



# **Veterans-For-Change Newsletter**

*A Voice of the Veterans*

Week Ending Sunday, March 15, 2020

Volume 11, Issue 11



## **This-N-That**

For many years now I've received E-Mails and letters regarding concurrent receipt, mostly from widows, but Veterans as well.

Finally legislation was passed to cure the problem with widows, but it still hasn't been resolved for our Veterans. And now is the time to speak out, voice your concerns.

Under the "Take Action" section there have been two items added where you can read about the bill, then send out the pre-written E-Mails. One specifically deals

with the concurrent receipt problem for Veterans.

With your help, we can win again! So please, send off the E-Mail, follow it up with a phone call to your Rep in DC, go on to their website and ask them to support this legislation. And I know many don't like doing this over and over again, but please do this once weekly.

Copy and paste it or forward the newsletter onto friends and family and ask that they too do the same. We certainly need all the help we can get to insure it passes!

Seems like every time I blink, something else is changing. Now they want to restrict the GI Bill, restrict dependent child care coverage, etc.

When things become more clear, I will definitely pass on the information to you as quickly as I can.

We still see no improvement on how our Veterans with PTSD or how our Homeless Veterans are being treated.

Veterans are still being turned away left and right at VA facilities across the nation. Some have hired more security to stop them from coming in, others constructed extremely expensive steel fences to stop them from entering all the while are leasing our various

portions of property to civilian businesses.

And where is all this rental income going? No one will show and/or prove that it's helping Veterans, no accountability as to where those funds are being deposited.

Why are they so frightened to show where this money is going? Why won't they show that this rental income isn't helping a single Veteran?

I find it truly awesome school children are reaching out, raising funds to help homeless Veterans, and feel a strong sense of patriotism to want to help!

While I am very thankful, and very much appreciative of their hard work and labors, seriously, isn't this the responsibility of our Government, namely the VA Healthcare System?

The VA and our government have become so adversarial and continually deny benefits and care that there is a daily constant battle to fight for what is just, due, needed and necessary, not to mention owed!

Every time I hear of yet another Veteran passing it crushes me inside, especially since I know the battle won't stop there, it's left up to the family to fight for benefits they are owed as well.

This is why it's so important for all of us to be vocal, aggressive and demanding of those in office who literally hold the fate of millions in their hands!

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)



**Amplification of rulemaking request  
concerning the presence of herbicide  
and veteran exposure in Thailand**

Dear Mr. Secretary:

I write in amplification of our rulemaking request dated January 3, 2020 concerning the extension of the presumption of exposure to herbicide to those veterans serving at Royal Thai Air Force bases in Thailand during and after the Vietnam era. Military-Veterans Advocacy believes that you have the authority to grant such rulemaking under the provisions of 38 U.S.C. §§ 1110, 1113(b) and 1116(a)(3).

In addition to the evidence referenced in our January 3, 2020 letter, I am enclosing an expert opinion from Dr. Wayne Dwernychuck, an environmental scientist and Agent Orange specialist. I have also enclosed Dr. Dwernychuk's resume to establish his credentials.

Please consider this additional information as part of our rulemaking request.

Thank you for your consideration.

Sincerely,  
John Wells  
Commander USN (ret)  
Director of Litigation

**NOTE:** To read entire document, click [HERE](#).



## **Novel Coronavirus (COVID-19) Veterans Service Organizations Fact Sheet Current as of March 10, 2020**

The Veterans Health Administration (VHA) is working closely with the Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS) and other Federal agencies to monitor and respond to the current outbreak of Novel Coronavirus (COVID-19) in the United States. VHA is operating in accordance with CDC guidance and actively participating in response efforts in local communities to address the outbreak.

### **Help Us Spread the Word to Veterans**

Please help VHA share the following messages with Veterans:

1. "Stay home and phone" - **contact your local VA facility** remotely before visiting, and consider using VA's [telehealth and virtual care options](#).
2. Be prepared for some changes in your visit to our facility. We are screening everyone for fever, cough, and flu-like symptoms before they can enter. Call ahead if you have these symptoms or need to cancel or reschedule your appointment. Plan to leave home earlier than usual to allow time for screening.

