



Veterans-For-Change Newsletter

A Voice of the Veterans

Week Ending Sunday, July 19, 2020

Volume 11, Issue 25



This-N-That

Good evening Jim,

I missed last weeks edition of the newsletter, I do apologize. It takes on average 18+ hours to gather and assemble, and I ended up spending 4 days incapacitated, so this newsletter is a bit longer.

Are you a Veteran who is dealing with the VA's Collections Department? Well there is a little good news for you.

The VA is ceasing all collection activities through the

end of 2020.

The rules aren't quite clear, but is all based on the Corona Virus Pandemic and how it's affected you and your family. Further down in this newsletter is more information with a telephone number you can call.

If you've not noticed all across the country where cities and towns have lightened the precautions for COVID-19 the numbers of infected individuals have climbed dramatically and in many cities have more than doubled.

We want all to keep healthy and encourage the use of face masks even though there have been a couple reports claiming they do no good, when in fact they do!

If using disposable masks continuously they lose their effectiveness after 4 hours. Same applies to cloth masks and they should be washed frequently. And all part of staying safe is continue with safe social distancing.

Two issues still on the tables and not really going anywhere is the high Veteran Suicide Rate not being addressed, nor the high rate of Homeless Veterans.

I will say since this is an election year, be weary of politicians promising to address these issues,

especially if they have done so in the past and failed to follow through.

Most of us know that each Medical Center has funds in their budget to deal with both, but since there is no real restriction on budgets and reassigning funds to another area and totally ignoring real problems.

Two weeks ago I posted one example of the mini homes that are being built, that one was made from a recycled shipping container, total end cost was \$7,450.00 others cost as little as \$5,000.00. Most Medical Centers who have available land could easily afford to put up 75-100 mini homes, others as many as 400+.

With our Veterans who are in need of mental health care and haven't been approved, they should be approved upon receipt of application, and let the details be worked out later. Same should apply to those seeking help and haven't applied yet.

There simply just is no excuse in the world to continue to fail in addressing this critically important issue.

We're still looking for more ideas of what we need added to the website, so if you have any ideas or thoughts, please do share them with us and we will certainly look at them and see if we can merge some

or all of it into the new look.

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



**VETERANS ADVOCACY GROUP FILES
SUIT AGAINST SECRETARY OF
VETERANS AFFAIRS TO FORCE
COVERAGE FOR HERBICIDE
EXPOSURE ON GUAM, AMERICAN
SAMOA AND JOHNSTON ATOLL**

Military-Veterans Advocacy, a Slidell, Louisiana-based veterans advocacy group, filed suit against Secretary of Veterans Affairs Robert L. Willie in a Washington, DC, court late Friday. The suit seeks a review of a decision by Undersecretary for Benefits Paul Lawrence refusing to issue rules to govern herbicide exposure. No hearing date has been set.

MVA Board Chairman and Director of Litigation Commander John B. Wells (USN, Ret.) said the suit was necessary to force the VA to comply with the

realities of toxic exposure on the Central Pacific Islands.

"We have definitive proof of the presence of dioxin and other toxic chemicals on Guam 40 years after the last known use," Wells noted. "We also have affidavits, that we have provided the VA, from personnel who sprayed the herbicide."

A recent report prepared for the U.S. Environmental Protection Agency analyzed soil samples taken in October of 2019 noted: "It is probable that TCDD dioxin congener concentrations detected in soils are associated with chlorinated herbicides. Records of chlorinated herbicide use by the military on Guam (Navy, 1958) and veteran affidavits documenting the use of 2,4,5-T and 2,4,5-TP along with data collected from previous soil sampling events suggest the presence and use of chlorinated herbicides was likely. Finally, the herbicides in question were known to contain TCDD."

The soil samples were taken at locations identified by former MVA board member Brian Moyer who also founded the Agent Orange Survivors of Guam. Moyer served as a Marine on Guam and vividly remembers the spraying. That report can be found [here](#).

