



Veterans-For-Change Newsletter

A Voice of the Veterans

Week Ending Sunday, June 30, 2019

Volume 10, Issue 26



This-N-That

When it comes to either the House or Senate it never fails where one party can and does change a few words here and there and what most would be considered "harmless" and most people just don't realize those few words, phrases or paragraphs are not so simple, they are backdoors for businesses to go around the law once passed, or government agencies will use those same words, phrases and paragraphs to avoid paying out benefits and medical care.

A good example would be when Congress presented legislation to prevent credit card companies from arbitrarily change your credit rate from a nominal 9.5% to a sky rocketed rate of 29.95% and when credit card companies found this little hole they all jumped on the band wagon and all of a sudden, and no matter how good your credit is or was, your interest rate went to the maximum rate allowable by law and nothing in the world you could do about it

Some holes or loop holes as they are referred to often make financial gains for those in government.

Another example would be if you file a claim, and it takes for example 5 years for you to receive approval, you're entitled to back pay from the date of the claim.

But that's not true for widows in most cases.

Thirteen years ago I had to fight tooth and nail to get ALS (Amyotrophic Lateral Sclerosis or Lou Gehrig's disease) approved and put on the list of illnesses covered, and when it passed some 4,000

widows were elated, until they got their first pay and back pay was not granted because the bill was not grandfathered in.

This is why it's truly important for people to stay up on the various pieces of legislation and be very vocal about what ever part or parts are incorrect or limited, or another loop hole.

Politicians are also notorious for drafting pieces of legislation they know damn well won't clear committee and if by chance it does it won't get to the floor for a vote, and they do this so they can say "hey I listened to you and presented the legislation you need or wanted and get you off their backs and also to gain your re-election vote.

So when election time comes around, don't chase any of the carrots being dangled in front of you.

For the past three days, our website has been on and off line and I do apologize and I know the problem is being worked on to bring us resolution. We know it's partially a matter of data storage was extremely low which then set off another chain of events, but do keep checking back for it

to come back on-line soon.

I know I did add another 116 new PDF documents and had many more ready to get loaded, but that's on stand by now till the storage problem has been updated.

We're still a ways off from done when it comes to Veteran legislation, and two more have been added. So please, keep up the work, sending out the pre-written E-Mails every week, calling your reps every week and asking their support, then stand back and watch as the change happens!

We wish each and everyone a happy 4th of July, but please remember those who made sure you still can celebrate!

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



Military-Veterans Advocacy Statement Upon the Signing of the Blue Water Navy Bill

President Trump yesterday signed the Blue Water Navy Vietnam Veterans Act of 2019 into law, finally bringing Congressional recognition to 90,000 veterans who served in the bays, harbors and territorial sea of Vietnam during that conflict. Unfortunately, inartful wording on the part of House Chairman Mark Takano (D-California) may have cut off benefits for up to 55,000 additional veterans who served offshore Vietnam but outside the territorial sea. This includes a number of carrier sailors who were exposed by the surging waters of the Mekong River that discharged into

the South China Sea.

The legislation was made possible by the court victory in the landmark case of Procopio v. Wilkie which was brought by Military-Veterans Advocacy on behalf of Navy veteran Al Procopio. The Procopio case required the VA to provide benefits to the veterans out of existing appropriations and to do so immediately. Conversely, the Takano bill forced an increase in veteran home loan guarantee fees while delaying implementation until June of 2020. More importantly, a pathway to benefits for those who served just outside the territorial sea may have been cut off by the poor draftsmanship.

Military-Veterans Advocacy is saddened and disappointed by the rush to claim credit by the larger veterans groups such as the Veterans of Foreign Wars, Disabled American Veterans and Vietnam Veterans of America. These groups provided nothing more than lip service during the ten year campaign to restore benefits. The credit belongs to a band of volunteers within the Blue Water Navy Vietnam Veterans Association. Led by Mrs. Susie Belanger, a Gansevoort, New York

housewife and former Navy spouse, this group of disabled former sailors spearheaded the successful effort. Military-Veterans Advocacy was proud to ally with these citizen sailors who selflessly devoted time and money to this effort.

The battle for benefits for the Blue Water Navy should have ended with the signing of the legislation. Unfortunately it did not. We will continue to work with the Blue Water Navy Vietnam Veterans Association to win benefits for every veteran exposed.

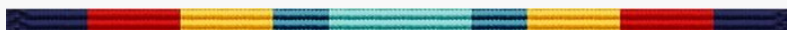
John B Wells
Commander USN (Ret)
Executive Director



Blue Water Navy Act Now Law

The president signed the VFW-championed Blue Water Navy Vietnam Veterans Act of 2019 into law Tuesday evening. It now restores VA benefits to thousands of Vietnam veterans who had their disability eligibility taken away in 2002 after arbitrary regulatory changes. For Korean DMZ

veterans, it provides an earlier start date to encompass the timeframe when various defoliants were tested — from April 1, 1968, to Sept. 1, 1967. The new law expands benefits to children born with spina bifida due to a parent’s exposure in Thailand, coverage that already exists for the children of Vietnam and Korean DMZ veterans, and it requires the VA to report on research being conducted on a broad range of conditions possibly related to service in Southwest Asia. “The VFW is proud to have helped lead the charge to return benefits to these deserving veterans and to expand existing benefits to dependent children,” said VFW National Commander B.J. Lawrence. The VA has yet to update its webpages to reflect the new law, but veterans and their families can still learn more about VA benefits associated with [Agent Orange exposure](#), and about [spina bifida birth defects related to exposure](#). For assistance in filing claims, [find an accredited VFW service officer](#).





Allow Active Duty to Sue Military for Medical Malpractice (H.R. 2422)

Congresswoman Jackie Speier (CA), Chair of the House Armed Services, Military Personnel Subcommittee, has introduced the “Sergeant First Class Richard Stayskal Military Medical Accountability Act” (H.R. 2422), which would allow military service members to sue the Department of Defense for instances of medical malpractice unrelated to their military duties. Currently, the Feres Doctrine prevents service members from having their day in court when malpractice by

military health care providers unconnected to combat results in severe injury or even death.

