant barrier in accessing medically necessary mental health readjustment services.

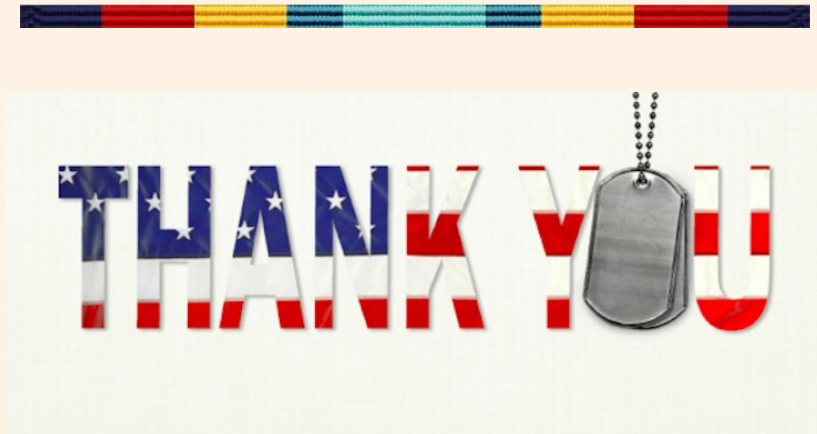
VA reports that younger veterans demonstrate high usage rates of VA mental health care services and data shows women veterans are especially likely to make intensive use of such services. In a recent study, a third of veterans indicated an interest in access to child care services and 10 percent reportedly have canceled medical appointments because they did not have child care. H.R. 840 would allow VA to pay for or otherwise furnish child care to those children for whom a veteran is the primary caretaker to allow the veteran to seek needed treatment.

DAV Resolution No. 173 supports VA's provision of child care services and assistance to veterans accessing needed VA health care, benefits, education, employment, rehabilitative or other specialized services offered. Please help support passage of this important legislation by sending your representative the prepared letter or drafting your own version.

Thank you for your participation in the DAV Commander's Action Network and for your support of our nation's

veterans.

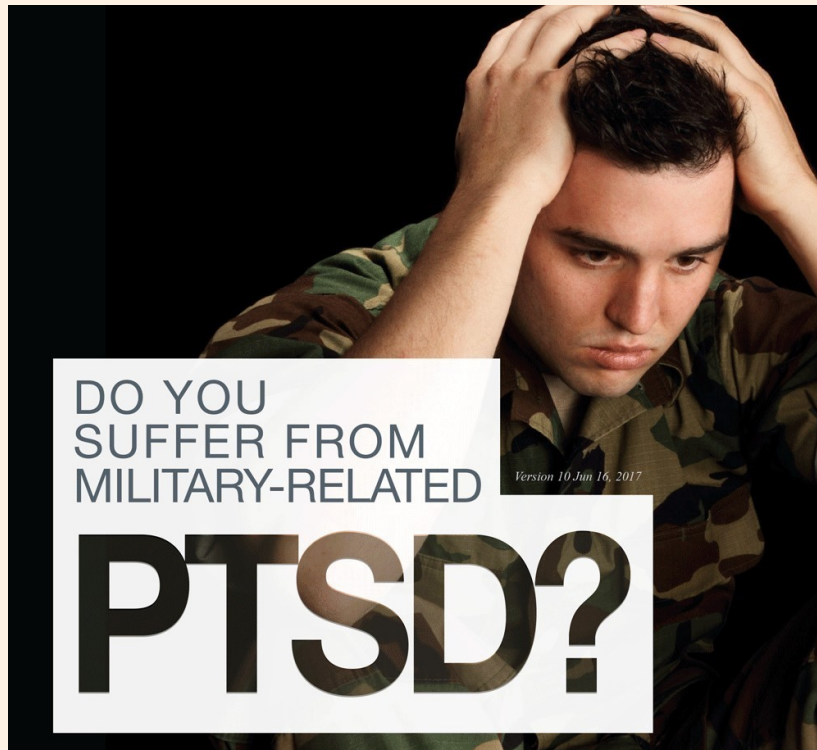
Take Action



Paychex Is Hiring Veteran Talent - Find Your Next Mission

Paychex values the skills and perspectives veterans bring to its organization. [View jobs now.](#)





**Veterans Crisis Line:
1-800-273-8255 & Press 1
Ntl Call Center for Homeless Vets
1-877-424-3838**



**S. 179/H.R. 712, Legislation Calling
for Clinical Trials to Evaluate the
Effectiveness of Medical Cannabis
for Chronic Pain and PTSD**

These companion bills, S. 179 and H.R. 712, would direct the Secretary of Veterans Affairs (VA) to carry out a clinical trial of the effects of cannabis on health outcomes of adults with chronic pain and post-traumatic stress disorder (PTSD).

These measures would require the VA Secretary to conduct clinical trials that look into whether cannabis is able to reduce symptoms associated with chronic pain such as inflammation, sleep disorders, spasticity, and agitation and effects on the use or dosage of opioids, benzodiazepines or alcohol for veterans with PTSD.