MVA Executive Director Col. Rob Maness, (USAF,

Ret.), who also served on Guam, said as follows: "It is a shame that veterans have to fight for their benefits when the vast weight of the evidence indicates exposure. The VA's denial was simply irrational."

Current MVA Director of Central Pacific Islands, Technical Sergeant Gary-Noy Garvin, (USAF, Ret.) also decried the VA action.

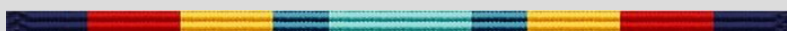
"The evidence is clear," Garvin said. "We were exposed to the chemicals on Guam while we were doing our duty. The VA has promised to take care of us, but has not."

Wells, who along with Moyer have advocated in Congress and with the VA to provide coverage predicted that the court would be sympathetic to the veterans.

"Unfortunately, the VA has a well-deserved reputation of delaying and denying claims until the veteran dies," Wells said. "Hopefully the court will force them to do their job."

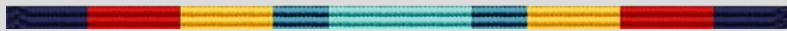
The lawsuit can be found [here](#).

CDR John B. Wells, USN (ret)



Legislation Introduced to Preserve 48-Hour Claims Review

Reps. Colin Allred (D-TX) and Jim Hagedorn (R-MN) introduced VFW-supported [H.R. 7443](#), the Veterans Claims Transparency Act. This important legislation would reinstate VA's former policy of permitting veterans service officers to review claims decisions within the 48-hours preceding promulgation to ensure all claims were properly evaluated and are error-free prior to a veteran receiving notification of a rating decision. The VFW thanks Reps. Allred and Hagedorn for introducing this important legislation, which would rightfully reinstate the 48-hour review policy. [Read more.](#)



Top military health care officials visit Naval Hospital Bremerton

The Honorable Thomas McCaffery, assistant secretary of Defense for Health Affairs, and U.S. Army Lt. Gen. Ronald J. Place, Defense Health Agency (DHA) director, were ...

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could save a life.

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VeteransCrisisLine.net



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



House Holds Hearing on VA Character of Discharge Determinations

On Wednesday, the House Veterans' Affairs Subcommittee on Disability Assistance and Memorial Affairs held a hearing on VA's character of discharge determination process. In order to receive benefits from VA, the character of a veteran's discharge from military service must be under other than dishonorable conditions. For veterans who receive an other-than-honorable discharge, VA should examine the character of the veteran's discharge to determine benefits eligibility. [Watch the hearing.](#)



VFW Testifies at House Subcommittee Hearing

On Thursday, VFW National Legislative Service Deputy Director Matthew Doyle testified at a hearing hosted by the House Veterans' Affairs Subcommittee on Disability Assistance and Memorial Affairs. The bills discussed covered issues regarding burial benefits, life insurance, and reinstatement of the 48-hour rule. At the hearing, Doyle stated, "We cannot stress enough how important 48-hour review is for the timely and accurate delivery of veterans' benefits. It became so ingrained in the disability claims process, both paper-based and digital, that it is difficult to imagine what the future of veterans claims will look like without it. Accordingly, we strongly urge the passage of H.R. 7443, to reinstate 48-hour review." [Watch the hearing.](#) [Read the testimony.](#)



Links to Other Stories

1. Army Veteran earns her college degree at 62
2. Bhaskar Patel Sentenced in Kickback and Bribery Scheme in Connection with Government Contracts
3. Better Hearing for Veterans, remotely
4. Secondary Disorders Due to New Immunotherapy?
5. America's Adopt A Soldier donates laptops, mobile phones to keep Veterans connected
6. Two lawmakers want to recoup bonuses from VA doctor charged with killing patients
7. Soldiers and suicide – this is what my own battlefield wounds taught me
8. Innovation in Veteran posttraumatic care requires collaboration
9. Second Chances for Veterans from Veterans Treatment Court
10. Owners of Groveland Companies Sentenced for Defrauding Government Contracting Programs



VA FY2021 budget set for full appropriations committee markup

House Appropriations Committee meets to consider the Report on the Suballocation of Budget Allocations for FY 2021 and Full Committee Markup of State and Foreign Operations, Military Construction and Veterans

Affairs, and Agriculture Appropriations Bills on Thursday, July 9 at 10:00 am in room 1100 Longworth House Office Building, Washington, DC 20515.