The Feres Doctrine was established in 1950 from *Feres v. United States*, 340 U.S. 135 (1950), in which the Supreme Court of the United States held that the military is not liable under the Federal Tort Claims Act for injuries to members of the armed forces sustained while on active duty resulting from the negligence of others in the armed forces. The practical effect is that the Feres doctrine effectively bars service members from collecting damages from the United States Government for personal injuries experienced in the performance of their duties. It also bars families of service members from filing Wrongful Death actions when a service member is killed. This exclusion does not extend to killed or injured family members, so a spouse or child may still sue the United States for tort claims.

By creating an exemption to the Federal Tort Claims Act to allow service members to sue the military for medical malpractice, the bill would give service members the same right as the fellow citizens they serve and protect.

Members are urged to use the **ACTION CENTER** to ask their Representative to support this bill.



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



Vets With 'Bad Paper' Discharges Would Get Better Appeal Options Under Bill

Veterans appealing their less-than-honorable discharges could have more opportunity to influence the outcome of their reviews under draft legislation being considered in the House and Senate. Both chambers' defense policy bill proposals contain provisions that would change the discharge appeals process for veterans fighting their general or other-than-honorable discharges. Under the proposed Senate fiscal 2020 National Defense Authorization Act, service discharge review boards would be required to consider all evidence, including testimony from friends and colleagues, news articles or any supporting documentation in addition to medical records submitted by veterans when weighing a veteran's appeal. Read more on [here](#).



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.

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](https://www.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

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

AMVETS GROUP

VETERANS SOCIAL GROUP

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

AMERICANS FOR SOVEREIGNTY



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





President Trump to Host His Military Parade on July 4

Interior Secretary David Bernhardt gave details June 19 on a makeover of the traditional Fourth of July celebration on the National Mall in Washington, D.C. to accommodate a speech by President Donald Trump at the Lincoln Memorial. A day after Trump officially began his re-election campaign in Florida, Bernhardt said the July 4 events will include the military parade Trump has wanted since being impressed by the July 14 Bastille Day festivities in Paris he attended in 2017. In a release, Bernhardt, whose department includes the National Park Service, said the National Independence Day Parade along Constitution Avenue NW from 7th Street to 17th Street NW will feature "marching bands, a fife and drum corps, floats, military units, giant balloons, equestrian and drill teams and more" in a "red, white and blue celebration of America's birthday!" Read more [here](#).



H.R. 2359, the Whole Veteran Act

Growing awareness and acceptance of complementary and integrative practices has interested more veterans in obtaining these services, especially if they struggle with disorders, such as chronic pain, that are resistant to more conventional medical treatment. Because of the growing opioid epidemic, many veterans are also increasingly concerned about using opioids to manage chronic pain and want, or are told by medical providers, to seek safer alternatives.

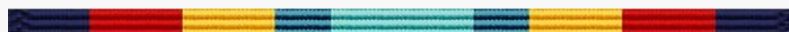
While VA has made some complementary health services available to veterans, DAV is aware of significant limitations on the use and availability of services. VA's guidance on complementary or integrative health practices encourages, but does not require, VA medical centers to make such services available to veterans.

HR 2359, the Whole Veteran Act, would require VA to report on access and availability of several complementary and integrative medicine practices, including: massage; chiropractic services; acupuncture; meditation; yoga, Tai Chi or Qi gong; and Whole Health group services.

DAV supports this measure to advance VA's Whole Health transformation in accordance with DAV Resolution 277, which supports the provision of comprehensive VA health care services to enrolled veterans, and specifically calls upon Congress to provide funding to guarantee access to a full continuum of care, from preventive through hospice services, including alternative and complementary care such as yoga, massage, acupuncture, chiropractic and other non-traditional therapies.

The House has recognized the importance of this legislation and approved it by voice vote on May 21, 2019. Ask your Senator to introduce a companion bill or push to move the House bill to the Senate floor for approval using the letter prepared below or drafting your own.

TAKE ACTION



**Find Your Next Mission - Liberty
National Life is Hiring Veteran Talent**

LNL is looking for leaders, entrepreneurs, and high achievers - let your [military experience shine](#).



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



Court Decision Paves Way to Faster Appeal Decisions for Some Vets

A recent ruling by the U.S. Court of Appeals for Veterans Claims could accelerate adjudication of thousands of veterans' disability claims appeals, but only for cases awaiting certification from the VA. The court ruled June 13 that VA needed to move forward on certifying the claims of veterans who have waited more than 18 months for the designation, saying the affected veterans already have faced delays that were "particularly intolerable because they consist of nothing but waiting in line." The court ordered VA to determine who has waited 18 months or longer for certification and identify them by Aug. 12. VA must then certify their appeals by Oct. 11. Read more [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



Bill Would Require Spanish Translations on All VA Fact Sheets

Addressing an audience at a House Veterans Affairs Committee hearing June 20 in Spanish, Committee Chairman Rep. Mark Takano, D-California, pressed for legislation that would require all VA fact sheets to be published in English and Spanish. A bill sponsored by Rep. Gil Cisneros, D-California, would do that. Takano, whose Riverside area district is 60% Hispanic, said he is concerned that the fact sheets and training modules for the Mission Act, the legislation that introduced new urgent and community care programs for veterans earlier this month, were only printed in English. This caused a delay in implementation of the act in Puerto Rico, as employees needed to translate and reproduce the materials on their own when a contracted firm's translations proved inadequate. Read more [HERE](#).



Women Veterans Taskforce Roundtable

VFW Department of Maryland Quartermaster Denise Perry attended a [Women Veterans Taskforce](#) roundtable this week to discuss how the VFW and other veterans organizations learn from and advocate for women veterans. Members of Congress asked representatives from veterans organizations what they believe is needed to ensure women veterans have their voice represented in the fight to improve veteran benefits. Perry discussed the need to ensure servicewomen know about the benefits that come with joining veteran service organizations such as the VFW. She discussed how the VFW provided the comradery she needed after leaving military service and the work the VFW does to improve care and service for women veterans. [Learn more about the VFW's advocacy efforts for women veterans.](#)



**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



**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



Tuskegee Airman Who Flew 142 WWII Combat Missions Dies at 99

World War II pilot Robert Friend, one of the last original members of the famed all-black Tuskegee Airmen, has died at the age of 99. Friend's daughter, Karen Friend Crumlich, told The Desert Sun her father died June 21 at a Southern California hospital. Born in South Carolina on 1920's leap day, Friend flew 142 combat missions in World War II as part of the elite group of fighter pilots trained at Alabama's Tuskegee Institute. The program was created after the NAACP began challenging policies barring black people from flying military aircraft. Read more [HERE](#).





