



# **Veterans-For-Change Newsletter**

*A Voice of the Veterans*

Week Ending Sunday, May 12, 2019

Volume 10, Issue 19



## **This-N-That**

The House has finally done some good work other than their continued witch hunt.

Further down in this newsletter there is a list of bill which have all passed in the House. But the job is not over yet, so we need everyone to get on the phones and call their Senators and kindly request their support of each of these bills and get them passed.

To my knowledge this is the first time in a very long time that this many bills all passed in the house all at once.

But it does show that many people have called, have sent off the pre-written E-Mails and posted messages to their websites.

So we need to keep the momentum going and keep on them for all the bills.

This past few weeks some or many of you have read articles on more Veteran Suicides, another most recently at the Cleveland VAMC. We all need to work together to help stop this insanity.

Veterans are being turned away being told they can't come to the ER, they need to make appointments in mental health, plus a host of other excuses. And some are being hospitalized for a day or two then sent home when everyone knows PTSD can't be resolved or treated in a few short days.

Families have all requested that their loved one not be released, or released alone. But do they listen, no, and who would know better than a family member or battle buddy?

I'm sure this is just like every day crimes being committed in your city or town, you've become immune to it, when it hits the news you change channels. We can't do that with our Veterans, we just can't do that, not

any more!

For a few years now the number being touted is 22 suicides per day, I am more convinced now than before that the number is 50+ per day, some are just not being reported to the VA.

Then add to that, Veterans being treated in VAMC's who are having limbs amputated needlessly because someone didn't do their job right, and Veterans dying for lack of proper care, or lack of care completely.

If we can't fight now, and keep on fighting till all things are corrected, not farmed out to civilian doctors and hospitals, then what's the point?

Losing one life, is one life too many, but evidently there is a price tag somewhere in Congress, there always is, so how many lives does it take before they listen, before they pay attention, before they act?

I have one Vet in northern CA who lost a toe, it wasn't healing properly, but now after a few months he's doing better, before that VA doctors had prescribed a medication where the manufacturer's directions were to run blood tests every 3 months to insure it's working or not, his doctors never did that, and in all that time he's had 5+ medical emergencies, the last ended up in open

heart surgery.

BUT, there is a good sign up on the hill, a bill has been introduced to repeal the Feres Doctrine which in the past has prevented Veterans and families from suing the VA for many reasons, wrongful death among them.

This is a huge thing, and we all need to encourage our Reps in DC to support this bill, and a good point to make with them is what would you do if your family member died due to negligence if you couldn't sue?

I've had to make some changes to our website, but they are temporary as we're anticipating a move from one hosting service to another by June 1st, and their committed to keep us monitored for program changes, bugs, etc and keep us 100% operational.

So for now in order to make comments on any article posted you do need to subscribe and I monitor that daily as that portion of the system has been temporarily modified as well, so instant access is not possible, but I will faithfully check each day and manually approve accounts and let each person know when approved.

We are still maintaining the goal of adding 500 new documents over the next three week, and some libraries have been opened up for any visitor and not just limited

to subscribers only, but this too is temporary until the transition to the new hosting service and repairs are made.

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](mailto:Jim.Davis@Veterans-For-Change.org)



## **Army Research May Help Treat Cancer, Heal Wounds**

Research funded by the U.S. Army and conducted by researchers at the University of California, Santa Barbara, and Université de Bordeaux, France, is at the cutting edge of a new technique that may be used to treat cancer and even heal wounds sustained in combat. With the technique, known as electroporation, an electrical field is applied to cells in order to increase the permeability of the cell membrane, allowing chemicals, drugs or DNA to be introduced into the cell, according to a recent news release. This research is the first to develop a computational model using the procedure. The model has been compared and validated with the response of a single cell in experiments. One potential application of the technology is accelerating the healing of combat wounds through electric pulses introduced into the cell. Researchers are currently mining data to further develop their theory. Read more at [Army.mil](https://www.army.mil).



## **VA ensures Veterans have same-day access to emergency mental health care**

WASHINGTON — As part of the U.S. Department of Veterans Affairs' (VA) efforts to provide the best mental health care access possible, VA is reminding Veterans that it offers all Veterans same-day access to emergency mental health care at any VA health care facility across

the country.

“Providing same-day 24/7 access to mental health crisis intervention and support for Veterans, service members and their families is our top clinical priority,” said VA Secretary Robert Wilkie. “It’s important that all Veterans, their family and friends know that help is easily available.”

VA’s Office of Mental Health and Suicide Prevention is the national leader in making high-quality mental health care and suicide prevention resources available to Veterans through a full spectrum of outpatient, inpatient and telemental health services.

Additionally, VA has developed the National Strategy for Preventing Veteran Suicide, which reflects the department’s vision for a coordinated effort to prevent suicide among all service members and Veterans. This strategy maintains VA’s focus on high-risk individuals in health care settings, while also adopting a broad public health approach to suicide prevention.

VA has supported numerous Veterans and has the capacity to assist more. In fiscal year (FY) 2018, 1.7 million Veterans received Veterans Health Administration (VHA) mental health services. These patients received more than 84,000 psychiatric hospital stays, about

41,700 residential stays and more than 21 million outpatient encounters.

Nationally, in the first quarter of FY 2019, 90% of new patients completed an appointment in a mental health clinic within 30 days of scheduling an appointment, and 96.8% of established patients completed a mental health appointment within 30 days of the day they requested. For FY 2018, 48% of initial, in-person Primary Care — Mental Health Integration (PC-MHI) encounters were on the same day as the patient's PC encounter. During the first quarter of FY 2019, 51% of initial, in-person PC-MHI encounters were on the same day as the patient's PC encounter.