## **VHA Actions**

VHA has a comprehensive plan in place to protect the health of everyone who visits or works at one of our facilities. The Emergency Management Coordination Cell (EMCC) has been activated and is working diligently to respond to this rapidly changing situation. Supply chain measures are in place, negative airflow beds are available across VHA facilities, and COVID-19 testing kits have been made available.

VHA is reinforcing adherence to the Standard, Contact, and Airborne Precautions, which include the use of Personal Protective Equipment (PPE). Healthcare personnel evaluating or treating a patient suspected or confirmed to have a COVID-19 infection have been directed to use these precautions.

VHA is conducting frequent, repeated communications with employees on the importance of common sense behaviors for reducing the spread of illness, including washing hands for at least 20 seconds, avoiding touching their faces, covering coughs and sneezes, getting vaccinated against the flu, avoiding other people who are sick, and encouraging employees to stay home if they are sick.

In addition, VHA is heavily encouraging Veterans to call their local medical center before visiting the facility

and telling them to consider using VA's [telehealth and virtual care options](#) like VA Video Connect. VA's telehealth providers can evaluate their symptoms and provide a diagnosis and comprehensive care.

## **Screening at VHA Facilities**

All VA medical facilities are implementing screening measures for signs of respiratory illness and exposure to COVID-19. Via telehealth services, we will provide a first line of defense using virtual screening for symptoms or exposure. Onsite, we will use standardized screening questions at appointment check in and during initial clinical screening.

## **Patient Privacy**

As a reminder, VHA cannot release Personally Identifying Information (PII) about patients, in accordance with the Health Insurance Portability and Accountability Act (HIPAA).

Visit [VA's Public Health Website](#) for the latest updates.



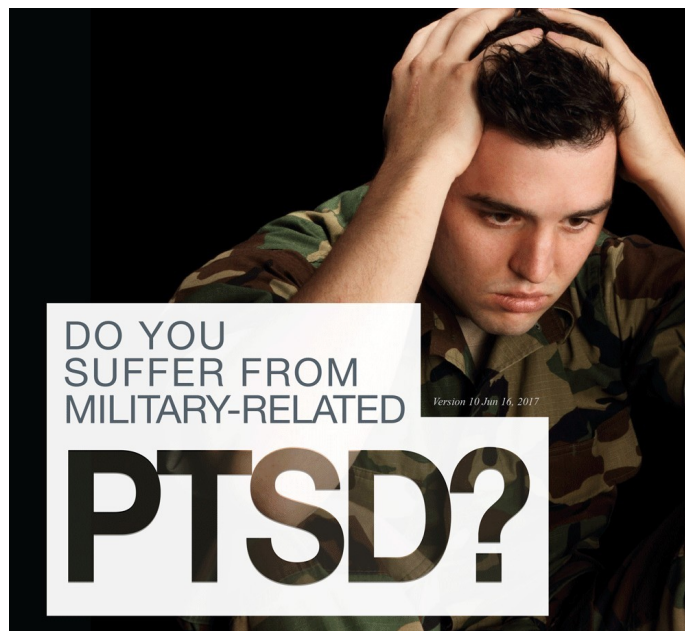
Links to Other Stories



1. VA is a data driven organization
2. Helping Veterans handle a silent killer: Hypertension
3. VA Commemoration of the 50th Anniversary of the Vietnam War
4. Richmond's VIP Center improves quality of life for Veterans
5. Glioblastoma: Potentially Related to Burn Pit and Agent Orange Exposure
6. New subsidy helps formerly homeless Veterans afford housing in high rent areas
7. Amarillo VA Telephone Town Hall goes big
8. 2020 HIRE Vets Medallion Award application now open
9. Combat Veteran finds success through Veterans Curation Program
10. Students in five states participate in the End Veteran Homelessness Challenge
11. Marine Veteran commends VA diabetes campaign
12. Journey maps: Plotting the moments that matter to Veterans and their families
13. Life After Service: StrongMind technology to treat Veterans with PTSD
14. Alabama Veterans access VA benefits, services at Veterans Experience Action Center
15. How the VA Rates Sleep Apnea
16. Spit smokeless tobacco out – for good
17. DoD to restructure 50 hospitals, clinics to improve readiness

18. McCaffery announces upcoming changes to military hospitals, clinics
19. World Hearing Day shines light on global hearing loss
20. Herbicide Tests and Storage Outside Vietnam
21. VA Ratings for Arthritis Explained
22. Experts dish out 9 tips for heart health
23. First female takes command as AFMES director
24. VA taking on the challenges of aging with PTSD

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



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



## Tracking COVID-19: Know the Symptoms and How to Get Care

Take action and stay informed about the new coronavirus, also known as COVID-19. Simple measures can protect you and your community. It's also important to identify the symptoms of COVID-19 and know when to seek help.