Watch hearing live at

<https://appropriations.house.gov/events/markups/fy2021-report-on-the-suballocation-of-budget-allocations-state-and-foreign-operations>

Below is a summary of the allocations for VA FY2021 budget scheduled for markup..

The bill provides a total of \$104.8 billion in discretionary appropriations for VA, an increase of \$12.3 billion above the 2020 enacted level and \$35 million below the President's budget request. These resources will serve to expand access to services for Veterans and will boost oversight and accountability across the department. Of this amount, the bill includes:

- \$90.0 billion for Veterans Medical Care, an increase of \$9.8 billion above the 2020 enacted level and equal to the President's budget request. Of this amount:

- o \$10.3 billion for Mental Healthcare, an increase of \$865 million above the 2020 enacted level and \$40 million above the President's budget request, including \$313 million for suicide prevention outreach.

- o \$661 million for Gender-specific Care for Women, an increase of \$76 million above the 2020 enacted level

and \$35 million above the President's budget request.

- o \$1.9 billion for Homeless Assistance Programs, an increase of \$81 million above the 2020 enacted level and \$40 million above the President's budget request.
- o \$504 million for Opioid Abuse Prevention, an increase of \$102 million above the 2020 enacted level and equal to the President's budget request.
- o \$300 million for Rural Health Initiatives, equal to the 2020 enacted level and \$30 million above the President's budget request.
- o \$84 million for Whole Health Initiatives, an increase of \$20 million above the 2020 enacted level and \$20 million above the President's budget request.
- o Additionally, the bill includes \$94.2 billion in advance fiscal year 2022 funding for Veterans' medical programs – equal to the President's budget request. This funding will provide for medical services, medical community care, medical support and compliance, and medical facilities, and ensure that our Veterans have continued, full access to their medical care needs.

- \$840 million for Medical and Prosthetic Research, an increase of \$40 million above the 2020 enacted level and \$53 million above the President's budget request.

- \$2.6 billion to continue implementation of the VA Electronic Health Record System, an increase of \$1.1 billion above the 2020 enacted level and equal to the

President's budget request. The bill also continues GAO oversight of this program to ensure that the EHR system is implemented in a timely manner.

- \$1.8 billion for VA Construction, an increase of \$139 million above the 2020 enacted level and equal to the President's budget request. Within this amount, \$1.4 billion is for Major Construction and \$400 million is for Minor Construction.

- \$3.2 billion for operating expenses of the Veterans Benefit Administration, an increase of \$62 million above the 2020 enacted level, to ensure the prompt processing of disability claims. The bill also continues rigorous reporting requirements to track each regional office's performance on claims processing and appeals backlogs.
 - o Additionally, the bill includes \$145.3 billion in advance mandatory funding for VA benefit programs, equal to the President's budget request.

- Within the total for the Department of Veterans Affairs, to respond to sharply rising costs in Veterans health care, the bill provides \$12.5 billion in emergency spending. This funding supports the following:
 - o Medical Services
 - o Medical Community Care

- o Medical Support and Compliance
- o Medical Facilities
- o Veterans Electronic Health Record
- o Information Technology Systems



Army health care professionals share their call to serve

Recently, the Army held an ‘Army National Hiring Days’ as an Army-wide virtual campaign showcasing the U.S. Army’s, training, benefits and education to ...