Research is necessary to determine the safety and efficacy of any drug. At this time there are few definitive answers about risks and benefits associated with the use of cannabis on various medical conditions and illnesses. Research is necessary to help clinicians better understand the safety and efficacy of cannabis use for certain conditions common in the veteran population such as chronic pain and posttraumatic stress.

These bills are in line with DAV Resolution No. 023 which calls for comprehensive and scientifically rigorous research by the VA into the therapeutic benefits and risks of cannabis, cannabis-derived products as a possible treatment for service-connected disabled veterans.

Thank you for your support of our nation's ill and injured veterans. Please use the letters below to ask your elected officials to support S. 179/H.R. 712.



New Pentagon Transgender Enlistment Ban Takes Effect

The Trump administration's policy prohibiting most transgender individuals from entering the military went into effect Friday, following a court ruling last month that removed the final barriers to enforcement. The new policy comes nearly two years after President Donald Trump announced via Twitter his plan to ban transgender troops. During a briefing with reporters, Pentagon officials said that the new policy grandfathers in transgender troops and those diagnosed with gender dysphoria, and any person with the diagnosis already under contract to enter the military. Those members fall under a more permissive policy created under then-Defense Secretary Ash Carter in 2016, and they will not be kicked out. Read more [here](#).



Want to Quit Smoking? The Freedom Quitline Can Help

If you're ready to quit smoking, the Freedom Quitline can help you take the steps toward a successful quit. The Freedom Quitline is grant-funded by the National Institutes of Health in cooperation with the University of Virginia and the Department of Defense. There are no out-of-pocket costs for participants. Participants must be TRICARE beneficiaries.

Read the full article [here](#).



VA Releases Mental Health and Suicide Prevention Toolkit for Former Guard and Reserve Members Learn how you can help connect these former service members with care.

According to VA's most recent analysis of Veteran suicide, there were [7,298 suicide deaths](#) among current and former service members in 2016. Former Guard and Reserve

members who were never federally activated [accounted for 902](#) suicides, or about 10 percent of the total number of suicides among current and former service members. To help support this population, VA has developed a [toolkit](#) specifically for former Guard and Reserve members who were never federally activated, as well as their families and health care providers.

The toolkit presents a variety of mental health and suicide prevention resources that are available through VA and in the community, including the following:

- The [Veterans Crisis Line](#) connects Veterans and their families and friends with qualified, caring VA responders who can provide confidential crisis intervention and support.
- The [VA Suicide Risk Management Consultation Program](#) — run by the Rocky Mountain Mental Illness Research, Education and Clinical Center (MIRECC) for Suicide Prevention — offers free, confidential consultation for any health care provider who works with Veterans or former service members, whether within or outside VA.
- [Military OneSource](#), a website for military personnel and their families, offers support for a wide range of civilian necessities, such as tax preparation and spouse employment.

We can all #BeThere for Veterans. Guided by the [National Strategy for Preventing Veteran Suicide](#), VA and its partners are helping Veterans and former service members get the right care whenever they need it. By equipping communities with resources and services, VA and its

partners can reach all Veterans and former service members and can save lives. Additional resources for supporting Veterans and their loved ones, community partners, and clinicians can be found [here](#).

Veterans who are in crisis or having thoughts of suicide, and anyone who knows a Veteran in crisis, can contact the Veterans Crisis Line for free, confidential support and crisis intervention 24 hours a day, 7 days a week, 365 days a year. Call 1-800-273-8255 and Press 1, text to 838255, or chat online at VeteransCrisisLine.net/Chat.

Reporters covering mental health issues can visit www.reportingonsuicide.org for important guidance on how to communicate about suicide.



Some GI Bill Rates Are Increasing Aug. 1

The Department of Veterans Affairs has announced the Post-9/11 GI Bill rates for the 2019-2020 school year. These rates will be effective on Aug. 1, 2019. The Montgomery GI Bill and Dependents' Education Assistance programs will see a rate change on Oct. 1, 2019. By law, the GI Bill rate increase is tied to the average cost increase of undergraduate tuition in the U.S. For the 2019-2020 school year, that increase will average 3.4%. More than 80 percent of those taking advantage of their GI Bill benefits are doing so through the Post-9/11 GI Bill. Read more about the increases [here](#).





H.R. 444, Reduce Unemployment for Veterans of All Ages Act of 2019

On January 10, 2019, Representative Julia Brown (CA) introduced H.R. 444, the Reduce Unemployment for Veterans of All Ages Act of 2019.

Currently, veterans with service-connected disabilities or other employment handicaps are able to receive career development services through VA's Vocational Rehabilitation and Employment program up to 12 years after they separate from military service. H.R. 444 would remove the limiting 12-year-period for eligibility.

In agreement with DAV Resolution No. 310, we support this legislation to eliminate the 12-year-period of eligibility. By removing the limited eligibility period, H.R. 444 will provide veterans the flexibility to receive the support they have earned and deserve throughout their lifetime and thus help reduce unemployment for service-connected veterans.

Please use the prepared electronic letter or draft your own to urge your Member of Congress to support and cosponsor H.R. 444.

Standing up for veterans is vital and we thank you for your advocacy. Your actions help make DAV a highly influential and effective organization in Washington. Thank you for all you do for America's veterans and their families.