To learn more, [read the full article](#).



**Veterans-For-Change Web Site**

The Veterans-For-Change website has been around since 2009. The looks pretty much stay the same, but in the background our new webmaster has been making repairs to things that haven't worked properly in over a year.

There are still repairs being made, but the polls are now working 100% and there are five polls open to all to take.

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 housed 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, whatever 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 **3,875** hits per day, and downloads average **6,207** per day with a total **5,976,505** visitors as of Friday.

If you subscribe you will have full access to the entire website and best of all it's **FREE of charge!** You just need a valid E-mail address so the system can send you a confirmation E-Mail. Once received, click on the link to be authorized automatically.

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

- Documents Library with over **18,649** documents in 171+ Libraries, added 1 documents on-line (Updated:

03/13/20)

- FAQ's on-line with **1,790** FAQ's on 101 topics!  
(Updated 08/29/19 - 128 NEW)
- 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: 02/26/18) (115 Added)
- News (Articles On-Line: **9,562**)
- Polls
- Web Links, more than **7,406**, Added 97 New Links  
(Updated: 02/27/20)

If you have a submission for the memorial pages, E-

Mail: [Jim.Davis@Veterans-for-change.org](mailto:Jim.Davis@Veterans-for-change.org)



## VFW Testifies on Education Benefits

This week, VFW National Legislative Service Deputy Director Pat Murray testified before the House Veterans' Affairs Subcommittee on Economic Opportunity regarding 14 proposed pieces of legislation. Many of the proposed bills were supported by the VFW such as benefits parity for deployed reservists and improvements to VA's homeless programs. There were also bills the VFW opposed such as the proposal to cash out the GI Bill to pay for loans. At the hearing Murray stated, "The VFW has held the belief for years that the GI Bill should not be traded for any monetary value! The value of an education is not something that can be quantified, and the GI Bill's worth is more than something that can be measured in simple dollar amounts." [Watch the hearing.](#)



Below are links to all currently active pre-written E-Mails to many pieces of legislation. We ask that you go to each one, and send the pre-written E-Mails, and to also call your Reps or Senators and ask for their support on a weekly basis!

You don't need to be Active Duty or a Veteran, in fact we ask all Veteran friends to also help!

1. [Allow Active Duty to Sue Military for Medical Malpractice \(H.R. 2422\)](#)
2. [Urge Congress to Pass the Retired Pay Restoration Act](#)
3. [Protect Bankrupt Disabled Veterans from Losing Benefits](#)
4. [S. 2966, the Rural Veterans Travel Enhancement Act of 2019](#)
5. [S. 1003, VET OPP Act to Reform VA Employment Programs](#)
6. [H.R. 4574 - Pass the Veterans' Right to Breathe Act Now!](#)
7. [S. 2810, the Veterans Hearing Benefits Act of 2019](#)
8. [Support H.R.4985, the Veterans Residential Care Choice Act](#)
9. [New Concurrent Receipt Bills Introduced!](#)
10. [STOP Downsizing of Military Treatment facilities](#)



## **VA announces change to urgent care in Community Care Network Region 1**

WASHINGTON - The U.S. Department of Veterans Affairs (VA) is transitioning its urgent care network manager, effective March 18, from TriWest Healthcare Alliance to Optum Public Sector Solutions, Inc. (Optum), which is part of United Health Group, Inc., in Community Care Network Region 1.

The change will result in new urgent care providers being added to VA's contracted network, while others will be removed.

These changes in Veterans' urgent care are part of the VA Maintaining Internal Systems and Strengthening Outside Networks Act of 2018 or [MISSION Act](#).

Veterans have the option for [urgent care treatment](#) of minor injuries and illnesses such as colds, sore throats and minor skin infections at in-network non-VA urgent care providers. Additionally, Veterans can receive same-day urgent care treatment at VA medical centers.

"VA is working to ensure Veterans in Region 1 understand how this change will affect them," said VA Secretary Robert Wilkie. "The goal is to provide Veterans a seamless transition when seeking urgent care in their communities."