Veterans in crisis – or those concerned about one – should call the Veterans Crisis Line at 800-273-8255 and press 1, send a text message to 838255 or chat online at [VeteransCrisisLine.net](http://VeteransCrisisLine.net).



**[Veterans-For-Change Web Site](http://Veterans-For-Change.org)**

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 **3,250** hits per day, and downloads average **2,901** per day with a total **4,969,896** 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](http://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: **8,508**)
- Polls
- Web Links, more than **4,926**, Added 16 New Links (Updated: 05/07/19)

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



## **VA Appeals Modernization, Explained (2019)**

[Click here to view video](#)





## **Action Alert: Tell Congress to End the Widow's Tax Now!**

Background: More than 65,000 surviving military spouses and dependents are unjustly penalized because their loved ones made the ultimate sacrifice for our country.

Similar to life insurance, the Survivor Benefit Plan (SBP) is purchased through DOD by military retirees to ensure their surviving loved ones can maintain a modest standard of living. When service members or veterans die from injuries or illnesses related to their military service, survivors are eligible for VA Dependency and Indemnity Compensation (DIC). Despite the two payments being paid for two different reasons from two different federal departments, all monthly SBP retirement payments are reduced by \$1,319 — the current payout for DIC benefits. For many survivors, this offset completely eliminates their SBP payments and threatens their financial security. The recent tax law makes this situation worse by doubling the tax on dependents to

whom parents transferred SBP benefits to avoid having to forfeit DIC benefits.

Take Action: Contact your members of Congress and urge them to end the injustice now! The message these aptly termed “Widow’s Tax” and “Kiddie Tax” sends to service members, veterans, and their families is that our government salutes their service while in uniform, but they cost too much if they die on active duty or from service-connected conditions.

**[CLICK HERE TO TAKE ACTION](#)**



**~Follow VFC 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](http://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](http://www.mewe.com/join/veterans-for-change)

**HOMELESS HEROES PROGRAM OF VETERANS-FOR-CHANGE**

[www.mewe.com/join/homelessheroesprogramofveterans-for-change](http://www.mewe.com/join/homelessheroesprogramofveterans-for-change)



## **AMVETS GROUP**

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## **VETERANS SOCIAL GROUP**

[www.mewe.com/join/veteranssocialgroup](http://www.mewe.com/join/veteranssocialgroup)

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

[www.mewe.com/join/usavetsupportinggodallwhoserveandserve](http://www.mewe.com/join/usavetsupportinggodallwhoserveandserve)

## **AMERICANS FOR SOVEREIGNTY**

[www.mewe.com/join/americansforsovereignty](http://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**



## **House Committee on Veterans' Affairs Passes 18 Bills Out of Committee**

WASHINGTON, D.C. -- Today, the House Committee on Veterans' Affairs held its first full committee markup passing all of the 18 bills on the agenda and continuing its work to deliver clear results for veterans on suicide prevention, homelessness, and finally delivering justice for our Blue Water Navy veterans. Chairman Mark Takano's opening remarks and a full list of the 18 bills passed can be found below:

I would like to thank everyone here this morning. The 18 bills we have before us today represent considerable time and hard work by the members of this Committee on both sides of the aisle. Four of our five subcommittees are being led by freshmen chairs this Congress, and four

members of the minority are also new to Congress. I want to thank each of you for your bipartisan efforts and leadership.

Your work has produced an impressive number of bills which will improve the quality of veterans' lives. We will consider H.R. 299, the Blue Water Navy Vietnam Veterans Act to finally right an incredible injustice for veterans who are suffering and dying from conditions related to Agent Orange exposure and who have been unfairly denied disability and health benefits for more than 40 years. When this bill is reported out of Committee today, I will ask the Speaker to put it on the House Floor before Memorial Day---these veterans have waited far too long, and the Ranking Member and I are committed to working with our Senate colleagues to get this bill passed into law. As I said last week, If I have to stand in the Senate gallery every day until this bill is passed, I will.

The Committee is determined to address the national public health crisis of veteran suicide. That's why I'm proud to highlight 4 bipartisan bills written by Vice Chairman Lamb, Representative Brindisi, Representative Rose, and Representative Underwood that address mental health and suicide prevention. It's clear we need to do more to reduce veteran suicide and these bills will help us better understand the crisis at

hand.

Last but not least, I thank Congresswoman Luria for introducing the Veterans' Compensation Cost-of-Living Act. Congress passes the COLA bill every year to make sure veterans' disability benefits keep pace with the rising cost of living.

Full list of passed legislation:

1. A.N.S. to H.R. 299 (Rep. Takano) the Blue Water Navy Vietnam Veterans Act of 2019
2. A.N.S. to H.R. 2372 (Rep. Underwood) Veterans' Care Quality Transparency Act
3. A.N.S. to H.R. 2340 (Rep. Rose) FIGHT Veteran Suicides Act
4. A.N.S. to H.R. 2359 (Rep. Lamb) Whole Veteran Act
5. H.R. 1947 (Rep. Roe) To exempt transfers of funds from Federal agencies to the Department of Veterans Affairs for nonprofit corporations established under subchapter IV of chapter 73 of such title from certain provisions of the Economy Act.
6. H.R. 1812 (Rep. Roe) Vet Center Eligibility Expansion Act
7. H.R. 2385 (Rep. Lamb) to permit the Secretary of Veterans Affairs to establish a grant program to conduct cemetery research and produce educational materials for the Veterans Legacy Program.