Take Action



VetTix: Free/Discounted Sports and Concert Tickets

The Veteran Tickets Foundation provides free and discounted event tickets (with a nominal delivery fee) to Veterans, active-duty military, their families, and immediate family survivors. VetTix provides these tickets to reduce stress, strengthen family bonds, build life-long memories and encourage local engagement. Vet Tix secures tickets to [sporting events](#), [concerts](#), [performing arts](#), [educational and family activities](#) across the nation. Join the VetTix discussion on [RallyPoint](#).

SIGN UP



VA Needs to Improve Head Injury Disability Evaluation System, Study Finds

The Department of Veterans Affairs' benefits evaluation system for service-connected head injuries ignores several symptoms associated with traumatic brain injury (TBI) and should reflect the most updated medical knowledge, according to a report released Wednesday. In a review of the VA's process for evaluating and awarding disability compensation for TBI, a National Academies of Sciences, Engineering and Medicine panel said the overall process should be made clearer to patients and include input from providers trained in recognizing TBI. The panel found that the Veterans Benefits Administration (VBA) has taken "great pains to train its raters ... to accurately and reliably rate a disability." But it said the process, which involves filing a claim and a review known as a compensation and pension (C&P) examination that may include a disability benefits questionnaire (DBQ), has shortcomings. Panel members said they'd like to see veterans given access to their compensation and pension exam results as documented in the questionnaire and details on any additional materials requested by the VBA. Read more [here](#).





Memorial for Last Doolittle Raider

The Air Force has announced a memorial service to celebrate the life of retired Lt. Col. Richard “Dick” E. Cole, the last of the famous Doolittle Tokyo Raiders of World War II, who died April 9 at age 103. The service will be held at Joint Base San Antonio-Randolph, Texas, on April 18, officials said in a recent news release. Cole was the co-pilot for then-Lt. Col. Jimmy Doolittle in a B-25 Mitchell bomber during the April 18, 1942, mission by the U.S. Army Air Forces to strike the Japanese home islands. The memorial also marks the 77th anniversary of the Doolittle Raid. Air Force senior leaders, family and friends are expected to attend. Arlington National Cemetery in Virginia will be Cole’s final resting place. Read more at AF.mil.





We will always be our
Brothers Keeper!



Military Aviation Accidents Down, But Deaths Remain High, Report Finds

The military services are recovering from an aviation readiness crisis that led to a slew of accidents, but they still have a "long way to go" to protect personnel, according to Texas Rep. Mac Thornberry, ranking Republican on the House Armed Services Committee. Citing a Military Times report March 9, which noted that aviation deaths increased during fiscal 2018 even as the number of accidents declined, Thornberry said aviation deaths in the past six years signal that the Pentagon and Congress must continue supporting maintenance and training across the services. Between 2013 and 2017, manned aviation accidents rose 40%, resulting in the deaths of 133 service members. Accidents then dropped by 12% — from 903 in fiscal 2017 to 794 in fiscal 2018 — according to the report. However, those 794 mishaps in fiscal 2018 resulted in the deaths of 38 pilots or aircrew, a number that worries Thornberry. He said he will support a defense budget of \$750 billion to give service members the platforms and support they need to do their jobs. Read more [here](#).



**Join TRICARE for April 23 Q&A
Facebook Event**

If you have questions about your pharmacy benefit, TRICARE is ready to answer them on Tuesday, April 23 at 3:15 p.m. ET. Join the live Q&A session on the TRICARE Facebook page. No registration is required. All you have to do is visit the TRICARE Facebook page to post your question.

Read the full article [here](#).



App to Help Provide Eye Care to Airmen

Funding from the Air Force's 59th Medical Wing at Joint Base San Antonio, Texas, is helping Air Force and Army researchers develop a smartphone app that complies with HIPAA regulations and can connect deployed medical providers with on-call ophthalmologists. The app is called FOXTROT, which stands for Forward Operating Base Expert Telemedicine Resource Utilizing Mobile Application for Trauma, according to a recent news release. As a telemedicine tool, it's designed to give providers resources to conduct eye exams and assist with diagnosis and management of eye injuries. The app is being developed in collaboration with the U.S. Army Medical Research and Materiel Command's Telemedicine and Advanced Technology Research Center. The next step is testing ahead of release. Read more at AF.mil.



H.R. 553, Military Surviving Spouses Equity Act

On January 15, 2019, Congressman Joe Wilson introduced H.R. 553, the Military Surviving Spouses Equity Act. This bill would eliminate an unfair offset placed on many surviving spouses of service members who pass away during active duty or spouses of retirees who die of a

service-connected disability.

Currently, purchased Survivor Benefit Plan (SBP) annuities are offset by the amount of any benefit payable under the VA Dependency and Indemnity Compensation (DIC) program. SBP is not a government gratuity benefit; rather, it is a type of insurance purchased out-of-pocket by military retirees for their survivors while DIC is a VA benefit intended to provide spouses of veterans who died from a service-connected condition some semblance of financial security. Thousands of survivors of military retirees are adversely affected by this unfair offset between SBP and DIC benefits.