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Congress Urges VA to Implement GAO Recommendations

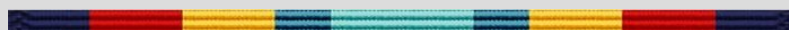
On Wednesday, a [bipartisan bicameral letter](#) lead by House Committee on Veteran's Affairs Chairman Mark Takano (D-CA) supported the recommendations by the Government Accountability Office (GAO) report, [Sexual Harassment: Inconsistent and Incomplete Policies and Information Hinder VA's Efforts to Protect Employees](#). Between mid-2014 and mid-2016, 18 – 27% of VA employees were victims of sexual harassment. The GAO report found that VA lacks mandated reporting and oversight of sexual harassment complaints, fails to adhere to Equal Employment Opportunity guidance, and is insufficient in maintaining policies and training VA employees to recognize and address sexual harassment.



Leveraging respiratory surveillance to respond to COVID-19

As the COVID-19 pandemic emerged and spread around the world, the Department of Defense funded health surveillance activities to rapidly support military forces living ...

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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! (Updated 07/17/20)

1. [Support Veterans Economic Recovery Act!](#)
2. [Support NDAA Provision to Authorize A Study of Agent Orange Exposure of Service members on Guam](#)
3. [NDAA Amendment to Provide Benefits to Vets Exposed to Agent Orange](#) Ask Your Senator to please support HR. 3224 The Deborah Sampson Act
4. [PLEASE ASK YOUR SENATOR TO SUPPORT TESTER AMENDMENT 1972 TO S.4049 National Defense Authorization Act](#)
5. [Please Ask Your Representative to Support Rep. Harder Amendment 264 to the FY2021 NDAA H.R. 6395](#)



White House & VA Launch REACH

The White House and VA launched the REACH national public health campaign, which is a call to action to engage the nation in preventing suicide. The goal of REACH, which was established by the [President's Roadmap to Empower Veterans and End a National Tragedy of Suicide \(PREVENTS\)](#), is to change the conversation about suicide. "The REACH campaign will inspire and educate all Americans — encouraging them to share their own struggles and to reach out to those who are hurting. It will engage our Veterans to help lead the way as we change how we think about, talk about and address suicide," said PREVENTS Executive Director Dr. Barbara Van Dahlen. [Learn more.](#)



HCE celebrates 10 years focused on hearing health

A decade has passed since a rising trend of hearing loss among military service members prompted Congress to mandate a new center of excellence dedicated to ...

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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

VA Reinstates In-Person Services at 100+ Hospitals

VA announced more than 100 VA medical facilities have reinstated at least one in-person service within their direct health care delivery system after certain services were temporarily on hold or reduced due to the COVID-19 pandemic. VA leadership reviews and considers many factors daily, including community infection rates, to determine when it is safe for a facility to expand services. Changes have been made to VA spaces to help people maintain at least six feet of distance as well as requiring everyone who enters a VA facility to wear a cloth face covering. “We will continue to provide a safe environment for both veterans and employees,” said VA Secretary Robert Wilkie. [Read more.](#)



Office of Inspector General

1. [COVID-19: FEMA's Role in the Response and Related Challenges](#)
2. [Medicaid: Primer on Financing Arrangements](#)
3. [Military and Veteran Support: Performance Goals Could Strengthen Programs that Help Servicemembers Obtain Civilian Employment](#)



Life support training continues for MHS clinical staff

Life support serves as the cornerstone of medicine, according to Navy Cdr. Thomas Sather, life support training manager at the Defense Health Agency. However, the close contact ...

[Read More](#)



Military Sexual Harassment and Assault Survivors Share Experiences

In the wake of the confirmed death of Army Spc. Vanessa Guillén, the #IamVanessaGuillen hashtag on social media has empowered service women and women veterans to share their experiences of military sexual harassment and assault. Also shared are similar themes of frustration with the chain of command and a deeply-rooted culture. Martina Chesonis, an officer in the Air Force Reserve said, “You know if it’s not you, it’s one of your peers who has experienced it.” Almost 90 lawmakers called for an investigation into Guillén’s disappearance and death by the Department of Defense Office of Inspector General. [Read more.](#)



VA Offers Debt Relief to Veterans Through 2020

VA announced its commitment to extend debt relief through the end of 2020 to veterans adversely impacted by the COVID-19 pandemic. VA is suspending all actions on veteran debts under the jurisdiction of the Treasury Department. This includes the suspension of collection action or extending repayment terms on pre-existing VA debts, whichever the veteran prefers. For benefit debts, veterans should contact the VA Debt Management Center at 1.800.827.0648. For health care debts, veterans should contact the Health Resource Center at 1.866.400.1238 or <https://www.pay.gov>.