8. A.N.S. to H.R. 1988 (Rep. David Scott), the Protect Affordable Mortgages for Veterans Act
9. H.R. 2045 (Rep. Wenstrup), the VET OPP Act
10. H.R. 2333 (Rep. Brindisi) Support for Suicide Prevention Coordinators Act
11. H.R.1200 (Rep Luria), the Veterans' Compensation Cost-of-Living Adjustment Act
12. H.R. 95 (Rep. Brownley), the Homeless Veteran Families Act
13. H.R. 1199 (Rep. Luria), The VA Website Accessibility Act
14. H.R. 2109 (Rep. Rice), the BRAVE Act
15. H.R. 2196 (Rep. Barr), to amend title 38, United States Code, to reduce the credit hour requirement for the Edith Nourse Rogers STEM Scholarship program of the Department of Veterans Affairs.
16. H.R. 2326 (Rep. Levin) the Navy SEAL Chief Petty Officer William Bill Mulder (Ret.) Transition Improvement Act of 2019
17. H.R. 2398 (Rep. Peters), the Veteran HOUSE Act
18. H.R. 2399 (Rep. Peters), the Home for Our Heroes Act of 2019

All bill language can be found on the Committee Repository [here](#).

[Source](#)



## **TRICARE Beneficiary Bulletin #500**

Listen to this week's podcast to hear about:

- Adding a New Child Stateside
- Registering Your Child in DEERS
- Adding a New Child Overseas

Visit the Multimedia Center for this podcast and previous podcasts at [www.tricare.mil/podcasts](http://www.tricare.mil/podcasts).

## **Retirees Can Get Free Dental Care June 8**

Veterans can get free dental care nationwide on June 8 from a company that provides an annual offering as part of its health initiative. Dentists and teams at nearly 500 Aspen Dental offices nationwide will open their doors to serve veterans in their local communities as part of their Healthy Mouth Movement. Starting May 1, veterans can call 844-277-3646 to find a participating Aspen Dental office in their community and schedule an appointment for June 8. Read more about the offer [here](#).



## **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 Appreciation Month Discounts

Service members, families and retirees are being honored during Military Appreciation Month with a variety of discounts in 2019. Our exhaustive list of national military appreciation discounts highlights the best deals out there aimed at recognizing our military members. See the complete list [here](#).



**Don't Cut Military Health Care Staff!**

FRA has signed onto a letter, with other like-minded organizations, to members of the House and Senate Armed Services Committees asking Congress to delay and closely review proposed cuts of nearly 18,000 military medical billets from the current 130,000. The Defense Department's fiscal 2020 budget calls for the elimination of about 18,000 military medical positions, and FRA is concerned that such drastic cuts could impact access and quality of care for retirees, active duty members and their families. These proposed cuts could also impact combat casualty care capabilities.

Members are urged to use the [Action Center](#) to urge their legislators to delay and closely review these drastic cuts to military medical care staff.





## **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**



## **Search Our Newly Updated Base Guides**

Find valuable, local off-base information on more than 220 military bases. Newly updated! [\*\*Search now.\*\*](#)



## **Can Spouses Be Buried in Veterans Cemeteries?**

You may know that most veterans can be buried in state and national veterans cemeteries for little or no money, but what about their spouses and other dependents? Your spouse may be eligible to be buried with you in a veterans cemetery at little or no cost. However, if you and your spouse have divorced and they have remarried, they probably aren't eligible. Dependent children may also be eligible, as well as some parents of those killed on active duty. Learn more about spouse burial eligibility [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](http://www.veterans-for-change.org)**





## **H.R. 96, to Provide Dental Care for All Veterans Enrolled in Veterans Health Care**

Chairwoman Julia Brownley of the House Veterans' Affairs Subcommittee on Health introduced H.R. 96, legislation that would phase in eligibility for all Veterans enrolled in the Department of Veterans Affairs (VA) for health care to receive dental care as a part of their medical benefits package.

The bill would require the VA Secretary to furnish dental care in the same manner as any other medical service, and defines a four-year implementation plan beginning with Veterans in priority groups one and two (Veterans with service-connected disabilities rated at 30 percent or more) in year one.

Dental care has been proven to be an important part of overall health care. Many private employers and state Medicaid programs provide it as part of a comprehensive health care package. Most clinicians agree there are strong associations between significant dental issues



and other adverse systemic health outcomes.

Unfortunately gaps in coverage often affect people with lower incomes and complex health needs the most.

DAV Resolution No. 018 calls for the provision of comprehensive dental care to all service-connected disabled Veterans within the VA health care system.

Therefore, DAV strongly supports this legislation.

Please use the prepared email or your own letter to ask your Representative in Congress to cosponsor H.R. 96. Thank you for your support of the DAV's legislative priorities.