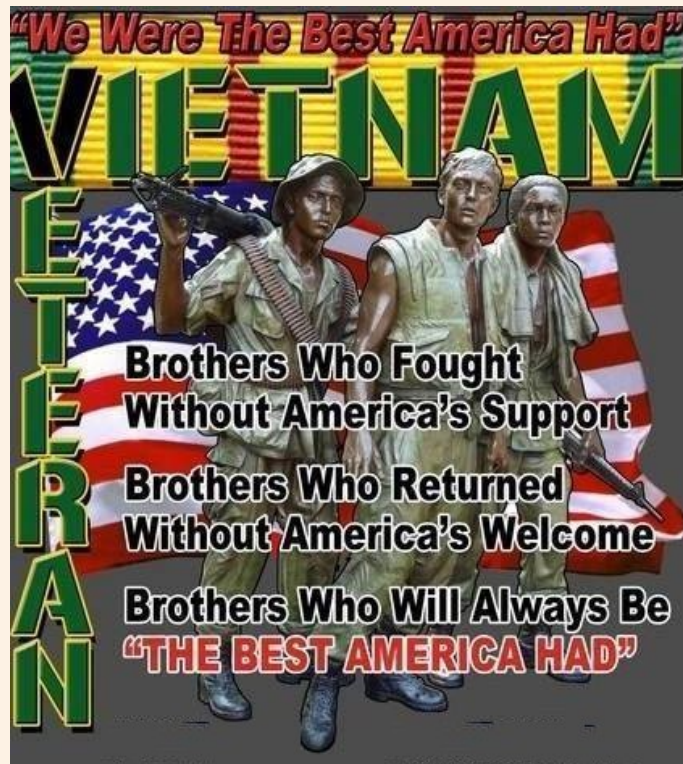
Upon the retiree's death, the SBP annuity is paid monthly to eligible beneficiaries; however, if a surviving spouse is also entitled to DIC, the SBP benefit is reduced by the amount of the DIC benefit (currently \$1,283.11 per month). In general, when DIC benefits are payable but the monthly rate is equal to, or greater than, the monthly SBP payment amount, beneficiaries lose the entire SBP payment.

This bill would eliminate the offset and allow surviving spouses to receive both the purchased SBP annuities and their earned DIC benefits. This bill is in accordance with DAV Resolution No. 014, which calls for Congress to repeal the offset between SBP annuity payments and DIC payments.

Please use the prepared letter to write your Representative to cosponsor and support passage of H.R. 553, the Military

Surviving Spouses Equity Act. Thank you for your efforts and support of the Commander's Action Network.

Take Action



Links to Other Stories

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.

1. [Agent Orange lawsuit ready for federal court](#)
2. [Air National Guard, Reserve pensions delayed for months due to backlog](#)
3. [Army Veteran's long journey back to an active life](#)
4. [Breaking the pain cycle](#)
5. [Despite new campaign, Nashville's homeless Veterans stuck on front lines of housing crisis](#)
6. [Few military spouses are using this \\$4,000 benefit](#)
7. [Fox News Hosts Bash Veterans for Accessing Their Benefits](#)
8. [Full military honors for Veterans whose remains were left unclaimed](#)
9. [Is exercise that's too intensive resulting in your angina?](#)
10. [Justice Dept. Faces Pressure to Resist Appealing Vietnam Vets' Landmark Victory](#)
11. [KILDEE, STABENOW, PETERS INTRODUCE LEGISLATION ENSURING HEALTH CARE FOR VETERANS HARMED BY PFAS CHEMICALS](#)
12. [Lawmakers seek treatments for Veterans exposed to chemicals](#)
13. [Legal Notice: Veteran Hearing Loss](#)
14. [Medical Journal Features VA Whole Health Transform](#)
15. [Series of innovations has virtually ended homelessness among Veterans in Minnesota](#)
16. [Some GI Bill Rates Are Increasing Aug. 1](#)
17. [The new VA Duty to Assist law: a life preserver with no rope.](#)
18. [Two Veterans kill themselves at separate VA medical centers in Georgia](#)
19. [VA increases contracting with Service-Disabled and Veteran-Owned Small Businesses](#)

20. VA Medical Center Nurse Sentenced for Tampering with Hospital Prescriptions
21. VA secretary's health care fight could affect the department for decades to come
22. Veteran loses part of leg after home-care scheduling mix-up at Indianapolis VA hospital
23. Vietnam on cusp of glyphosate ban
24. Woodstock Man Admits Posing as Deceased Sister to Steal VA Benefits
25. You can't blame the military for your fat ass, according to a new VA ruling

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



Naval Exchange Districts Guam, Japan to Merge

Navy Exchange Service Command on April 9 announced the merger of the NEX Guam and NEX Japan Districts. The merger will become effective on July 1, 2019, and will result in a new “Far East District” headquartered in Yokosuka, Japan. The intent of the merger is to consolidate similar geographic markets and improve the customer experience. The new Far East District will include NEX locations at Fleet Activities Yokosuka, Japan; NEX Negishi Heights, Japan; Naval Air Facility Atsugi, Japan; NEX Sanno Hotel, Japan; Fleet Activities Sasebo, Japan; NEX Hario, Japan; NEX Singapore; NEX Hong Kong; Naval Station Guam; Naval Communications and Telecommunications Station Guam; and Naval Hospital Guam. Read more at Navy.mil.