S. 555 and H.R. 1377, Mark Takai Atomic Veterans Healthcare Parity Act

Senator Tina Smith (MN) and Representative Grace Meng (NY), introduced companion bills, S.555 and H.R. 1377, the Mark Takai Atomic Veterans Healthcare Parity Act.

The bill is named after the late Hawaii Congressman Mark Takai, a Veteran of the U.S. Army and Hawaii Army National Guard who passed away in 2016 and was the original sponsor of the bill in the House of Representatives.

From 1951 to 1959, the United States conducted forty three nuclear tests, resulting in more than 30 megatons of TNT nuclear testing on the Enewetak Atoll. In March 1977, the United States began decontamination of Enewetak and built a concrete dome to deposit radioactive soil and debris.

Approximately 6,000 military service members of the United States Department of Defense (DOD) participated in the cleanup project. The decontamination efforts concluded in 1980.

VA only recognizes those Veterans who participated in nuclear testing on Enewetak Atoll from 1951 to 1959 as participating in a radiation risk activity. Current statutes regarding presumptive service connection for radiation exposure defines a radiation-exposed Veteran as a Veteran that, while on active duty, participated in a radiation risk activity.

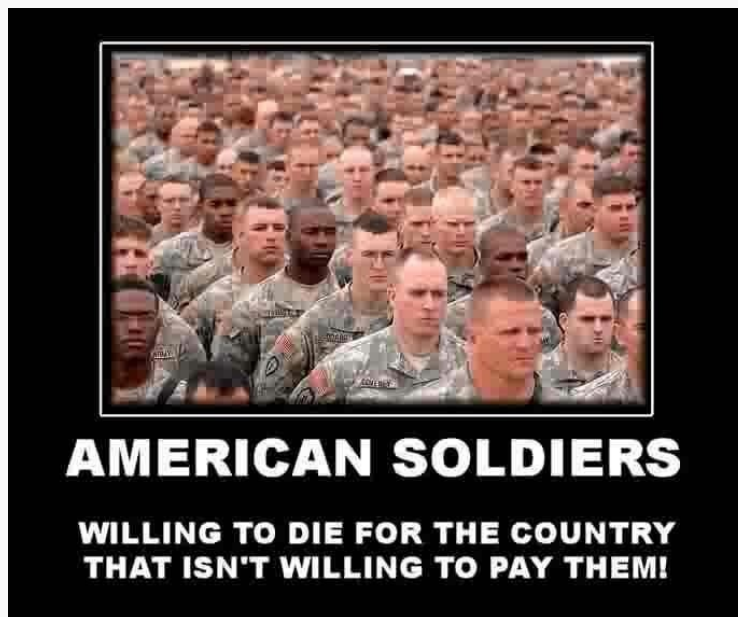
S.555 and H.R.1377 will expand recognized radiation risk activities to include the cleanup of Enewetak Atoll from January 1, 1977, to December 31, 1980. These bills will provide presumptive exposure to thousands of Veterans who participated in the testing and clean-up and who were previously excluded as radiation exposed Veterans.

DAV supports this legislation as it is in concert with DAV Resolution No. 090. Please use the prepared electronic letter or draft your own to urge

your Senators and Representative to support and cosponsor S.555 and H.R.1377.

Your commitment and advocacy 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



**Senate Passes the NDAA for FY
2020**

Yesterday, the Senate passed S.1790, National Defense Authorization Act for Fiscal Year 2020 (NDAA) yesterday by an 86-8 vote. The bill provides \$750 billion in total spending, a 3.1 percent pay raise for our 2.15 million uniformed service members, and reforms to the Military Housing Privatization Initiative to improve quality of life for military families. Ninety-three bipartisan amendments were also adopted which included an amendment allowing the families of the 1983 Marine Barracks bombing victims to access \$1.68 billion in Iranian funds currently held by Clearstream. Unfortunately, Sen. Doug Jones (D-Ala.) amendment to end the Widow's Tax was blocked by Senate leadership yesterday morning. Read more [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.

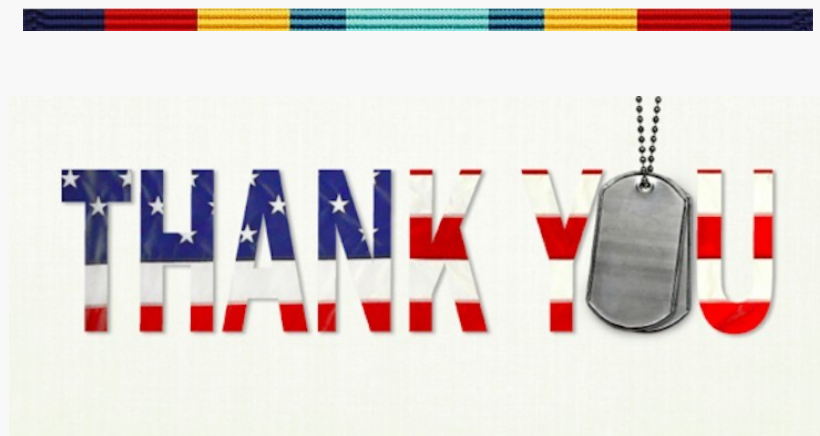
VA reports that younger Veterans demonstrate high usage rates of VA mental health care services and data shows women Veterans are especially likely to make intensive use of such services. In a recent study, a third of Veterans indicated an interest in access to child care services and 10 percent reportedly 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.