### **Take Action**



## **Redesign of myPay Website Promises Many Improvements**

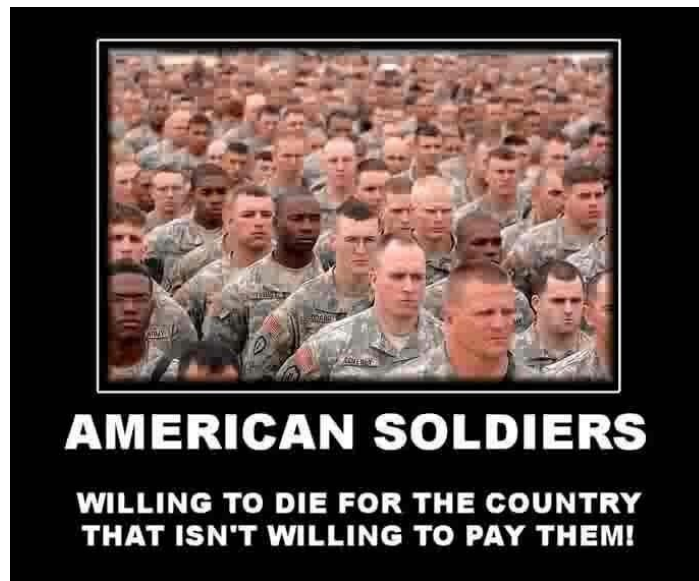
The next time you log into myPay, you may notice a few differences. The Defense Finance and Accounting Service has redesigned the myPay website to make it easier to use on both mobile devices and computers. The makeover offers an uncluttered design and moves the navigation menu to the left side of the screen with simple-to-understand categories that give you easier access to all your pay information. The redesign went live May 4. Read more about the changes [here](#).



## **Employer Spotlight: Ross Stores is Hiring Vets**

Ross Stores is committed to employing veterans. Join Ross and leverage your military experience. [View jobs now](#).





## **VA Now Accepting Applications for New VET TEC GI Bill Program**

The Department of Veterans Affairs is accepting applications for the Veteran Employment Through Technology Education Courses. The VET TEC program, part of the new Harry W. Colmery Veterans Educational Assistance Act, also known as the "Forever GI Bill," is meant to help veterans get the cutting-edge skills they need to succeed in today's high-tech industries. Anyone currently eligible to use their GI Bill benefits — Montgomery or Post-9/11 — is qualified for the program as long as they haven't passed the time limit to use their benefits and have at least one day of benefits remaining. Learn more about the program [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.

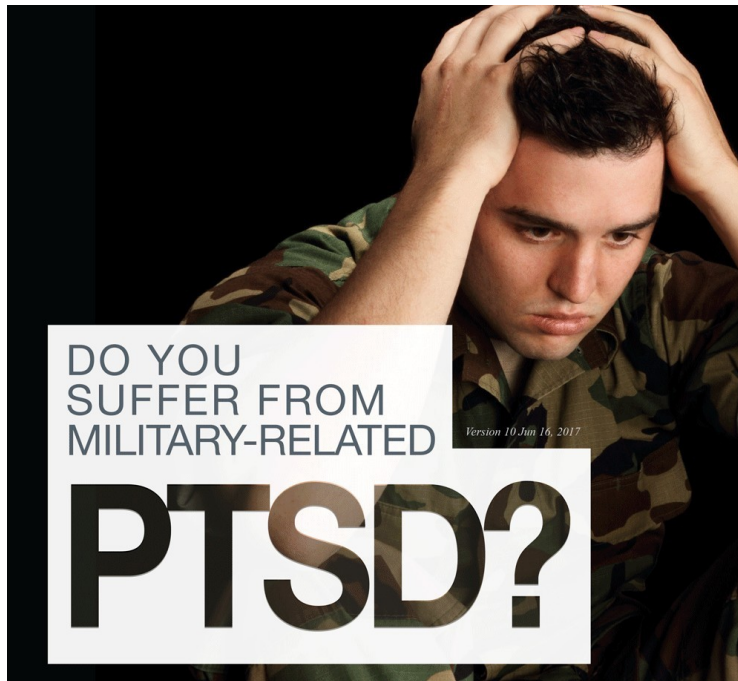
## **Take Action**



## 14 Sikh High Schoolers Get Waivers to Enter Army Basic With Beard, Turban

Following graduation this June, Manav Sodhi will help lead a new wave of Sikh soldiers enlisting in the U.S. Army who will be allowed to wear the traditional turban and beard in Basic Combat Training. Sodhi, who is currently attending Kings Park High School in New York, was recently granted a religious accommodation by the service, according to the Sikh American Veterans Alliance (SAVA). Practicing Sikhs serving in the Army are nothing new, but SAVA's news release states that Sodhi is the first high school student to receive a religious accommodation so he can enlist as a Sikh. Read more about the waivers [here](#).





**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.

## Take Action



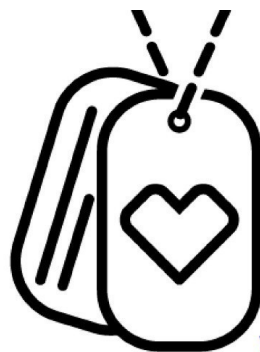
### **Army Reorganizes to Promote History**

The Army Center of Military History realigned under Army Training and Doctrine Command, or TRADOC, on May 1 to better promote history at service schoolhouses, according to a recent news release. Center employees will continue to work out of Fort Belvoir, Virginia, and Fort McNair in Washington, D.C., but being under a four-star command will allow them to do more to educate soldiers. The center's move is part of reforms being made by the secretary of the Army to ensure the headquarters level is focused on policy and oversight, and that commanders at lower levels are properly equipped to carry out their functions. Army Recruiting Command, which is part of TRADOC, has also expressed interest in having the center help tailor historical content for young trainees in basic combat training. Read more at [Army.mil](http://Army.mil).



## Navy Housing Survey Deadline Extended

The Navy has extended the deadline for sailors and their families living in public-private housing to complete a resident satisfaction survey. The new deadlines are May 9 for those living in privatized family housing units in the U.S. or unaccompanied housing units in San Diego and Norfolk; June 6 for those in family housing overseas; and June 20 for those in all other unaccompanied housing. The Navy oversees 116,000 housing units but, as of April 30, fewer than half of all occupants had responded. The surveys are being conducted by an independent third party, CEL & Associates, and take about 10 minutes to complete. Participants will remain anonymous unless they choose to identify themselves. Read more at [Navy.mil](http://Navy.mil).