H.R. 1182, Veterans' Access to Acupuncture Services

HR 1182, Acupuncture for Our Heroes Act would provide access to acupuncture for veterans enrolled in the Department of Veterans Affairs health care system. It would provide such care at a minimum of one VA medical center in each veterans' integrated service network and ensure access to such services for certain conditions by contract without need for the veteran to have a referral for such care.

DAV supports complementary and integrative medical practices such as acupuncture as part of a comprehensive medical benefits package under DAV Resolution No. 277. Veterans have increasingly sought such treatments as a means of providing relief from conditions that have not been effectively addressed by more conventional medical practices and to decrease or avoid the use of controlled substances, such as opioids, that have the potential for harmful side effects, including addiction.

Please consider sending the letter prepared below to encourage your Representative to support H.R. 1182.

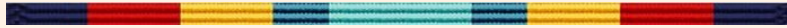
Thank you for your support of our nation's wartime service-disabled veterans.

Take Action





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**Support SBP/DIC Offset Repeal (S.
622/H.R. 553)!**

Sen. Doug Jones (AL) has introduced legislation (S. 622) that repeals the SBP/DIC offset for survivors, sometimes referred to as the "military widows tax." Earlier, Rep. Joe Wilson (SC) introduced similar legislation in the House, the "Military Surviving Spouses Equity Act" (H.R. 553).

SBP and DIC payments are paid for different reasons. The Survivor Benefit Plan (SBP) is purchased by the retiree and is intended to provide a portion of retired pay to the survivor. Dependency and Indemnity Compensation (DIC) is a special indemnity compensation paid to the survivor when a member's service causes his or her premature death. In such cases, the VA DIC should be added to the SBP the retiree paid for, not substituted for it. It should be noted as a matter of equity that surviving spouses of federal civilian retirees who are disabled veterans and die of military-service-connected causes can receive DIC without losing any of their federal civilian SBP benefits.

TAKE ACTION



Your actions
could save a life.

Showing you care can make a big difference to someone in crisis.

VeteransCrisisLine.net

 **Veterans
Crisis Line**
1-800-273-8255 **PRESS 1**



AOBWN Bill Introduced in Senate

Sens. Kirsten Gillibrand, (N.Y.), and Steve Daines (Mont.) have introduced the Blue Water Navy Vietnam Veterans Act (S.1195). The bill clarifies that service members who served off the coast of the Republic of Vietnam during the Vietnam conflict have a presumption for filing disability claims with the Department of Veterans Affairs (VA) for ailments associated with exposure to the Agent Orange herbicide. The bill also extends the presumption of herbicide exposure for veterans who served on or near the Korean DMZ between September 1, 1967 and August 31, 1971. The legislation provides health care, vocational training, rehabilitation and monetary allowance to a child who was born with spina bifida if at least one of the child's parents served in Thailand between January 9, 1962 and May 7, 1975. The VA also must determine that at least one of the parents had been exposed to an herbicide agent during that period.

Earlier, the Chairman of the House Veterans Affairs Committee, Rep. Mark Takano (Calif.) introduced the Blue Water Navy Vietnam Veterans Act (H.R.299), which is similar to the Senate bill. Last year's House bill had 335 co-

sponsors and passed the House (382-0), only to stall in the Senate Veterans Affairs Committee, and was tabled at the end of the session.

The FRA believes Congress should recognize these veterans who were exposed to Agent Orange herbicide and authorize presumptive status for VA disability claims associated with this exposure. Members are urged to use the [FRA Action Center](#) to contact their legislators to ask them to support these bills.



TRICARE Fee Increases in 2019?

The FRA is thankful that the Administration's proposed FY2020 budget recently submitted to Congress does not include any TRICARE fee increases. Unfortunately, the Congressional Budget Office (CBO) submitted a report to Congress in December recommending various TRICARE fee increases and other benefit cuts for military retirees and active duty military. Concern in Congress about the growing annual spending deficit for the current and upcoming fiscal years is increasing and legislators may consider these drastic cuts to reduce the deficit. Some of the many recommendations in the report include:

- A new TRICARE-For-Life (TFL) annual enrollment fee of \$485 for individual coverage and \$970 for family coverage, and increased cost-shares
- Increasing TRICARE Prime and Select enrollment fees beyond the current annual CPI increase
- Reduce active duty BAH to 80 percent of actual cost
- Limit active duty annual pay increases
- Eliminate VA's Individual Unemployability payments to disabled veterans at the full retirement age for Social Security

Members can tell their legislators NOT to reduce the deficit on the backs of our active duty military, veterans, retirees and their families by going to the [FRA Action Center](#) and scroll down to Don't Enact CBO Proposed Budget Cuts! campaign listed on the Center.





Budget Bill Stalls on House Floor

The FRA is thankful that the administration's proposed budget provides \$750 billion for Defense spending (\$34 billion more than the current budget). Thanks also goes to the House Budget Committee for voting to lift sequestration spending caps for two years. The House bill (H.R.2021) would provide \$733 billion for Defense spending in FY2020. Unfortunately, different factions in the House could not agree on spending limits and there were not enough votes to pass the measure. The bill was intended to be an opening proposition from House Democrats in budget talks with the White House and Republican-led Senate about spending levels. The Inability of the House to pass a measure to lift sequestration spending caps could be a sign of gridlock in the legislative process. Without legislative changes, more sequestration cuts are scheduled for FY2020 that begins Oct. 1, 2019, potentially placing our national security at risk.