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COVID-19 Antibody Testing Available with Blood Donations

For a limited time, the American Red Cross will provide free COVID-19 antibody testing for all blood, platelet, and plasma donations. The antibody test is intended to determine whether your immune system has responded to the COVID-19 infection, not to diagnose illness. The Red Cross strongly urges healthy, eligible individuals who are feeling well to give blood to help maintain a sufficient supply for those battling COVID-19, other infections, and trauma victims. Please schedule an appointment by using the Red Cross Blood Donor app, visiting [RedCrossBlood.org](https://www.RedCrossBlood.org), or calling 1.800.RED.CROSS (1.800.733.2767).

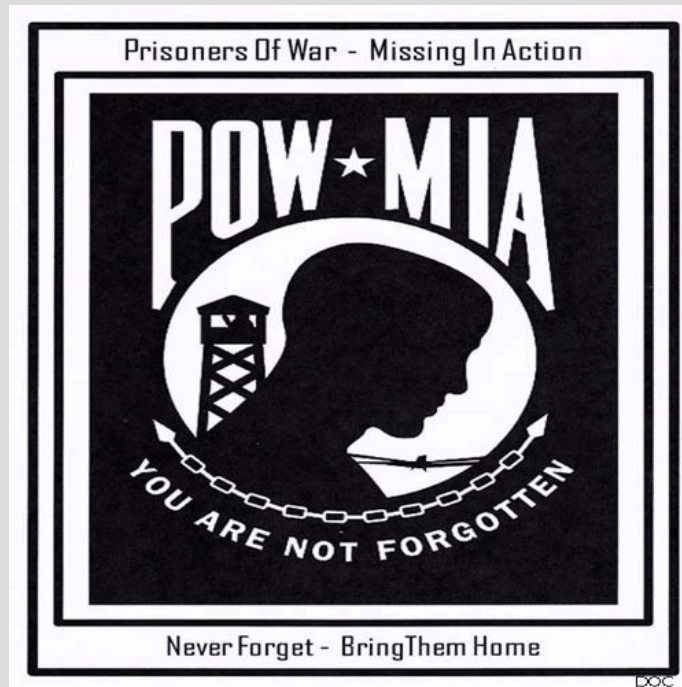


U.S. military deploys to Texas, California for COVID-19 response

At the request of the Federal Emergency Management Agency and state officials, approximately 740 Department of Defense medical and support professionals from ...

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For some, working from home brings neck and back pain

"There's no place like home" may be an appropriate sentiment for people who favor working from the comfort of home during the novel coronavirus pandemic. However...

[Read More](#)



VA Building a Resilient Veterans' Health Care Workforce

The Senate Veterans Affairs Committee held a hearing regarding the management of the Department of Veterans Affairs' workforce. The hearing focused on

recruitment, retention and the building of a resilient veterans' health care workforce.

The VA hired more than 23,000 personnel (most of them in permanent positions) in a 3 months period, which is double the amount they've hired in the previous 3 months. This action is mostly to assist the VA's fourth mission of helping with the national response to the current coronavirus. Among the measures to achieve this rapid hiring expansion are the introduction of policies such as:

- Lifting pay limitations.
- Reducing hiring timeline.
- Reducing onboarding timeline.
- Optimizing resources.
- Encouraging retirees to return to the workforce.

To bolster recruitment, the VA established an integrated Staffing Command Cell to drive accelerated hiring and to manage the deployments of staff to affected areas across the nation. The VA is asking Congress to provide flexibility with the hiring process. The VA assured the SVAC, despite more than 47,000 vacancies, there is no gap in care for veterans.