**Our values  
match yours.**



[www.veterans-for-change.org](http://www.veterans-for-change.org)



## **Blue Water Navy Act Awaits Vote by House of Representatives**

The VFW is saluting the House Committee on Veterans' Affairs for unanimously passing H.R. 299, the Blue Water Navy Vietnam Veterans Act of 2019. The VFW-supported bill, which must still be approved by the full House and Senate before going to the president, would restore VA benefits to thousands of Vietnam veterans, expand inclusive dates to those who served along the Korean DMZ, and benefit children born with spina bifida due to a parent's exposure to Agent Orange in Thailand. "Toxic exposure is toxic exposure, and denying benefits to any veteran just because of time or location denigrates their service and marginalizes their suffering," said VFW National Commander B.J. Lawrence. "I'm urging every veteran, family member and advocate to contact their respective members of Congress to get this bill passed and signed into law now!" Stay tuned to the Action Corps Weekly for updates on this important bill. [Contact your members of Congress 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**





## **House Advances Fiscal Year 2020 VA and Military Construction Appropriations**

On Wednesday, the House Committee on Appropriations conducted a markup of the fiscal year 2020 VA, military construction, and related agencies bill, which includes a 9 percent increase in resources for VA to increase access to care for veterans, improve oversight, and complete more construction projects. It also includes \$2 billion for urgently needed repairs to military installations that were impacted by recent natural disasters. An amendment by Congressman Jeff Fortenberry (R-Neb.) was adopted to add \$300 million in emergency funding to repair natural disaster damage at Offutt Air Force Base. The bill provides more resources than was requested in the president's budget, but is still less than recommended by the Independent Budget. The Senate, House, and White House are engaged in discussions on how to address the draconian budget control act (BCA) spending caps, which are set to revert back to sequestration-level limits that were established nearly a decade ago. Service members, veterans, and their families will suffer if BCA caps are not adjusted. [Read a summary of the bill.](#) [Watch the Markup.](#)





We will always be our  
Brothers Keeper!

## House Advances Bills on Suicide Prevention and Economic Opportunity

On Wednesday, the House Committee on Veterans' Affairs advanced 18 bills to the full House of Representatives. In addition to Blue Water Navy, the bills would address the crisis of veteran suicides and improve employment, education, and transition assistance programs. The committee also advanced the annual cost of living adjustment, which would ensure veterans disability compensation keeps pace with the rising cost of living. All 18 bills now await consideration by the House and Senate. Stay tuned to the Action Corps Weekly for updates on these bills. Read the [bills](#) or a [summary of each bill](#). Watch the markup [here](#).





Never forget our fallen!



## **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.

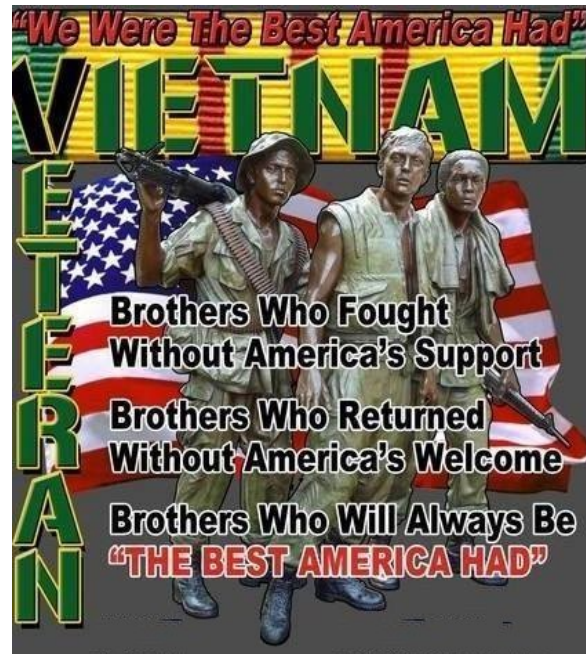
Upon the retiree's death, the SBP annuity is paid monthly to eligible beneficiaries; however, if a surviving spouse is also entitled to DIC, the SBP benefit is reduced by the amount of the DIC benefit (currently \$1,283.11 per month). In general, when DIC benefits are payable but the monthly rate is 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. [Aging Veterans often miss out on benefits, forum hopes to change that](#)

2. [American Legion Auxiliary partners with VA to help Veterans find their way around VA hospitals](#)
3. [Authorities thwart widespread terror plot involving US military Veteran](#)
4. [Bill HR 2333 is a good step to helping curb Veteran suicide](#)
5. [Bronx Army Reserve Center To Be Converted Into Affordable Housing For Formerly Homeless Veterans](#)
6. [Code of Support Foundation offers free access to Veteran Resources](#)
7. [CogSMART program improves Veterans' cognitive functions](#)
8. [Georgia Veterans' families raising alarms about open-air burn pits](#)
9. [Hidden Warriors: homeless Veteran women in SA](#)
10. [Housing for homeless Veterans](#)
11. [How Chronic Pain Affects Your Mental Health](#)
12. [Infectious Diseases Affecting Gulf War Veterans](#)
13. [Labrador Vet 'stunned' by Veterans Affairs decision keeping her out of N.S. care facility](#)
14. [Military families slammed by Trump tax reform demand changes](#)
15. [New text feature available through VA's Women Veterans Call Center](#)
16. [Ocasio-Cortez claim that Trump wants to privatize VA is 'nonsense,' VA secretary tells Fox](#)
17. [Ocasio-Cortez defends VA healthcare to Veterans: 'If](#)

it ain't broke, don't fix it'