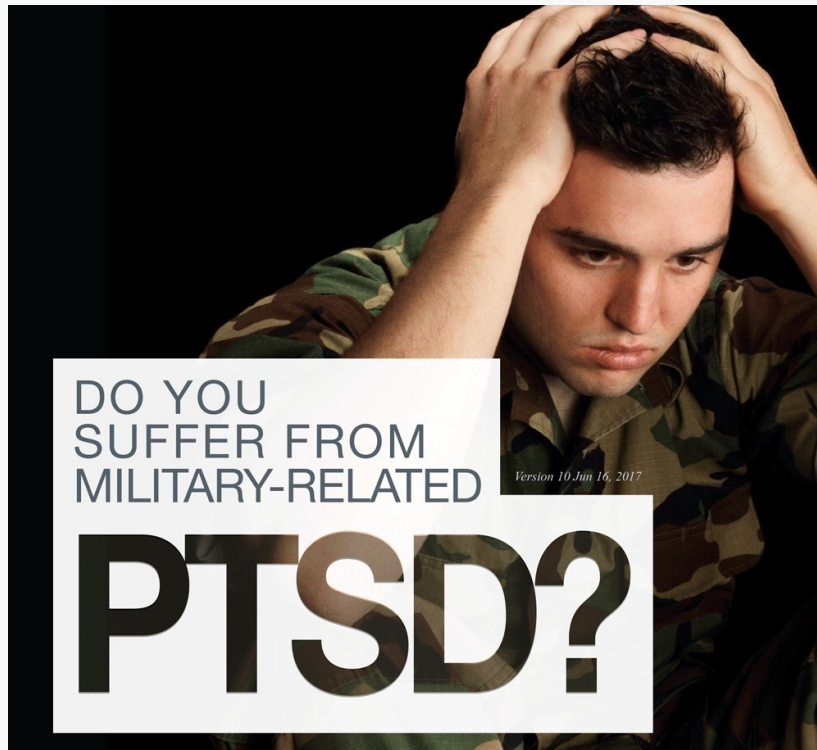
TAKE ACTION



**911-Style Veterans Suicide Hotline
Pushed Forward**

Sen. Joe Manchin, D-West Virginia, wants to accelerate creation of a three-digit, 911-style suicide hotline to ensure that veterans have easier access to the existing Veterans Crisis Line in an emergency. Manchin said June 19 he will introduce legislation that would require the Federal Communications Commission and the Department of Veterans Affairs to move forward on a three-digit number for veterans to call. While the National Suicide Hotline Improvement Act of 2018 called for a study on the effectiveness of a three-digit code — with a report due to Congress by the end of August — Manchin said he "remains concerned about the lack of urgency on the issue" and he wants to see assurances that a yet-to-be-determined number, now known as N911, will be implemented. Read more [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 post traumatic 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



TRICARE Beneficiary Bulletin #507

Listen to this week's podcast to hear about:

- Healthy Tips for Men (Men's Health Month)
- TRICARE Costs Tools
- Sun Safety Tips

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





S. 980, the Homeless Veterans Prevention Act of 2019

S.980, the Homeless Veterans Prevention Act of 2019, authorizes the VA to provide per diem payments for furnishing care to the dependents of certain homeless veterans, authorizes partnerships to provide legal services to homeless veterans and those at risk of homelessness, expands VA's authority to provide dental care to homeless veterans, repeals the sunset on counseling services for homeless veterans, and extends the financial assistance for supportive services for very low-income veteran families in permanent housing. In addition, this legislation would require the Government Accountability Office (GAO) to study VA's Homeless Veterans Programs and leaders assess whether these programs are meeting the needs of veterans.

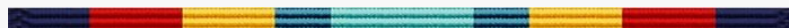
DAV supports this legislation in accordance with

DAV Resolution Nos. 291 and 173, both of which call for greater assistance for homeless veterans. VA has helped thousands of homeless veterans through a variety of federal, local and nonprofit resources. The programs supported by this legislation increase veterans' ability to fully recover from the conditions that led to their homelessness, and also helps prevent thousands of veterans and their families from becoming homeless.

Please write your Senators to ask them to support this important legislation by cosponsoring it. You may draft your own letter or use the prepared letter.

Thank you for participating in the DAV Commander's Action Network.

TAKE ACTION





**Our values
match yours.**



www.veterans-for-change.org



As GI Bill Marks 75th Anniversary, Some Call for Expansion

In marking the 75th anniversary of the original GI Bill, a top Department of Veterans Affairs official on June 19 pointed to a glaring difference between the post-World War II and post-9/11 versions — the small-business option. Paul Lawrence, head of the Veterans Benefit Administration, said, "One of the things I get asked about wherever I go is: 'Why can't I use the GI Bill to start a business? Why can't I do that?'" Previous efforts in Congress to expand benefits under the current GI Bill to allow veterans to use education funds for small-business startups have died in committee. Read more about the idea [here](#).



H.R. 2201, Include Military Installations in Thailand as exposed to Agent Orange

On April 10, 2019, Representative Bruce Westerman (AR) introduced H.R. 2201, a bill that would concede Agent Orange exposure to all Veterans who served at military installations in Thailand during the Vietnam Era for purposes of determining their eligibility for VA benefits.

While VA's internal manual acknowledges herbicide exposure for specific military occupational specialties on the perimeter of eight Thai Royal Air Force Bases, statutes and regulations do not automatically recognize Veteran exposure to herbicides while serving in Thailand during the Vietnam Era.

H.R. 2201 would automatically concede Agent

Orange exposure for all Veterans who served at military installations in Thailand during the Vietnam Era, regardless of the base, duty on the perimeter or military occupational specialty. As a result, the presumptive diseases currently associated with Agent Orange exposure would be applicable to all Veterans who served at military installations in Thailand during the Vietnam Era. Consistent with DAV Resolution No. 174, DAV supports the concession of exposure for Agent Orange to Veterans who served at military installations in Thailand; this will allow for presumption of service connection for the recognized diseases. Please use the prepared electronic letter or draft your own to urge your Member of Congress to support and cosponsor H.R. 2201.


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



Legislation to Give Student Veterans Break Pay Introduced

This week Senators Stabenow (D-Mich.) and Roberts (R-Kan.) introduced the VFW supported S. 1946, Student Veterans Housing Act which would extend housing payments for student veterans during certain breaks between semesters. This proposed change would allow student veterans to focus on their educational goals by reducing the burden of housing costs. The VFW thanks Senators Stabenow (D-Mich.) and Roberts (R-Kan.) for their bipartisan efforts to enhance the lives of student veterans. [Read the Press Release.](#)





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



VA to Reduce Rates for Servicemembers' Group Life Insurance

VA will be reducing the monthly premium for Servicemembers' Group Life Insurance (SGLI) starting July 1, 2019. The monthly premium rates will fall from 7 cents per \$1,000 of insurance coverage to 6 cents per \$1,000 of insurance coverage. This will mean a decrease of \$4.00 per month for any service member who has elected the full \$400,000 of SGLI coverage. Service members who have elected Family SGLI coverage will see a monthly premium decrease in the range of 10 percent to 32 percent; the age of their spouse and amount of coverage effects their premiums. Reservists who do not receive pay due to a number of reasons, will start to be billed at the new rates in July 2019. [Learn more.](#)



Up to \$484k Financing with Your VA Loan Benefit

Your VA Loan Benefit is ready to use and worth up to \$484k financing. Don't waste this great benefit. [Find lenders now.](#)



Update Your Information on the Airborne Hazards and Open Burn Pit Registry

Service members and veterans who have already signed up for the registry should make sure that their contact information, phone number, address, and email are up-to-date. If you have not already signed up for the registry and you have served in one of the eligible areas, please [learn more about the registry.](#)





H.R. 2200, the Keeping Our Promises Act

On April 10, 2019, Representative Bruce Westerman (AR), introduced H.R. 2200, the Keeping Our Promises Act. This legislation would add multiple diseases to the presumptive disease list for Agent Orange exposure.