The resiliency plan includes training, monitoring stress of employees and providing health and safety measures to develop an overall healthy workforce. The

VA claimed at the hearing that the cross-training of ambulatory nurses, empowering clinical staff to work at the top of their licensing and providing incentives have all greatly helped with resiliency. These policies have enabled the VA to bring back retirees who have vast experience and helped stabilize retention rates.

The VA assured the committee that it is monitoring the hiring process to ensure there is no unintended consequences while also tracking the progress of implementing the Mission Act to ensure the goals are being met. The VA hopes to permanently establish some of the temporary policies that allowed them to achieve this goal. The VA looks forward to working with the Senate Veteran's Affairs Committee to maintain the VA's ability to hire quickly and eliminate the barriers to attracting and retaining top talent.





National Service Commission Issues Final Report

The Commission on Military, National, and Public Service has released its final report on the need for a mandatory national service program, including military service. The FRA participated in a round-table discussion with the commission. In January 2019, the FRA surveyed its members about mandatory national service. The online survey asked, "Should Congress enact a mandatory military service/national public service program?" The responses were:

Yes, for men only - 14.7%

Yes, for men and women - 67.8%

No - 10.5%

Unsure/don't know - 7.4%

The results were shared with the commission, who in turn agreed with the majority of FRA members and recommended that both men and women be required to register for Select Service. Currently, only men older than the age of 18 are required to register.

The commission wants to create a common expectation of service among American people, so nobody is surprised by the questions "How have you served?" or "How will you serve?"





**Our values
match yours.**



www.veterans-for-change.org



#LiveWholeHealth: Being Grateful for Your Body

We often don't appreciate how well our body works until it doesn't. Every Veteran had a time in life when he or she felt physically fit. Many Veterans still carry a photo of themselves in their dress uniform as a reminder of those younger, healthier days. Injuries, inflammation, the passage of time, and lifestyle choices [...]

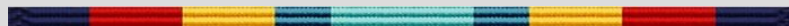
[Read more of this post](#)



New invention helps protect health care workers during pandemic

If necessity and innovation are the driving forces behind invention, then the “COVID-19 Airway Management Isolation Chamber,” or CAMIC, is the perfect creation. The device...

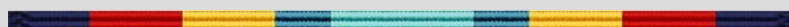
[Read More](#)



VA News

This week's VA News focuses on three ways the department uses technology to ensure Veterans can access its services and high quality health care.

[Read more of this post](#)



Military Adaptive Sports Program aids with healing

Retired Army Col. Michael Malone soldiered through combat deployments, traumatic brain injuries, and a diagnosis of ...

[Read More](#)



Roe Introduces Bill to Modernize Eligibility for VA Healthcare for First Time in More Than Two Decades

On July 1, 2020, Rep. Phil Roe, M.D. (R-Tenn.), the Ranking Member of the House Committee on Veterans' Affairs, released the following statement after introducing The Modernizing Veterans' Healthcare Eligibility Act to create a bipartisan commission to assess veterans' eligibility for care within the Department of Veterans Affairs (VA) and make recommendations for how to revise and simplify it for the first time since 1996.

<https://roe.house.gov/news/documentsingle.aspx?DocumentID=400791>



TRICARE FAQs: COVID-19 and Testing

Proper testing can help you slow the spread of the coronavirus. As you learn more about how to protect yourself and the health of others, you may have questions about your TRICARE benefit. The following are some of the most frequently asked questions about testing and COVID-19.

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





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

Honoring those who served



Tester Secures Vote on his Landmark Bill to Provide Benefits to Vets Exposed to Agent Orange as Part of Must-Pass Annual Defense Legislation

Senator's bipartisan Fair Care for Vietnam Veterans Act clears key hurdle; bill requires VA to provide benefits for veterans suffering from diseases associated with exposure to Agent Orange.

[https://www.testersenate.gov/?](https://www.testersenate.gov/?p=press_release&id=7563)

[p=press_release&id=7563](https://www.testersenate.gov/?p=press_release&id=7563) Senate is expected to vote on the S.4049, the National Defense Authorization Act of 2021 when they return from July 4th recess. H.R. 6395 NDAA companion bill in house.