18. Patients recount medical horrors under care of military doctors, with no legal recourse
19. Preventing Veteran suicide begins when you are willing to Be There
20. The march to Memorial Day: VA and Carry the Load team up to honor the fallen
21. The Poison Papers Expose Decades of Collusion between Industry and Regulators over Hazardous Pesticides & Chemicals
22. This school waives out-of-state tuition for Vets, GI Bill or no GI Bill
23. Top Veterans Affairs official hits back at AOC's claim the VA doesn't have enough money
24. Tragic Veteran Suicide At Cleveland VA Medical Center
25. Tricare Extends Window for Choosing Coverage After Retirement
26. Trump says Ocasio-Cortez is right about Veterans Affairs
27. VA clinic breaks ground to offer modern care
28. VA opposes new legislation aimed at improving access to medical marijuana for Veterans
29. VA Secretary praises department's model path to ending opioid addiction
30. VA's improvements to Veteran community care under MISSION Act on track for June 6 implementation

31. [Veteran commits suicide outside VA hospital in Ohio](#)
32. [Veteran dances to bring joy to Lubbock drivers](#)
33. ['Veterans Court likely coming to Lubbock'](#)
34. [Veterans find support via Pathways to Recovery](#)
35. [Veterans slam Ocasio-Cortez for her fierce defense of the VA](#)
36. [What To Do While Waiting On Your VA Claim](#)

Check us out today: [www.veterans-for-change.org](http://www.veterans-for-change.org)



## **House VA Subcommittees Hold Joint Hearing on the GI Bill**

This week the House Veterans' Affairs Subcommittee on Economic Opportunity and the Subcommittee on Technology Modernization held a joint hearing regarding the implementation of the Forever GI Bill. This past fall almost 200,000 student veterans received delayed payments for housing and tuition. Many student veterans waited up to 90 days for this critical payment. In his opening remarks at the hearing Chairman Mike Levin stated the importance of congressional oversight in making sure VA gets it right this time around. The VFW thanks the two subcommittees for their oversight and attention to this important benefit for student veterans. [Watch the hearing here.](#)



## **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**





*CLICK HERE TO FOLLOW US ON TWITTER !*



**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



## D-Day 75th Anniversary Commemorations

Two events will be held at the National World War II Memorial to commemorate the 75th anniversary of the D-Day landing on the Normandy coast of France. The first, at 5 p.m., June 5, 2019, will be a Remembrance Ceremony and Candlelit Vigil to honor all who died during Operation Overlord (June 6-Aug. 30, 1944). As part of the ceremony, the names of 9,380 Americans who died and are buried at the Normandy American Cemetery in France will be read aloud. [Click here to volunteer to read names](#). The second event starts at 10 a.m., June 6, 2019, and it will include a tribute to all WWII veterans, as well as the allied nations who also took part in the landing. If you are a World War II veteran or know of one who would like to participate in the 75th Anniversary Commemoration, please email [hrotondi@wwiimemorialfriends.org](mailto:hrotondi@wwiimemorialfriends.org). Visitors to Washington, D.C., should know the World War II Memorial has no public parking and very limited handicap parking. The closest two Metro stops (Federal Triangle and Smithsonian) are about a half mile walk, and taxis and other hired conveyances are plentiful.





## **S. 374/H.R. 1092, the Servicemembers and Veterans Empowerment and Support Act of 2019**

Senator Jon Tester (MT) and Representative Chellie Pingree (ME) introduced S. 374 and H.R. 1092, the Servicemembers and Veterans Empowerment and Support Act of 2019.

This legislation will codify VA regulations regarding the adjudication of claims for mental health conditions, including post-traumatic stress disorder, associated with

experiencing Military Sexual Trauma (MST). It would also add technological abuse, defined as "behavior intended to harm, threaten, intimidate, control, stalk, harass, impersonate, or monitor another person, [...] that occurs via the Internet, through social networking sites, computers, mobile devices [...] to the types of trauma and resulting conditions for which survivors may seek benefits and health care. Finally, the bill would require VA to re-establish specially trained teams to adjudicate MST-related claims for mental health conditions and to report annually to Congress to ensure that these claims are adjudicated equitably.

VA's regulations for adjudicating claims for mental health conditions stemming from MST allow the Department to consider sources such as a statement from police, a rape hotline, or corroborating reports from friends, relatives or roommates to substantiate a claim. However, in 2017 the Inspector General (IG) issued a report indicating VA had discontinued the specialized training and handling of MST-related cases which resulted in discrepancies in the outcome of many of these claims.

The IG reported it found that VA's manuals related to processing these cases were outdated and that more than half of the MST-related PTSD claims had been inappropriately developed and considered. This

legislation will help to re-establish protocols for developing and adjudicating these cases thereby eliminating the disparity between awards for MST-related PTSD claims and other PTSD claims.

This bill is consistent with DAV Resolution No. 042 which calls for VA to conduct rigorous oversight of adjudication personnel who are responsible for evaluating disability claims associated with military sexual trauma and review of data to ensure existing policies are being faithfully followed and standardized in all VA regional offices.

Please ask your elected officials in Congress to cosponsor and support for final passage of S. 374/H.R. 1092.

Thank you for your support of the DAV CAN-Commanders Action Network.