Not all urgent care providers currently in the Region 1 network will be authorized to provide care after March 18. Conversely, new providers who are not currently authorized through the TriWest network will be available through Optum's network beginning March 18. VA can only pay for urgent care if the provider is part of VA's contracted network. If Veterans go to an out-of-network urgent care provider, they will be required to pay the full cost of care.

The change in network management will also affect pharmacies. Veterans who require [urgent care prescriptions](#) of 14 days or less can find an [authorized in-network provider](#) or contact their local VA medical facility to identify a VA network pharmacy to avoid paying out-of-pocket costs.

Community providers within Region 1 who want to provide urgent care services to Veterans after March 18 must establish a contract with [Optum](#).

The change will impact Veterans in the following locations: Connecticut, Delaware, Maine, Maryland, Massachusetts, New Hampshire, New Jersey, New York, North Carolina, Pennsylvania, Rhode Island, Vermont, Virginia, Washington, D.C. and West Virginia. Veterans in these states who need urgent care should use VA's [facility locator](#) or contact their

local VA medical facility for help identifying in-network urgent care providers.



## **VFW Testifies on VA Debt Collection Practices**

On Tuesday, VFW National Veterans Service Deputy Director Michael Figlioli testified before the House Veterans' Affairs Subcommittee on Oversight and Investigations on VFW-supported H.R. 5245, [Stopping Harm and Implementing Enhanced Lead-time for Debts for Veterans Act](#), or SHIELD for Veterans Act. Figlioli stressed that although the bill is about “debt”, it is really about the Veterans Benefit Administration’s internal business practices causing unnecessary stress for our nations veterans. Figlioli stated, “Veterans and the VFW understand that debts must be repaid. What we all fail to understand is how and why the burden almost always falls on the veteran, particularly when it was created by VA’s lack of timeliness.” [Watch the hearing.](#)



## **SASC-P has Hearing on Personnel Issues**

The Senate Armed Services, Personnel Subcommittee held a hearing on personnel issues and had Pentagon officials testify. The FRA submitted a written statement for the record regarding issues of concern to Shipmates. The FRA statement includes the association's opposition to scheduled annual pharmacy and treatment co-pay increases, restricting retirees and military dependents from selected Military Treatment Facilities and proposed drastic cuts to military medical staff. In addition, the FRA statement urged the subcommittee to expand concurrent receipt and increase Congressional oversight of the Defense Department's suicide prevention program.

Among the many topics discussed, Pentagon officials spoke of "rightsizing" the Military Health System (MHS) with a focus on readiness. The DoD officials assured members of the subcommittee that the agency will continue to closely monitor MTFs and make any necessary adjustments. Members can go the [FRA Action Center](#) to weigh in on expanding concurrent receipt and expressing opposition to restricting retirees and military dependents from obtaining health care services at select MTFs.



~~**Follow us on MEWE**~~

Follow us on MEWE! The support staff at MEWE is responsive, open to suggestions and works very hard to protect your personal information.

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





HOME *of the* FREE  
BECAUSE *of the* BRAVE

*Honoring those who served*



**FRA Urges SecDef to Re-consider  
Changes to DoD Childcare Centers for  
USCG Families**

The FRA has dispatched a letter to the secretary of defense urging him to re-consider his decision to restrict attendance at child development centers for kids from U.S. Coast Guard families. Press reports indicate that one of the unintended consequences in this changed policy is that as many as 1,000 children of active-duty Coast Guard families could lose their spots at base child development centers. The association believes it is important to provide adequate childcare at all military installations. The FRA advocates that the DoD should increase funding for child development centers rather than restrict usage. The association also wants to ensure funding parity with the DoD on pay, benefits and housing for Coast Guard personnel. At a recent House Appropriations Committee hearing, Coast Guard Commandant Admiral Karl Schultz expressed serious concerns about the changed DoD CDC policy.