Senator Tester, D-MT, serves as Ranking Minority Member on Senate Veterans Affairs Committee



TRICARE Qualifying Life Event: Marriage

If you're newly married or marriage is in your immediate future, it's important to learn how getting married impacts your health plan options. Spouses of service members are eligible for TRICARE coverage. Your spouse's options will depend on your military status and where you live.

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



TRICARE Dental Program Enrollees Receive Annual Maximum Increase

In response to COVID-19, the annual maximum for TRICARE Dental Program (TDP) enrollees was raised. TDP enrollees now have an additional \$300 of coverage for their dental care this contract year. The contract year runs from May 1, 2020 to April 30, 2021. It's the latest of recent TRICARE changes introduced to improve your access to care during the national emergency due to the coronavirus pandemic.

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



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



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CALVET SECRETARY VITO IMBASCIANI RELEASES STATEMENT ON THE VANDALISM OF THE EL SOLDADO STATUE

SACRAMENTO - California Department of Veterans Affairs Secretary Vito Imbasciani MD issued the following statement regarding the vandalism of the El Soldado statue at the State Capitol:

“I am deeply saddened and troubled by the crass vandalism of this significant minority veterans memorial. Monument disputes are not exclusive to the 21st century as memorial landscapes have been profoundly transformed during political upheavals throughout history. However, vandalism of a memorial

dedicated to Mexican American and Latino veterans – men and women who have served in the U.S. Armed Forces in war and in peace – is heartbreaking. This simple monument was built by mothers, daughters and families of heroes who went off to fight in World War II. No vandal can damage the spirit of El Soldado, who stands to honor the past, current and future minority veterans who serve their country with distinction and honor.”

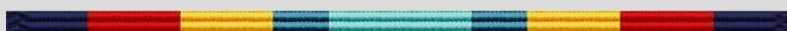
BACKGROUND: The California Mexican-American Veterans Memorial, known as El Soldado, is unique among the many memorials dedicated to war veterans both in Sacramento's Capitol Park and throughout the United States. The statue was established and funded by the mothers and wives of California's Mexican-American soldiers who had fallen during WWII. Creating "La Sociedad de Madres" (Society of Mothers) in 1948, these hard-working women remained on task for many years, hosting fundraisers until they were able to raise enough money to buy the marble stone carved statue from Italy for \$4000.

Originally placed in 1951, at what was once Sacramento's Mexican-American Center, the statue was moved in the 1970s, then relocated again to its current location facing the State Capitol in 1990.

A beautification project, El Soldado was removed from

his pedestal at the corner of 10th Street and Capitol Mall on September 1, 2016. The statue spent several months under special care where experts fixed his broken rifle and cleaned off years of dirt and mold.

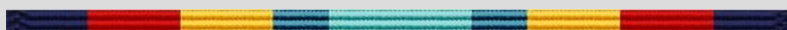
Shortly after removal, CalVet and the Department of General Services began a year-long expansion project of the memorial's plaza. Improvements included enlarging the pedestal and installing ADA accommodating pathways.