In the Veterans and Agent Orange update in 2016, the National Academy of Medicine (NAM) committee concluded there was compelling evidence for adding bladder cancer and hypothyroid conditions to the presumptive disease

list. Further, the study clarified that Vietnam Veterans with "Parkinson's-like symptoms," but without a formal diagnosis of Parkinson's disease, should be considered under the presumption of Parkinson's disease.

In November 2017, the VA issued a press release noting they were exploring these new presumptive conditions related to herbicide exposure.

However, to date, the VA still has not added the NAM recommended presumptive diseases, or provided an update to its 2017 press release.

In the Veterans and Agent Orange: Update 11, released in November 2018, the NAM concluded that there is sufficient evidence of an association between Agent Orange and the development of hypertension. The report elevated hypertension from suggestive evidence to sufficient evidence of a link. The VA has not taken any action on adding hypertension since the November 2018 report.

H.R. 2200 will add bladder cancer, hypothyroidism, "Parkinson's-like symptoms," and hypertension to the presumptive disease list for Agent Orange exposure. All four of these

diseases are recommended for inclusion by the National Academy of Medicine.

DAV strongly supports H.R. 2200 as it is aligned with DAV Resolution No. 174, which calls for the addition of these presumptive diseases. Please use the prepared letter or draft your own to urge your Representatives to support and cosponsor H.R. 2200.

Stand with us and support the addition of these diseases as presumptive to Agent Orange. Thank you for your continued support of the DAV Commander's Action Network.

TAKE ACTION



Commemorative Flag Displayed on USS Fitzgerald

The crew of the guided missile destroyer USS Fitzgerald unveiled a commemorative flag honoring the Sailors who died in a collision in the Sea of Japan two years ago. The flag was designed by current crewmembers, and features the call to “Don't Give Up The Ship” along with the names of the seven sailors who died on June 17, 2017. The flag was raised after morning colors on the anniversary of the collision and as a part of a remembrance ceremony. The National Ensign and the Union Jack were also raised on the ship for the first time since November 2017. The USS Fitzgerald is currently being restored and is expected to return to the fleet after repairs are complete. It left dry dock in April 2018 and was successfully launched and moored pier side at the Huntington-Ingalls shipyard. Read more at Navy.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.

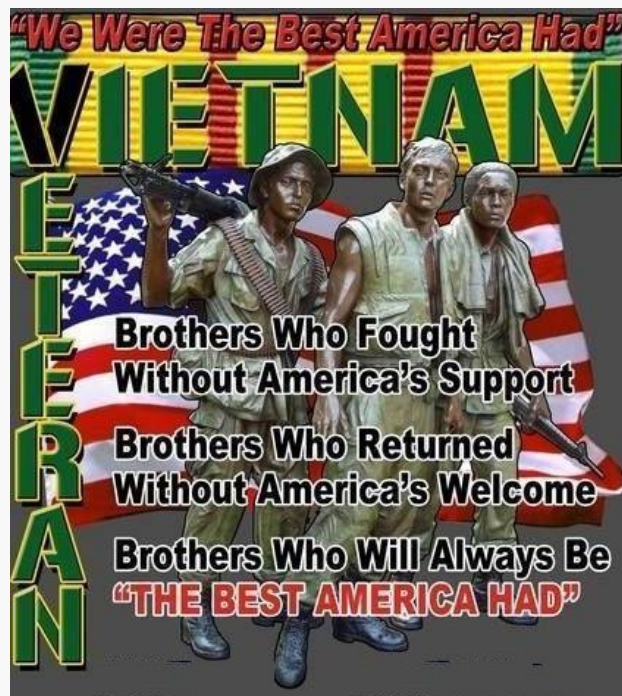
Upon the retiree's death, the SBP annuity is paid monthly to eligible beneficiaries; however, if a surviving spouse is also entitled to DIC, the SBP benefit is reduced by the amount of the DIC benefit (currently \$1,283.11 per month). In general, when DIC benefits are payable but the monthly rate is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

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1. [A Growing Epidemic: Suicide Among Veterans](#)
2. [Appeals Management Office unveils new path to speed up appeals decisions](#)
3. [Behavioral Health Technicians: The Unsung Heroes of Training Programs](#)
4. [Bill designed to help 'blue water' sailors may wind up hurting many of them](#)
5. [Falling enrollment in VA's caregiver program raises concerns](#)
6. [How the Veterans Affairs Department is 'Hardwiring' Customer Service into Everything](#)
7. [How to Service Connect Chronic Fatigue Syndrome](#)
8. [Learn About Making statements on Your VA claim](#)
9. [MESSAGE FROM VA Secretary Robert Wilkie – "Fact check" inaccuracies in a recent news](#)

article”

10. Motorcyclists give back to Veterans who sacrificed so much for country
11. Stress relief a touch screen away
12. VA now transplanting kidneys that are positive for hepatitis C
13. Veterans walk out of meeting with Ocasio-Cortez after she bashes US foreign policy
14. Vietnam Voices: 'We got even more Agent Orange than guys who were drinking the water on the land'

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Reduce Your Out-of-Pocket Costs with a Tricare Supplement

Get a Tricare supplement that pays your cost shares and can pay 100% of covered excess charges. [Get valuable coverage now.](#)





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.