# Independent Budget Urges Proper Funding for VA

On Tuesday, VFW National Legislative Service Director Carlos Fuentes joined the VFW's Independent Budget (IB) coauthors DAV (Disabled American Veterans) and Paralyzed Veterans of America in testimony before the House Appropriations Subcommittee on Military Construction, Veterans Affairs, and Related Agencies to indicate that the President's budget request for VA falls more than \$4 billion dollars short of what is needed. The IB urged Congress and the Administration to exempt funding VA needs for VA MISSION ACT of 2018 implementation from budget caps. [Watch the hearing.](#)



## 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)



## **DOD announces new travel restrictions due to Coronavirus**

DOD -- new travel restrictions for 60 days for service members, DoD civilians and families traveling to, from, or through Level 3 locations, as designated by the Centers for Disease Control and Prevention (CDC).

On March 11, 2020, the Secretary of Defense announced new travel restrictions for 60 days for service members, DoD civilians and families traveling to, from, or through Level 3 locations, as designated by the Centers for Disease Control and Prevention (CDC). These restrictions are effective March 13.

"The Department of Defense's top priority remains the protection and welfare of our people. While directing this prudent action, I continue to delegate all necessary authority to commanders to make further decisions based on their assessments to protect their people and ensure mission readiness. While we deal with this fluid and evolving situation, I remain confident in our ability to protect our service members, civilians and families," said Secretary of Defense Mark Esper.

This restriction includes all forms of travel, including Permanent Change of Station, Temporary Duty, and government funded leave. The Level 3 countries are set by the CDC and may change. The DoD guidance



will follow those changes. Service secretaries and commanders may issue waivers to this policy as they determine necessary to ensure mission readiness and address specific cases.

Additionally, for the next 60 days, concurrent official travel to Level 2 locations for families of service members and civilian personnel is denied. For the next 60 days, DoD will implement enhanced health care protocols for traveler safety and transition to the use of military or contracted aircraft for required travel to Level 2 or 3 locations.

DOD has also issued updated Force Health Protection guidance that requires a screening and 14-day self-monitoring at home upon return for all DOD personnel who have traveled from, to or through Level 2 or 3 countries. This policy will be reviewed prior to the end of the 60-day period to determine whether it will be modified or extended.

The Department will continue to issue additional guidance with regard to the COVID-19 as conditions warrant.

For more information on the CDC travel restrictions, visit <https://wwwnc.cdc.gov/travel/notices/>.

We encourage all DOD personnel to visit

<https://www.defense.gov/Explore/Spotlight/Coronaviruses/> for information on staying healthy during the outbreak.



## Office of Inspector General

1. Defense Health Care: DOD Surveys Indicate Beneficiary Experience Generally Unchanged in First Year of TRICARE Select
2. Defense Health Care: Plans Needed to Ensure Implementation of Required Elements for TRICARE's Managed Care Support Contracts
3. Medicaid Eligibility: Accuracy of Determinations and Efforts to Recoup Federal Funds Due to Errors
4. Medicare: Information on Medicare-Dependent Hospitals
5. National Biodefense Strategy: Additional Efforts Would Enhance Likelihood of Effective Implementation
6. VA Health Care: Veterans' Use of Long-Term Care Is Increasing, and VA Faces Challenges in Meeting the Demand
7. VA Acquisition Management: Steps Needed to Ensure Healthcare Federal Supply Schedules Remain Useful
8. VA Health Care: Veterans' Use of Long-Term Care Is Increasing, and VA Faces Challenges in Meeting the Demand
9. Medicare: Information on Medicare-Dependent Hospitals



## **VA Notice on Novel Coronavirus**

The Department of Veterans Affairs has issued a

statement that the Veterans Health Administration is working closely with the Centers for Disease Control and Prevention, Department of Health and Human Services and other federal agencies to monitor and respond to the current outbreak of Novel Coronavirus (COVID-19) in the United States. The VHA is operating in accordance with CDC guidance and is actively participating in response efforts in local communities to address the outbreak.

The VHA has a comprehensive plan in place to protect the health of everyone who visits or works at VA facilities. The Emergency Management Coordination Cell has been activated and is responding to this rapidly changing situation. Supply chain measures are in place, negative airflow beds are available across VHA facilities, and COVID-19 testing kits are available. The VHA is reinforcing adherence to the standard, contact, and airborne precautions, which include the use of personal protective equipment. Healthcare personnel evaluating or treating a patient suspected or confirmed to have a COVID-19 infection have been directed to use these precautions.

The VHA is constantly communicating with employees about the importance of common-sense behaviors for reducing the spread of illness, such as washing hands for at least 20 seconds, avoid touching their faces,

covering coughs and sneezes, getting vaccinated against the flu, avoiding other people who are sick and encouraging employees to stay home if they are sick.