Budget cuts mandated by the Budget Control Act of 2011 (known as sequestration) pose a threat to national security and will substantially impact member pay and benefits. These automatic cuts require that 50 percent of the cuts come from the Defense budget, even though Defense spending makes up only 16 percent of the entire federal budget. The FRA believes the FY2020 Defense budget should provide adequate funding for "benefits and bullets."

Members are urged to go to the [FRA Action Center](#) to weigh in on this issue.



Office of Inspector General

1. CMS Needs to Address Gaps in Federal Oversight of Nursing Home Abuse Investigations That Persisted in Oregon for at Least 15 Years
2. Opportunities Exist to Improve IRS's Management of International Tax Dispute Resolution
3. Review of the NNSA Report on the Nevada National Security Site Contract Competition
4. Social Security Administration



**Urge Congress to Pass the Retired
Pay Restoration Act**

Background: Military retirees who have a service-connected disability rating below 50 percent have their retirement pay reduced, dollar for dollar, by the amount of disability compensation they receive. This demeaning tax, created by Congress to save money, forces those who have dedicated their careers to military service to make due without benefits they need to provide for their families.

Take Action: Contact your members of Congress and urge them to cosponsor the Retired Pay Restoration Act. Our nation is still at war. We must ensure that benefits earned through honorable service to this country are improved, not eroded.

TAKE ACTION



**Protect Bankrupt Disabled Veterans
from Losing Benefits**

Sens. Tammy Baldwin (Wis.) and John Cornyn (Texas) have introduced the Honoring American Veterans in Extreme Need (HAVEN-S.679) bill to shield veterans' disability benefits from debt collectors when a veteran declares bankruptcy.

Under current law, when a disabled veteran declares bankruptcy debtors can seize their disability benefits because they are considered disposable income. Yet social security benefits are exempt from being included as disposable income. Disability benefits in any form are not taxable and therefore should not be considered disposable income. The legislative sponsors noted that it is unfair veterans may be forced to give up their disability benefits when declaring bankruptcy, while the general population receiving similar benefits from social security do not.

Sen. Baldwin believes this bill will help veterans with mental health issues by easing their financial burdens. Members are encouraged to weigh in on this issue by contacting their Senators through the [FRA Action Center](#) online.



**“We Proudly Support our
Military Personnel & Families”**





S. 318, the VA Newborn Emergency Treatment Act

On February 4, 2019, Senator Patty Murray (WA) introduced S. 318, the VA Newborn Emergency Treatment Act. The bill would authorize the VA Secretary to provide payment for emergency transportation of a woman veteran's newborn who requires more specialized treatment at a newborn care facility. In some cases, women veterans are transferred with the newborn and payment is authorized by VA. However, VA believes it lacks clear authority to pay for the transportation of the newborn infant alone. This legislation would provide such authority.

DAV Resolution No. 019 calls for enhancing women veterans health care services. DAV believes women veterans deserve a robust maternity care benefit that allows their infants initial coverage for care that would be covered under Medicaid and many private insurance plans. Maternity care is an important benefit to the significant portion of women veterans now under VA care. Many women veterans for whom VA coordinates maternity care are at high risk for pregnancy complications, including pre-term labor or low-birth weight newborns, because of service-connected conditions. Infants born to these

mothers often require more specialized and intensive services after birth; however, not all hospitals have such services available and transportation for the infant, but not necessarily the mother, becomes necessary.

Please help us ensure that VA covers the expense of emergency transportation for newborns of women veterans. Use the letter below to ask your Senators to support this important measure.

Thank you for your support of America's disabled veterans and the Commander's Action Network.

Take Action



1. Brainlab AG Recalls Spine & Trauma 3D Navigation Due to Inaccurate Display That May Result in User Misinterpretation
2. Caito Foods, LLC Voluntarily Recalls Fresh Cut Melon Product Because of Possible Health Risk
3. Hercules Candy LLC Issues Allergy Alert on Undeclared Peanuts in Cashew Brittle Bits
4. Jensen Tuna of Louisiana is Voluntarily Recalling Frozen Ground Tuna Imported from JK Fish, Because it may Potentially be Contaminated with Salmonella
5. Mondelēz Global LLC Conducts Voluntary Recall of Certain Chewy Chips Ahoy 13oz Due to Unexpected Solidified Ingredient in Product in the US
6. SD Import Issues Voluntary Nationwide Recall of Aphrodisiac Capsules Due to Presence of Undeclared Sildenafil
7. Unilever Issues Allergy Alert on Undeclared Tree Nut in Limited Quantities of Ben & Jerry's Coconut Seven Layer Bar Bulk and Chunky Monkey Pint



For Caregivers

Long-distance caregiving can bring unique challenges. Here are some tips to keep in mind while caring for [someone from far away](#):

- **Know what you need to know.** Learn as much as you can about your family member's or friend's illness, medicines, and resources that might be available.
- **Plan your visits.** Talk to your family member or friend

ahead of time and find out what he or she would like to do. Also, check with the primary caregiver, if appropriate, to learn what he or she needs while you're in town. This may help you set clear-cut and realistic goals for the visit.