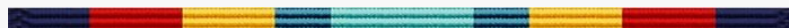
DAV supports complementary and integrative medical practices such as acupuncture as part of a comprehensive medical benefits package under DAV Resolution No. 277. Veterans have increasingly sought such treatments as a means of providing relief from conditions that have not been effectively addressed 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



House Veterans Affairs Committee statement on passage of H.R. 299

Chairman Takano, Ranking Member Roe
Statement on Passage of Historic Blue Water
Navy Vietnam Veterans Act

WASHINGTON, D.C. -- Today, the House Committee on Veterans' Affairs Chairman Mark Takano and Ranking Member Dr. Phil Roe issued the following statement after the Blue Water Navy Vietnam Veterans Act of 2019, H.R. 299, was officially signed into law:

"Today, we are proud to say that the tens of thousands of Blue Water Navy veterans can rest easy tonight knowing that the benefits that they earned while serving off the coasts of Vietnam will

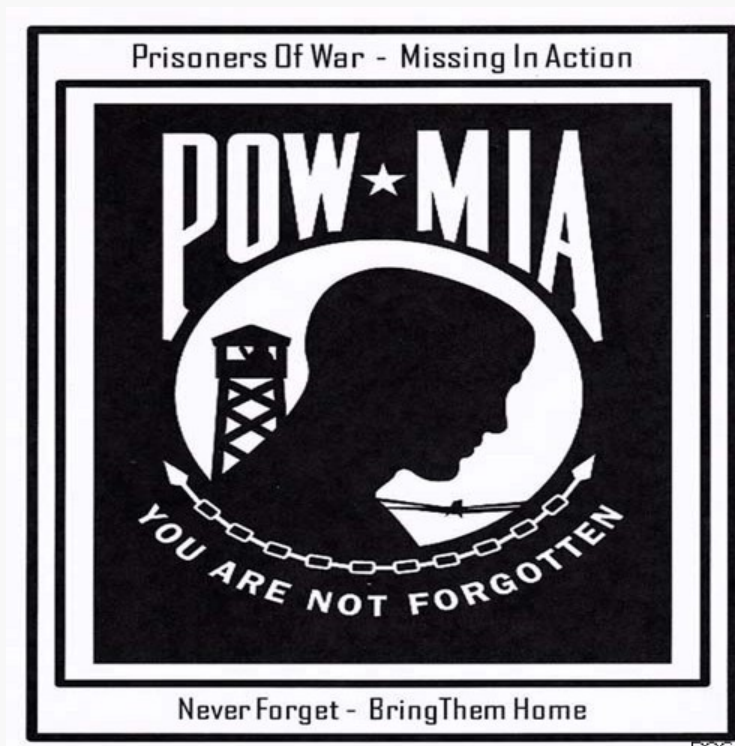
be guaranteed. The Blue Water Navy Vietnam Veterans Act of 2019 is finally law and is the culmination of a decades-long bipartisan effort on Capitol Hill to properly recognize these veterans' claims and grant them the justice they have waited for. This day would not be possible without the leadership and unwavering commitment of our House and Senate colleagues, countless veteran voices, and the Veterans Service Organizations behind them including the Vietnam Veterans of America, Disabled American Veterans, the Veterans of Foreign Wars of the United States, The American Legion, AMVETS, Fleet Reserve Association, Military Officers Association of America, Military Order of the Purple Heart, and Paralyzed Veterans of America. We are so grateful to each of them and look forward to continuing our work together to ensure that every one of those who have bravely fought for our country is afforded the care, benefits, and services that they deserve."

Background:

The Blue Water Navy Vietnam Veterans Act of 2019 will extend benefits to servicemembers that

served in the territorial waters off the coast of Vietnam and were exposed to Agent Orange. This was the first bill Chairman Takano introduced this Congress after a similar bill was passed unanimously in the House of Representatives last Congress but stalled in the Senate. This legislation will ensure tens of thousands of Vietnam veterans finally get the benefits they've earned and deserve.

View H.R. 299 [HERE](#)





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

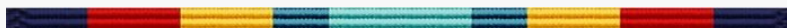
these cases thereby eliminating the disparity between awards for MST-related PTSD claims and other PTSD claims.

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





H.R. 2568, the Vietnam Veterans Liver Fluke Cancer Study Act

On May 7, 2019, Representative Lee Zeldin (NY) introduced H.R. 2568, the Vietnam Veterans Liver Fluke Cancer Study Act.

This bill would direct the Secretary of Veterans Affairs, in consultation with the Director of the Centers of Disease Control and Prevention of the Department of Health and Human Services, to conduct an epidemiological study on the prevalence of cholangiocarcinoma in veterans of the Vietnam era. H.R. 2568 would require the Secretary to provide a report of the study within one year of completion.

Bile duct cancer (cholangiocarcinoma) is a cancer of the biliary duct system, which includes the gallbladder, bile ducts, and certain cells inside the liver. One risk factor for bile duct cancer is past

infection with tiny parasitic worms called liver flukes, which are found in the fresh waters of Southeast Asia. Veterans who ate raw or undercooked freshwater fish during their service in Southeast Asia, such as Vietnam veterans, might have been infected. Once eaten, the liver flukes grow to adulthood inside the human biliary duct system. The irritation and scarring caused by liver fluke infection can lead to bile duct cancer.

Currently, there are no available studies to show that bile duct cancer occurs more often in Vietnam veterans than in other groups.

DAV strongly supports H.R. 2568 as it will help determine if this Vietnam veteran environmental exposure can be linked to bile duct cancer. This legislation is in accord with DAV Resolution No. 090.

Please use the prepared electronic letter or draft your own to urge your Representative to support and cosponsor H.R. 2568. 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



**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



Bipartisan Veterans Bills Pass the House

Before adjourning for the 4th of July week, the House passed the BRAVE Act (H.R.2109) and H.R.2196, which is a bill to reduce the credit hour requirement for the Department of Veterans Affairs (VA) STEM (Science, Technology, Engineering, and Math) Scholarship program. The bills are sponsored by Reps. Kathleen Rice (N.Y.) and Andy Barr (Ky.).

These bills are intended to encourage more veterans to pursue advanced degrees in high-need fields of study and incentivize companies to hire more veterans. H.R.2109 would encourage companies to hire veterans by allowing the VA to

give preference to prospective contractors based on the number of veterans they employ. H.R2196 would ensure that the scholarship program Congress provided for student veterans in STEM programs can be used in the way Congress intended and more importantly, ensure that student veterans in these important degree programs receive the support they need to pursue their dreams. The proposals now go to the Senate for further consideration.