In addition, the VHA is heavily encouraging veterans to call their local medical center before they visit the facility and telling them to consider using VA telehealth. The VA's telehealth providers can evaluate patient's symptoms to make a diagnosis and provide comprehensive care from a telephone. For more information on telehealth [go online](#).



**VFW Participates in Congressional Briefing to Discuss GWOT Memorial**

On Monday, VFW National Legislative Service Associate Director Matthew Doyle attended a congressional briefing to discuss H.R. 5046, the [Global War on Terrorism Memorial Location Act](#). This important legislation would authorize the Global War on Terrorism (GWOT) memorial to be placed within the Reserve, an area in Washington, D.C., that encompasses the National Mall and the Tidal Basin. Under the Commemorative Works Act, no memorial may be placed within the Reserve without congressional authorization. At the briefing, Matthew Doyle stated, “The Global War on Terrorism is the longest war fought by volunteers, many of whom served multiple deployments. It is also a multi-generational conflict, as many of today’s service members are the sons and daughters of the men and women who fought earlier in the war. Global War on Terrorism veterans deserve to be memorialized in a prominent area of our nation’s capital. To that end, there is no better location for the Global War on Terrorism memorial than the Reserve.” [Learn more](#) about the Global War on Terrorism Memorial Foundation.





**Our values  
match yours.**



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



## **New Medical Facility Access Measures in National Capital Region**

On March 12, military hospitals and clinics in the National Capital Region adopted new entry measures. You can expect separate entry points for patients and staff. Some facilities have outside tents to screen patients for symptoms of COVID-19. This lets providers safely screen and minimize risk to others.

To learn more, [read the full article](#).

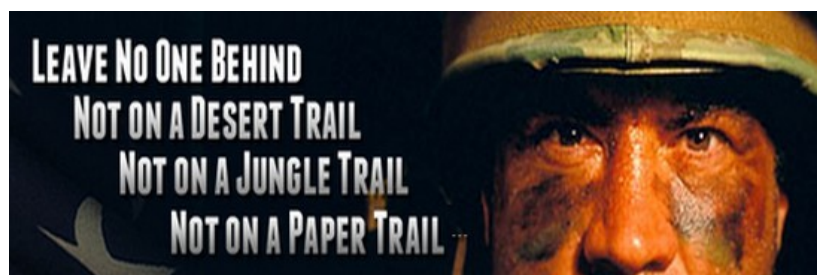




## **VA Suspends GI Bill Use at Five Colleges**



This week, the VA suspended future GI Bill use at five colleges due to deceptive marketing and recruitment practices. The five colleges are: University of Phoenix, Colorado Technical University, American InterContinental University, Bellevue University, and Temple University. The decision by VA will apply to all new enrollments, both in residence and online. The suspension will not affect those students currently enrolled in classes during the current term as long as there are no breaks in enrollment for current GI Bill beneficiaries. “This decision will affect over 16,000 student veterans and it should not be taken lightly,” said the VFW National Legislative Service Deputy Director Pat Murray. “This shows that preying upon student veterans comes with consequences.” VA is encouraging students attending or considering attending the schools to contact the department’s Education Call Center at 888.442.4551. [Learn more.](#)



## **VA announces safeguards to protect nursing home and spinal cord injury patients**

Washington - While the Centers for Disease Control (CDC) still considers COVID-19 to be a low threat to the general American public, the Department of Veterans Affairs (VA) announced, March 10, new safeguards aimed at limiting COVID-19 exposure risk for two of its most susceptible patient populations: nursing home residents and spinal-cord injury patients.

VA's [134 nursing homes](#) are home to more than 41,000 Veterans across the country. The residents are predominantly older, and many have multiple complex health conditions, making them particularly vulnerable to infection. To minimize the risk of exposure, effective March 10 and until further notice, VA is taking the following actions:

- All VA nursing homes will adopt a "No Visitor" stance, meaning no outside visitors will be permitted to see residents.
  - o The only exceptions will be in compassionate cases, when Veterans are in their last stages of life on hospice units.
  - o In those cases, visitors will be limited to a specific Veteran's room only.
- All VA nursing homes will suspend new admissions.

o VA nursing homes will continue to welcome resident transfers from VA facilities once medical personnel have determined patients are not at risk for infection from COVID-19 or transmitting COVID-19.