- **Spend time visiting with your family member.** Try to make time to do things unrelated to being a caregiver.

Finding a little bit of time to do something simple and relaxing can help everyone, and it builds more family memories.

- **Get in touch and stay in touch.** Many families schedule conference calls with doctors, the assisted living facility team, or nursing home staff so several relatives can participate in one conversation and get up-to-date information about a relative's health and progress.

- **Help the person stay in contact.** Maybe this is a private phone line in a nursing home room. Or, a cell phone might give everyone some peace of mind. Having a phone and a schedule for contact can be a lifeline.

- **Learn more about caregiving.** Caregiving training may be available to you to teach you how to perform caregiving tasks like safely moving a person from a bed to a chair or basic first aid.

- **Gather a list of resources in the care recipient's neighborhood.** Look online, check with a local library or senior center, the Area Agency on Aging (www.n4a.org), or the Eldercare Locator (<https://eldercare.acl.gov>) to find out about local sources of help.

[Visit our website](#) for more long-distance caregiver tips.



**H.R. 713, Provide Beneficiary Travel
Funds to Veterans Seeking
Specialized Treatment for Military
Sexual Trauma**

Representative Jackie Walorski introduced H.R. 713, a bill that would require the Department of Veterans Affairs (VA) to provide beneficiary travel for veterans seeking specialized outpatient or residential treatment at another VA facility for conditions related to military sexual trauma (MST).

DAV Resolution No. 138 recognizes the current VA policy on beneficiary travel is a barrier to some veterans obtaining appropriate care and calls for changes to improve veterans' access to specialized care for MST-related conditions.

One in four women and one in 20 men using VA health care services screen positive for MST. While all VA medical centers are required to offer screening and related treatment for MST, about a third claim that staffing shortages compromise their ability to provide such care. Travel is often necessary for veterans to obtain the right type of specialized treatment in an environment veterans consider safe and appropriate to discuss sensitive issues. These perceptions are often the basis for choosing a provider and/or group of their own gender or where they feel most comfortable.

Please write your Representative today to urge co-sponsorship and enactment of H.R. 713. As always, thank you for your efforts and for participating in the Commander's Action Network.


Take Action



New Navy CNO and Vice CNO Nominated

The current Chief of Naval Operations Admiral John Richardson is scheduled to step down from his position later this year. Admiral Bill Moran has been nominated by President Trump to become the 32nd Chief of Naval Operations (CNO), if confirmed by the Senate. Moran has been the vice chief of naval operations since May 2016. The CNO is the Navy's top admiral and is a member of the Joint Chiefs of Staff. The CNO reports directly to the Secretary of the Navy.

Vice Admiral Robert Burke has been nominated to be promoted to a four-star Admiral and assigned as the vice chief of naval operations. If confirmed by the Senate, Burke would take over the Navy's number two job from Admiral Moran. Burke, a career submarine officer, is currently the Navy's deputy chief of naval operations for manpower, personnel, training and education.





H.R. 1200, the Veterans' Compensation Cost-of-Living Adjustment Act of 2019

On February 13, 2019, Representative Elaine Luria (VA), Chairman of the House Veterans' Affairs Subcommittee on Disability Assistance and Memorial Affairs and Ranking Member Michael Bost (IL), introduced H.R. 1200, the Veterans' Compensation Cost-of-Living Adjustment Act of 2019.

This bill, if enacted, would authorize a cost-of-living adjustment (COLA) for veterans in receipt of compensation

and pension, and for survivors of veterans who died from service-incurred disabilities and are in receipt of Dependency and Indemnity Compensation (DIC). It would provide a COLA increase by the same percentage as Social Security and would effective December 1, 2019.

Receipt of annual COLA increments aids injured and ill veterans, their families, and their survivors to help maintain the value of their VA benefits against inflation. Without COLAs, these individuals, who sacrificed their own health and their family life for the good of our nation, may not be able to maintain a quality of life in their elder years. DAV strongly supports H.R. 1200 as it is in accord with DAV Resolution No. 031.

Take Action Today! Please use the prepared electronic letter or draft your own to urge your Representatives to support and co-sponsor H.R. 1200.

As always, we appreciate your support for DAV and your grassroots activism in participating in DAV CAN. Your advocacy helps make DAV a highly influential and effective organization in Washington.

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

Take Action



American Forces Travel Discounts

Service members, veterans and their families can now receive a military discount if they book their travel through American Forces Travel, which is supported by Priceline. The Department of Defense teamed up with Priceline and created an online travel booking site exclusively for U.S. military members. American Forces Travel is a new Morale, Welfare and Recreation (MWR) program that came out of a joint service initiative, which combines the efforts of the five branches of service.

The following personnel can use the travel booking service:

- All current Active Duty military (Army, Marine Corps, Navy, Air Force, and Coast Guard).
- All members of the Reserve components and National Guard.
- All Retired Military, including those in the Reserves and National Guard who are retirement eligible.
- All Medal of Honor recipients and 100% disabled veterans.
- All Department of Defense civilians serving outside the United States, including appropriated funds (APF) employees and non-appropriated funds (NAF) employees.
- American Red Cross and United Service Organizations (USO) paid-personnel currently serving outside the United States.
- All eligible family members who are officially sponsored (ID card holder) by patrons in the above categories.