Source: FRA



1. [C&S Wholesale Grocers, Inc. Issues a Voluntary Recall For a Variety of Perishable Products Sold at Two Long Island, New York Target Stores Located in Central Islip and Commack](#)
2. [Central Aquatics Recalls Aqueon Betta Food \(.95 oz Jar\) Because of Possible Salmonella Health Risk](#)
3. [Class 1 Device Recall enFlow IV Fluid Warmer](#)

4. FDA Issues Warning Regarding Cybersecurity Risks for Certain Medtronic Insulin Pumps
5. Keurig Dr Pepper Announces Voluntary Withdrawal of Unflavored Peñafiel Mineral Spring Water that Does Not Meet FDA Bottled Water Quality Standards
6. Macleods Pharmaceutical Limited Issues Voluntary Nationwide Consumer Level Recall of Losartan Potassium 50mg and Losartan Potassium/Hydrochlorothiazide combination Tablets 50mg/12.5mg, 100mg/12.5mg and 100mg/25mg due to detection of NMBA (N-Nitroso-N Methyl-4-aminobutyric acid) Impurity
7. MedWatch: The FDA Safety Information and Adverse Event Reporting Program
8. Perrigo Issues Voluntary Recall For Parent's Choice Advantage Infant Formula Milk-Based Powder With Iron
9. Recall Issued On Meat Shipped To 2 Long Island Target Stores
10. Teleflex Incorporated Announces Worldwide Voluntary Recall of Select Hudson RCI® Sheridan® Endotracheal Tubes
11. Teleflex Medical Recalls the Hudson RCI Sheridan and Sheridan Endotracheal Tubes Due to Risk of the Sheridan Connector Disconnecting

from the Breathing Circuit

12. Teleflex recalls 6M endotracheal tubes linked to two deaths

13. Vyaire Medical Recalls the enFlow Fluid Warming System Disposable Cartridges Due to Potential Risk of Exposure to Elevated Levels of Aluminum Exposure to Patients

14. Walmart Infant Formula Recall Issued Due to Risk of Metal Contamination



Senate NDAA Action

The Senate considered a small number of floor amendments for the Senate version of the FY2020 National Defense Authorization Act (NDAA-S.1790) and passed the bill. Debate on passage of the bill was blocked when Senate Democrats demanded that the first amendment to be considered had to be an amendment limiting Presidential wars powers. An agreement was finally reached and the Senate passed the bill before Congress goes on recess the week of July 4th.

The bill authorizes the Defense Department to spend \$750 billion in the next fiscal year starting

October 1, 2019. There are more than 600 pending floor amendments including an amendment (#415) introduced at FRA's request that expands concurrent receipt. The Senate did not consider the concurrent receipt amendment or an amendment to repeal the SBP/DIC offset also known as the Widow's Tax. Unlike the House version, the Senate version allows proposed drastic cuts to military medical staff. Other provisions in the bill include:

- Increasing active duty pay 3.1%, which keeps pace with civilian pay increases.
- Providing \$40 million in impact aid funding for schools with large military populations.
- Expanding active duty parental leave benefits.
- Beefing up oversight of privatized military housing.
- Providing military justice provisions aimed at better prosecuting sexual assault.
- Increasing military construction spending for military housing and day care centers.
- Increasing employment opportunities for military spouses.

Members are urged to use the FRA Action Center

to ask their legislators to support the concurrent receipt amendment on the House Defense Authorization bill (H.R.2500), the SBP/DIC offset repeal, and support a delay in cuts to military medical staff until a study can determine the impact on the system.

The House is scheduled to have floor action to also pass its version of the NDAA (H.R.2500) the week of July 7, 2019. Once both chambers pass their version of the NDAA, a conference committee will be appointed to resolve the differences between the two bills. Once that occurs, both chambers will vote on the final bill and if approved by both, it will go to the President to be signed into law or be vetoed.

Source: FRA



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



President Trump Signs Agent Orange Bill into Law

President Donald Trump signed the Blue Water Navy Vietnam Veterans Act (H.R.299) into law. Last year, the House unanimously passed the bill only to have it stall in the Senate Veterans Affairs Committee. The U.S. Court of Appeals for the Federal Circuit in Washington D.C. ruled in favor of Agent Orange/Blue Water Navy veterans in Procopio v Wilkie court decision this past January. The Department of Justice declined to appeal the decision so the House and Senate passed the

FRA-supported legislation unanimously. This court case argued on behalf of Blue Water Veterans saying that Navy veteran, Mr. Procopio, who never stepped foot on land in Vietnam, was exposed to Agent Orange during his military service off the coast of the Republic of Vietnam. Due to this exposure, he developed medical conditions consistent with other veterans who served on land and were exposed to Agent Orange and therefore be entitled to a presumptive category and be eligible for benefits. This legislation essentially codifies the Procopio decision into law. The FRA is listed as a Friend of the Court by the petitioner Blue Water Navy Veteran, Mr. Procopio.

The bill also covers veterans who served in the Korean Demilitarized Zone between Sept. 1, 1967, and Aug. 31, 1971, as well as children with spina bifida born to veterans who served in Thailand between January 1962 and May 1975. The FRA wants to thank the Shipmates who repeatedly used the FRA Action Center to urge their legislators to pass this legislation.

Source: FRA



S. 154, VA CLEAR Act of 2019

Senator Jon Tester, Ranking Member of the Senate Committee on Veterans' Affairs, introduced S. 154, the Department of Veterans Affairs Contract, Leadership, and Ensuring Accountability and Reform Act of 2019, or the VA CLEAR Act of 2019. The bill will allow VA to establish measures for contractors that help it oversee implementation of the VA MISSION Act and other large contracts that are vital to ensuring

the quality of care for our nation's Veterans.

Contracts would need to include: measurable metrics to assess performance; a plan of action and milestones for provision of services; safeguards to ensure a minimal level of quality offered by the contractor; appropriate measures for awards or incentives; and a requirement that the service provider document performance using information technology so the VA Secretary can ascertain the quality of services rendered.

For larger contracts (those worth more than \$2 billion), VA must submit to Congress justification for the contract and how it intends to pay for it in future years. Such contracts will also be reviewed by both VA's Inspector General (IG) and the GAO- Government Accountability Office to ensure the contractor is meeting the performance metrics in its contract. The Act also requires an independent third party to review VA's financial processes and actuarial and estimation models and for VA to submit any requests for funding outside of the normal budget process at least 45 days before the program requiring funding is affected along with justification for the needed

funds. The bill would grant the IG with subpoena power over individuals associated with contract work under review who are not federal employees and require VA to provide centralized records on all administrative investigation board reviews and referrals of clinicians to state licensing boards.