- Nursing home staff will be actively screened daily and dedicated to working at Community Living Centers.

VA's 24 major spinal cord injury and disorder centers (SCI/Ds) across the country serve the needs of a unique patient population of more than 24,000 Veterans who are also vulnerable to infection. To minimize the risk of exposure, effective March 10 and until further notice, VA is taking the following actions:

- All VA SCI/Ds will adopt a "No Visitor" stance, meaning no outside visitors will be permitted to see inpatients.

o The only exceptions will be in compassionate cases, when Veterans are in their last stages of life.

o In those cases, visitors will be limited to a specific Veteran's room only.

- All VA SCI/Ds will limit inpatient admissions to addressing acute clinical needs.

o This means all VA SCI/Ds will avoid inpatient admissions for routine matters, including annual exams and respite, which will now be done on an outpatient basis.

- VA SCI/D staff will be actively screened daily and

dedicated to working at SCI/Ds.

"While the COVID-19 risk to average Americans remains low, these commonsense measures will help protect some of our most vulnerable patients," said VA Secretary Robert Wilkie. "VA will make every effort to minimize the impact of these policies on Veterans while putting patient safety first."

For more information about the Coronavirus and COVID-19 visit [CDC coronavirus disease 2019](https://www.cdc.gov/coronavirus/2019-nCoV/).



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## **VA Preparing to Improve Assistance for Family Caregivers**

VA published a rule in the Federal Register on March 6, 2020, that changes and standardizes VA's Program of Comprehensive Assistance for Family Caregivers (PCAFC) and ensures the program regulations reflect changes required by the VA MISSION Act of 2018. The proposed rule seeks to standardize eligibility by basing the definition of serious injury on service-connected disability ratings – regardless of whether it resulted from an injury, illness or disease – defining what it means to be in need of personal care services, and ensuring that the eligibility criteria capture the personal care service needs of veterans and service members with cognitive or neurological impairment or mental health conditions, among other things. “The Veterans of Foreign Wars truly hopes this is another positive step in the right direction for caring for our caregivers,” said VFW Director of Communications & Public Affairs Terrence Hayes. “Our nation's veterans depend on many of these selfless and dedicated individuals in their recovery and rehabilitation process and we must ensure they are cared for as well.” To this end, VFW staff is meticulously reviewing the nearly 300-page document to ensure it conforms to the intent of the law. [Read more.](#)





# Your actions

could save a life.

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

VeteransCrisisLine.net



## Citizenship Bill for Children of Military and Civil Servants Heads to President

Last week, the Senate passed H.R. 4803, [Citizenship for Children of Military Members and Civil Servants Act](#). This bipartisan legislation was introduced by Representatives Doug Collins (R-GA) and Jerrold Nadler (D-NY) to ensure children of deployed service members and civil servants are conferred automatic U.S. citizenship and are not disadvantaged because their parents are serving our country abroad. The bill was passed by the House in December and now awaits the president's signature. Senators Tammy Duckworth (D-IL) and Johnny Isakson led the effort in the Senate.





## **VA Urgent Care Network Change in Mid-Atlantic and Northeastern States**

Effective March 18, 2020, VA's urgent care network in region 1 will transition from TriWest Health Alliance to Optum Public Sector Solutions, Inc. The change means veterans will need to confirm whether an urgent care clinic that participated in the urgent community care benefit under TriWest's network is included in Optum's network. The new VA community urgent care benefit was authorized by the VFW-supported VA MISSION Act of 2018. This also means clinics that were not in the previous network could be included. The change also affects covered private sector pharmacies, where veterans are able to receive 14-day urgent care prescriptions. This change specifically impacts veterans in Connecticut, Delaware, Maine, Maryland, Massachusetts, New Hampshire, New Jersey, New York, North Carolina, Pennsylvania, Rhode Island, Vermont, Virginia, Washington, D.C., and West Virginia. All veterans are encouraged to visit VA's [facilities locator](#) before going to an urgent care clinic. VA will not cover visits to non-network urgent care clinics. [Learn more.](#)