In addition to enhancing the quality of life for the military community, American Forces Travel will help fund MWR

programs with commissions made from each booking done online. American Forces Travel is a full-service company that offers hotel, flight, car rental and cruise deals. They also offer bundled or package deals.

For more information you can visit the [website](#).



Tax & Credit Information



1. Cybersecurity, new tax law, top agenda at Nationwide Tax Forums Tax Pros: Earn up to 19 Continuing Education Credits
2. Extension filers should avoid these errors when filing their tax return
3. Here's how taxpayers can file an extension for more time to file their federal taxes
4. ID theft: Here's what to look for and what to do when it happens
5. IRS announces multi-year plan to update, modernize IT systems; Effort focused on improved taxpayer services, expanded cybersecurity and taxpayer data protections
6. IRS highlights importance of payroll tax compliance in two-week campaign focused on legal actions, education visits
7. IRS issues guidance relating to deferral of gains for investments in a qualified opportunity fund
8. IRS provides tips for last-minute filers; resources for extensions, payments and installment agreements
9. Some people get more time to file without asking; Anyone else can request an automatic extension
10. Updated pub helps taxpayers understand an offer in compromise
11. With tax-filing deadline nearing, IRS says about 50 million still need to file





H.R. 663/S. 191, Burn Pits Accountability Act

On January 17, 2019, Representative Tulsi Gabbard (HI) introduced H.R. 663, the Burn Pits Accountability Act in the House and Senator Amy Klobuchar (MN) introduced a companion bill, S. 191, in the Senate.

Since the Persian Gulf War, a common waste disposal practice at military sites outside the United States was the use of burn pits. Smoke from these pits contained toxic substances that may have short- and long-term health effects, especially for those who were exposed for longer periods. Many service members reported acute symptoms of respiratory or eye irritation, gastrointestinal distress, or rashes during or shortly after exposure, but the research thus far has been inconclusive about whether there are longer lasting consequences to these exposures as many veterans, who are still struggling with health conditions that arose during or after military service believe.

Both bills would require the Secretary of Defense to ensure that periodic health assessments ascertain whether a service member has been at a location when an open burn pit was used or exposed to toxic airborne chemicals. It will

further require the Secretary to enter into an information sharing agreement with the Secretary of Veterans Affairs (VA). If a service member was exposed, the VA Secretary will enroll the member into the VA Airborne Hazards and Open Burn Pit Registry, unless the member elects not to enroll.

In agreement with DAV Resolution No. 069, DAV supports H.R. 663 and S. 191-legislation that would ensure that exposure to burn pits and airborne chemicals are recognized by both the Departments of Defense and Veterans Affairs.

Thank you for all you do for America's wartime service-disabled veterans and their families.

Take Action





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.



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MIA Update

The Defense POW/MIA Accounting Agency announced one burial update and four new identifications for service members who have been missing and unaccounted-for from World War II and Korea. Returning home for burial with full military honors are:

Army Cpl. Carlos E. Ferguson, 20, of Dawson, W.Va., will be buried May 18 in nearby Grassy Meadows. Ferguson, whose identification was announced in February, was a member of Company L, 3rd Battalion, 23rd Infantry Regiment, 2nd Infantry Division, engaged against North Korean and Chinese forces near Kangye, South Korea, from May 16-20, 1951. Ferguson was reported missing in action on May 18, 1951. [Read about Ferguson here.](#)

Navy Seaman 2nd Class Richard J. Thomson, 19, of League City, Texas, was stationed aboard the battleship USS Oklahoma when it sustained multiple torpedo hits and capsized as it was moored off Ford Island in Pearl Harbor, Hawaii, on Dec. 7, 1941. The attack on the ship resulted in the deaths of 429 crewmembers, including Thomson. Interment services are pending. [Read about Thomson here.](#)

Navy Seaman 1st Class Ernest R. West, 22, of Runnells, Iowa, was stationed aboard the battleship USS Oklahoma when it sustained multiple torpedo hits and capsized as it was moored off Ford Island in Pearl Harbor, Hawaii, on Dec. 7, 1941. The attack on the ship resulted in the deaths of 429 crewmen, including West. Interment services are pending. [Read about West here.](#)

Army Pfc. Raymond H. Middlekauff, of Baltimore, Md. In late 1944, Middlekauff was assigned to Company F, 2nd Battalion, 22nd Infantry Regiment, 4th Infantry Division, which was engaged against German forces near the town of Grosshau in Germany's Hürtgen Forest. He was reported missing in action on Dec. 4, 1944. Interment services are pending. [Read about Middlekauff here.](#)

Army Capt. Rufus J. Hyman, 23, of Memphis, Tenn., was an infantry officer with Company A, 1st Battalion, 34th Infantry Regiment, 24th Infantry Division, which was engaged against the North Korean People's Army in the vicinity of Kwonbin-ni, South Korea. He was declared missing in action on July 30, 1950. Interment services are pending. [Read about Hyman here.](#)



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