VA has not clearly established performance measures for quality or access to contractors in its proposed regulations. See [DAV comments](#) about VA's proposed regulations on access and quality standards here. As VA begins to implement the VA MISSION Act-its new broad authority for community care-and develops its integrated community care network, it must have comparative information from VA and its community providers that allows it to make clinical decisions in the best interest of Veterans.

Please use the prepared email or write your own letter to your Senators to ask them to cosponsor the VA CLEAR Act of 2019.

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

TAKE ACTION



Statement from DAV National Commander Dennis Nixon

After years of fighting to correct an injustice for disabled Vietnam veterans, DAV takes great pride in announcing that the president has signed in to law H.R. 299-the Blue Water Navy Vietnam Veterans Act.

Passage of this law is a pivotal victory for Vietnam veterans who have not only suffered for decades from illnesses and diseases linked to exposure to Agent Orange, but who also felt that their service and suffering had long gone unacknowledged by the Department of Veterans Affairs.

DAV is thankful for the leadership of House Veterans' Affairs Committee Chairman Mark Takano and Ranking Member Phil Roe; Senate Veterans' Affairs Committee Chairman Johnny Isakson and Ranking Member Jon Tester; and Senate Bill sponsors Kirsten Gillibrand and Steve Daines, who all worked in a bipartisan, bicameral manner to finally get this legislation through

Congress.

Mostly, we are grateful to the Vietnam veterans, their families and survivors, all our members and supporters who have stood with us over the years to advocate for this legislation and who have been so crucial to getting it across the finish line. I regret that many Vietnam veterans will have succumbed to illness before this victory could be realized, but rejoice knowing that countless others will finally be able to access the benefits they need and have rightly earned.

Fellow Vietnam veterans, I am proud to share this triumph with you. Congratulations, and welcome home.



**Moving? Update DEERS for
Uninterrupted TRICARE Coverage**

Summer is when you and your family may fulfill new orders and move to a new duty station. If you move this summer, don't forget to update your information in the Defense Enrollment Eligibility Reporting System (DEERS). Being able to use TRICARE depends on keeping DEERS up to date.

Read the full article [here](#).



Tax & Credit Information



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3. [Advocates: Social Security Shortfall Shouldn't Stop Expansion of Benefits](#)
4. [Don't Believe These 5 Social Security Myths](#)
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6. Here's what taxpayers should know if they get a notice from the IRS
7. How Best to Avoid Overestimating Future Social Security Benefits
8. IRS, Treasury issue guidance under Tax Cuts and Jobs Act and the Consolidated Appropriations Act of 2018 for cooperatives and patrons of cooperatives
9. Members of the armed forces are entitled to certain tax benefits
10. Millions more ITINs set to expire in 2019; IRS says renew early to prevent refund delays
11. National Taxpayer Advocate Nina Olson delivers her final report to Congress; identifies priority challenges facing the IRS and TAS
12. Opinion: One Fix for Social Security's Long-Term Health
13. Report: Here's How Much You Need for Retirement — It May Surprise You
14. Report: Medicare Insolvent by 2026, Social Security by 2035
15. Report: Tariffs Could Boost Next Year's Social Security COLA — and That's Bad
16. Retirees Get Big Social Security Raise, Small bump in Medicare Payments

17. Study: Baby Boomers Aren't to Blame for Social Security's Grim Future
18. Study: Social Security Buying Power Down 33% Since 2000
19. Taxpayers who still haven't filed their 2018 tax return should do so ASAP
20. Working Just a Little Longer Can Give Your Retirement a Massive Boost



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



S. 1392, the Support for Suicide Prevention Coordinators Act

Suicide prevention coordinators (SPCs) play a pivotal role in helping connect veterans at risk of suicide to services and supports within the Department of Veterans Affairs (VA). They connect veterans identified as most at risk of suicide, using the VETS-REACH program, to services and supports and reach out to veterans who are referred through VA's very active Veterans Crisis Line to refer them to appropriate care.

VHA requires each VA medical center and large community based outpatient clinic to have a full-time SPC, however there is no requirement for VHA to document that all VA medical center positions are filled or that SPCs are properly qualified and trained to perform their duties. System wide, there may be significant differences in the qualifications, workload, and additional responsibilities of SPCs. Since qualifications for SPCs are not specified in VHA policy and workloads may vary significantly, VHA may not be providing adequate training, support and oversight

for all incumbents.

S. 1392, the Support for Suicide Prevention Coordinators Act, would require the Government Accountability Office to conduct an assessment of the responsibilities, workload, and vacancy rates of VA's suicide prevention coordinators. A related bill, H.R. 2333, has already been approved by the House of Representatives and sent to the Senate.

DAV strongly supports this legislation in accordance with Resolution No. 293, which calls on VA to support program improvements, data collection, and reporting on suicide rates among veterans and service members as part of a robust and fully resourced mental health effort.

Please write your Senators to ask them to cosponsor this important legislation. Thank you for participating in the DAV National Commander's Action Network.

TAKE ACTION



Don't Guess. You have 24/7 Access to a Nurse

Welcome summer! Hopefully, you and your family members will be spending more time outside being active or even traveling. Whether biking, hiking, or taking a road trip, do you know what to do if you experience a minor, non-emergency injury or illness this summer? With TRICARE, you have an expert to turn to if you need health care advice.

Read the full article [here](#).



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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 and the Korean War. Returning home for burial with full military honors

are:

Army Sgt. Vernon R. Judd was a member of Company D, 89th Medium Tank Battalion, 25th Infantry Division. He was reported missing in action on Nov. 28, 1950, when he was captured by enemy forces in the vicinity of Ipsok, North Korea. According to reports, Judd died at Hofong Prisoner of War camp on Feb. 15, 1951. Interment services are pending. [Read about Judd.](#)

Army Air Forces Sgt. Howard F. Gotts was a radio operator assigned to the 66th Bombardment Squadron, 44th Bombardment Group. On Aug. 1, 1943, the B-24D aircraft on which Gotts served, crashed during the largest bombing mission against the oil fields and refineries at Ploiesti, north of Bucharest, Romania. The Romanian government announced they had recovered and buried 216 Americans killed in the bombing raid, but could only identify 27 of the men at the time of the recovery. The remaining casualties were said to have been buried as Unknowns in the Hero Section of the Civilian and Military Cemetery of Bolovan, Ploiesti, Prahova, Romania. Interment services are pending. [Read about Gotts.](#)



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