## Tax & Credit Information





1. Get up-to-date information including the annual IRS 'Dirty Dozen' with IRS e-News Subscriptions
2. Taxpayers should know the signs of a phone scam, especially during filing season
3. IRS extends April 15 and other upcoming deadlines, provides other tax relief for victims of Tennessee tornadoes
4. Two updated IRS publications, other online resources can help anyone planning for retirement
5. Tax Time Guide: Tax Withholding Estimator helps retirees, workers and self-employed calculate taxes, fill out new Form W-4
6. Parents who adopt can benefit from this valuable tax credit
7. Get up-to-date information including the annual IRS 'Dirty Dozen' with IRS e-News Subscriptions
8. Taxpayers should know the signs of a phone scam, especially during filing season
9. IRS extends April 15 and other upcoming deadlines, provides other tax relief for victims of Tennessee tornadoes
10. Two updated IRA publications, other online resources can help anyone planning for retirement
11. Taxpayers have the right to challenge the IRS's position on their taxes
12. IRS: High-deductible health plans can cover Coronavirus costs



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## **Tracking COVID-19: Keep Healthy Habits in Mind**

As the new coronavirus, known as COVID-19, continues to circulate, the Defense Health Agency wants to keep you informed about what's happening. While the impact of this disease has been far-reaching, you can take proactive measures to protect your health.

To learn more, [read the full article](#).





The Defense POW/MIA Accounting Agency announced four new identifications, and two burial update for service members who have been missing and unaccounted-for from WWII and the Korean War. Returning home for burial with full military honors are:

**Army Pvt. Ballard McCurley**, 34, of Pauls Valley, Oklahoma, was a member of Company M, 3rd Battalion, 12th Infantry Regiment, 4th Infantry Division, during the Battle of the Hürtgen Forest in Germany. On Nov. 29, 1944, his battalion went to a reserve position

in the woods west of the town of Hürtgen. He and other Soldiers in his unit were ordered to clear a field of tree stumps so vehicles could drop off rations and supplies. According to witnesses, while clearing out a tree stump, McCurley inadvertently set off an enemy anti-personnel mine and was killed instantly. McCurley will be buried April 25, 2020, in his hometown. [Read about McCurley.](#)

**Army Sgt. Kenneth E. Walker**, 19, of Madill, Oklahoma, was a member of Charlie Company, 1st Battalion, 32nd Infantry Regiment, 7th Infantry Division. He was reported missing in action Dec. 2, 1950, in the vicinity of the Chosin Reservoir, North Korea, after his unit was attacked by enemy forces. His remains could not be recovered following the battle. Walker will be buried April 18, 2020, in his hometown. [Read about Walker.](#)

**Navy Fireman 3rd Class Clarence A. Blaylock**, 20, was assigned to the battleship USS Oklahoma, which was moored at Ford Island, Pearl Harbor, when the ship was attacked by Japanese aircraft on Dec. 7, 1941. The USS Oklahoma sustained multiple torpedo hits, which caused it to quickly capsize. The attack on the ship resulted in the deaths of 429 crewmen, including Blaylock. Interment services are pending. [Read about Blaylock.](#)

**Navy Seaman 1st Class Russell C. Roach**, 22, was assigned to the battleship USS Oklahoma, which was moored at Ford Island, Pearl Harbor, when the ship was attacked by Japanese aircraft on Dec. 7, 1941. The USS Oklahoma sustained multiple torpedo hits, which caused it to quickly capsize. The attack on the ship resulted in the deaths of 429 crewmen, including Roach. Interment services are pending. [Read about Roach.](#)

**Navy Electrician's Mate 3rd Class Alton W. Whitson**, 22, was assigned to the battleship USS Oklahoma, which was moored at Ford Island, Pearl Harbor, when the ship was attacked by Japanese aircraft on Dec. 7, 1941. The USS Oklahoma sustained multiple torpedo hits, which caused it to quickly capsize. The attack on the ship resulted in the deaths of 429 crewmen, including Whitson. Interment services are pending. [Read about Whitson.](#)

**Navy Shipfitter 3rd Class Patrick L. Chess**, 24, was assigned to the battleship USS Oklahoma, which was moored at Ford Island, Pearl Harbor, when the ship was attacked by Japanese aircraft on Dec. 7, 1941. The USS Oklahoma sustained multiple torpedo hits, which caused it to quickly capsize. The attack on the ship resulted in the deaths of 429 crewmen, including Chess. Interment services are pending. [Read about](#)

Chess.



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