## **Take Action**



## **Office of Inspector General**

1. [Army Should Take Steps to Reduce Risk](#)
2. [Assessing Treatment Expansion Efforts and Drug Control Strategies and Programs](#)
3. [Behavioral Health: Research on Health Care Costs of](#)

## Untreated Conditions is Limited

4. Improvements Are Needed to Enhance the Internal Revenue Service's Internal Control over Financial Reporting
5. IRS Needs to Improve Oversight of Third-Party Cybersecurity Practices
6. Limited Use of Knowledge-Based Practices Continues to Undercut DOD's Investments
7. Management Report: CMS Needs to Address Gaps in Federal Oversight of Nursing Home Abuse Investigations That Persisted in Oregon for at Least 15 Years
8. Priority Open Recommendations: Department of Health and Human Services
9. Priority Open Recommendations: Department of Veterans Affairs
10. VA and Indian Health Service: Actions Needed to Strengthen Oversight and Coordination of Health Care for American Indian and Alaska Native Veterans
11. VA and Indian Health Service: Actions Needed to Strengthen Oversight and Coordination of Health Care for American Indian and Alaska Native Veterans
12. VA Management Challenges: Actions Needed to Improve Management and Oversight of VA Operations
13. Veterans Affairs: Addressing IT Management Challenges Is Essential to Effectively Supporting the Department's Mission



14. Veterans Affairs: Addressing IT Management Challenges Is Essential to Effectively Supporting the Department's Mission
15. Veterans Health Administration: Past Performance System Recommendations Have Not Been Implemented
16. Veterans Health Administration: Past Performance System Recommendations Have Not Been Implemented
17. Veterans Health Care: VA Needs to Address Challenges as It Implements the Veterans Community Care Program
18. Veterans Health Care: VA Needs to Address Challenges as It Implements the Veterans Community Care Program
19. Women-Owned Small Business Program: Actions Needed to Address Ongoing Oversight Issues



**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**





## **S. 785, the Commander John Scott Hannon Veterans Mental Health Care Improvement Act**

Jon Tester (MT), introduced S. 785, the Commander John Scott Hannon Veterans Mental Health Care Improvement Act to improve eligibility and access to transitioning service members and veterans to federal programs such as transitional assistance programs and health care, including mental health care, to reduce suicide rates and improve mental health among veterans.

The Department of Veterans Affairs (VA) mental health program experienced tremendous growth (86%) between 2005 and 2017. Troops returning from deployments in Iraq and Afghanistan required mental health care services including treatment for PTSD, substance use disorders, depression, and anxiety. During this time VA also identified an upward trend in suicides among veterans. Homelessness and unemployment were considered contributing factors,

particularly for some subgroups in the veterans' population such as women and minorities.

The bill would:

- Improve access to transition services for veterans by extending VA health care eligibility to a year after discharge from military service;
- Create a grant program to help veterans obtain employment and help identify the many non-profit programs available to veterans in their communities;
- Create a new suicide prevention program to include new grant programs designed to reach veterans at risk of suicide who are not obtaining VA mental health care;
- Help facilitate post-traumatic growth services through community partners;
- Encourage peer support by organizing education and awareness of Buddy Checks;
- Require VA to track and report on goals and objectives in its suicide prevention plan and direct the Government Accountability Office to evaluate VA's case management program for veterans at high risk of suicide;
- Require VA to update guidelines on suicide prevention including using gender specific risk factors and treatment options
- Require VA to create treatment guidelines for trauma comorbid with chronic pain and substance abuse; and
- Require certain oversight reports and improve

authorities to assist in recruiting mental health providers and increasing veterans' access to telehealth.

The following resolutions lead DAV to strongly support this bill. DAV Resolution No. 293 supports program improvement and enhanced resources for VA Mental Health Programs, emphasizing the importance of timely access to mental health and readjustment services for transitioning service members. DAV Resolution No. 304 urges Congress to monitor programs in place to assist those service members transitioning to civilian life with access to appropriate federal programs.

Please contact your Senators to ask them to support this comprehensive bill to support our nation's veterans. Please use the letter prepared below or draft your own letter to ask for their support.

## Take Action



1. [Cargill Conducts Voluntary Recall of Select Southern States® Feed Due to High/Excessive/or Elevated Aflatoxin Levels](#)
2. [FDA Alerts Providers and Patients to Check for](#)



Premature Battery Depletion in Certain Medtronic Pacemakers: FDA Safety Communication

3. FDA MedWatch Safety Alert: Ketorolac Tromethamine Injection by Sagent Pharmaceuticals: Recall - Due to Lack of Sterility Assurance

4. ICCO Cheese Company, Inc., Issues Allergy Alert on Undeclared Walnuts and Pecans in Gia Russa Whole Grain Bread Crumbs

5. Life Rising Corporation Recalls Chinese Herbal Supplements Because of Possible Health Risk

6. Mecox Bay Dairy, LLC Recalls "Mecox Sunrise" Cheese Because of Possible Health Risk

7. Par Pharmaceutical, Inc. Issues Voluntary Nationwide Recall of One Lot of Mycophenolate Mofetil for Injection, USP Due to the Presence of a Glass Fragment Observed in One Vial of Reconstituted Product

8. STIFF BOY LLC. Issues Voluntary Nationwide Recall of THE BEAST Capsules Due to Presence of Undeclared Sildenafil

9. Vivimed Life Sciences Pvt Ltd Issues Voluntary Nationwide Recall of Losartan Potassium 25 mg, 50 mg and 100 mg Tablets, USP Due to the Detection of Trace Amounts of N-Nitroso-N-methyl-4-aminobutyric acid (NMBA) Impurity





## **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**



## **Bills Introduced to End the Kiddie Tax**

This week, Congresswoman Elaine Luria (D-Va.) and Senator Bill Cassidy (R-La.) introduced bills to address the “Kiddie Tax,” which was created when the Tax Cuts and Jobs Act more than doubled the amount of the tax burden on the children of those who have made the ultimate sacrifice. While these bills would provide retroactive relief to military survivors with tens of thousands of tax debt, it would not solve the underlying issue. Known as the “Widow’s Tax,” military spouses who are eligible for VA benefits because of the death of their loved ones are required to forfeit their DOD Survivor Benefits Plan. More than 65,000 surviving military spouses and dependents are unjustly penalized because their loved ones made the ultimate sacrifice for our country. Take action and tell Congress to end the Widow's Tax and Kiddie Tax now. Learn more about [Sen. Cassidy’s bill](#). Learn more about [Congresswoman Luria’s bill](#).





## **Bill to Repeal Feres Doctrine Introduced**

Last week, Congresswoman Jackie Speier (D-Calif.) introduced H.R. 2422, the Sergeant First Class Richard Stayskal Military Medical Accountability Act of 2019. The bill would allow military service members to sue DOD for instances of medical malpractice that are not related to combat activities. Read a summary of the bill ([https://speier.house.gov/sites/speier.house.gov/files/Sfc.Stayskal\\_Feres\\_Bill\\_One-Pager.pdf](https://speier.house.gov/sites/speier.house.gov/files/Sfc.Stayskal_Feres_Bill_One-Pager.pdf)) or the [full text](#).



**Tax & Credit  
Information**



1. For Small Business Week: Backup withholding rate now 24 percent, bonuses 22 percent; workers urged to do a Paycheck Checkup
2. Here's how small businesses can connect with the IRS over social media
3. IRS announces new personnel selection for Office of Chief Counsel
4. IRS promotes disaster readiness and Hurricane Preparedness Week
5. IRS seeks nominations for Internal Revenue Service Advisory Council through June 10
6. IRS urges data security, paying estimated taxes; highlights tax benefits, online resources during Small Business Week
7. IRS.gov has resources to help business owners understand taxes
8. Three Tips to Help You File a More Complete Form 990-Series Return



## **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



**Thailand Agent Orange Bill Introduced**



This week, Senators John Boozman (R-Ark.) and Jon Tester (D-Mont.) introduced VFW-supported legislation to expand benefits for all veterans who were stationed in military bases in Thailand during the Vietnam War. Currently, presumptive disability compensation benefits for Agent Orange-related health conditions are only afforded to veterans who served in Thailand who had certain military occupations or were required to work along the perimeter of the base. Read the [bill](#) or a [summary](#) of the bill.



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## **H.R. 1963, Expanding Care for Veterans Act**

Like other Americans, veterans have grown increasingly interested in complementary treatment options to enhance wellness or address symptoms that are not well managed with conventional medicine. A 2014 study found that service members experienced chronic pain at a much higher rate (44% post combat) than the general population (26%). Veterans were also far more likely to be prescribed opioids compared to non-veterans (15% v. 4%) to manage their chronic pain. Many veterans view complementary and integrative treatment approaches as a means to limiting or avoiding the use of opioids and other pharmaceuticals that may have adverse side effects.

Based on these findings, Representative Julia Brownley (CA) introduced comprehensive legislation aimed at expanding veterans' access to complementary and integrative medicine in VA medical centers.

The Expanding Care for Veterans Act, H.R. 1963, would:

- Require VA to develop a plan for expanding delivery and integration of complementary medicine within the Department;
- Create a 3-year pilot program to add complementary and integrative practices to the existing health benefits package in at least 15 VA medical centers and evaluate the effectiveness of these interventions for veterans with mental health issues, chronic pain and other debilitating conditions;
- Require a study to determine barriers to veterans' receipt of and administrators and clinicians' delivery of complementary and integrative health practices furnished by or through VA; and
- Create a grant program to complement services of individuals receiving counseling through VA's Vet Center programs.

Please write your Representative today to urge co-sponsorship and enactment of H.R. 1963. As always, thank you for your advocacy by participating in the DAV CAN (Commander's Action Network).

## **Take Action**



## **MIA Update**

The Defense POW/MIA Accounting Agency has

announced the identifications of two American servicemen who had been missing and unaccounted-for from WWII. Returning home for burial with full military honors are:

**Marine Corps Platoon Sgt. George E. Trotter** was a member of Company E, 2nd Battalion, 8th Marines, 2nd Marine Division. In November 1943, his unit landed against stiff Japanese resistance on the small island of Betio in the Tarawa Atoll of the Gilbert Islands. Over several days of intense fighting at Tarawa, approximately 1,000 Marines and Sailors were killed and more than 2,000 were wounded, while the Japanese were virtually annihilated. Trotter died on the first day of the battle, Nov. 20, 1943. Interment services are pending. [Read more about Trotter here.](#)

**Marine Corps Staff Sgt. Wesley L. Kroenung** was a photographer with Headquarters Company, Headquarters and Service Battalion, Fifth Amphibious Corps, temporarily assigned to the 2nd Marine Division. In November 1943, the unit he was assigned to landed against stiff Japanese resistance on the small island of Betio in the Tarawa Atoll of the Gilbert Islands. Over several days of intense fighting at Tarawa, approximately 1,000 Marines and sailors were killed and more than 2,000 were wounded, while the Japanese were virtually annihilated. Trotter died on the first day of the battle, Nov.

20, 1943. He was reportedly buried in the 2nd Marine Division Cemetery #4. Interment services are pending.  
[Read more about Kroenung here.](#)



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