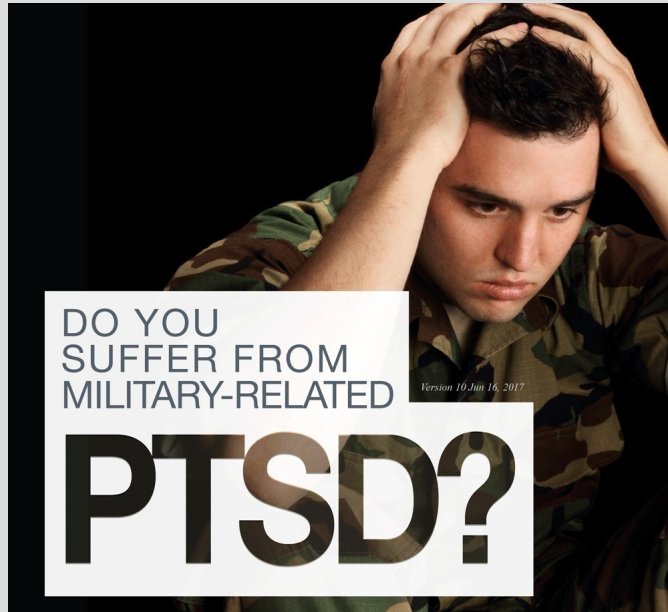


Join the July 30 Webinar on TRICARE Prime and TRICARE Select

Am I eligible for TRICARE Prime? How do I get care with TRICARE Select? What are my costs? Join the "[Are You New to TRICARE Prime or TRICARE Select?](#)" webinar on July 30, from 1 to 2 p.m. ET to find out answers to these questions and more. This webinar will explore the differences between these two health plans. Learn about eligibility, enrollment, care, costs, and other key features of your plan.

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





DO YOU
SUFFER FROM
MILITARY-RELATED

Version 10 Jun 16, 2017

PTSD?

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



**What's a TRICARE Qualifying Life
Event?**

A Qualifying Life Event (QLE) is a certain change in your life, such as moving, marriage, birth of a child, or retirement from active duty. This means TRICARE health plan options for you and your family may change. Learn how certain life events may change your TRICARE health plan options.

Download the new [TRICARE Qualifying Life Events Fact Sheet](#).

The new fact sheet includes:

- A list of TRICARE QLEs
- What your options may be following a QLE
- Information on automatic enrollment

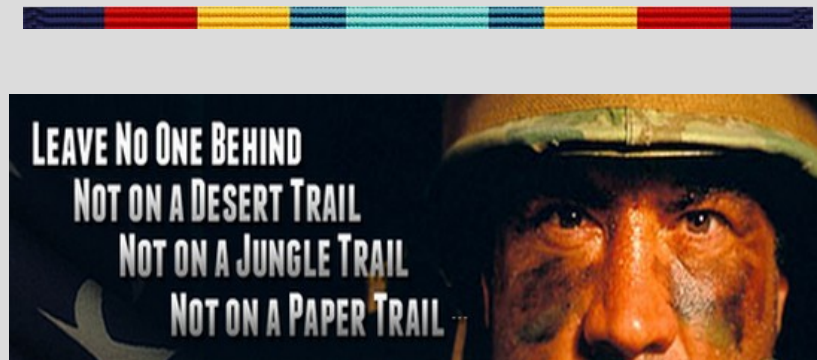
[Download the TRICARE Qualifying Life Events Fact Sheet](#) and browse our other TRICARE publications at www.tricare.mil/publications.



**Defending the Homeland: Fort Knox
Safety Official Donates COVID-19
Convalescent Plasma to Help Others**

A safety specialist from Fort Knox said a recent doctor's visit started her on a path toward donating convalescent plasma to help treat others with COVID-19. Steinhoff said she was surprised to find out that she had contracted COVID-19, especially since according to her doctor it was most likely sometime in December.

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



MilCon/VA Spending Bill Approved by Committee

The House Appropriations Committee (HAC) approved the Military Construction, Veterans Affairs and Related Agencies Appropriations bill (MilCon/VA). Before approving the measure, committee members expressed frustration about the years-long delays in merging the electronic health records (EHR) of the departments of Veterans Affairs and Defense. HAC Ranking Member Kay Granger (Texas) called the

situation "a national disgrace." MilCon/VA Subcommittee Chair Debbie Wasserman-Schultz (Fla.) compared it to delays in the construction of the Capitol Visitor Center, saying eventually appropriators tied the release of funds to certain benchmarks and progress reports. Lawmakers may want to similarly connect requirements to the release of funds to contractors responsible for the health-records merger, Wasserman-Schultz said. FRA supports adequate funding for the Department of Veterans Affairs healthcare and the Department of Defense resource sharing to ensure delivery of a seamless, cost effective, quality services to personnel wounded in combat and other veterans.

To comply with the spending caps set by last year's two-year budget deal, some spending has been designated as "emergency," and is exempt from those caps. This includes \$12.5 billion for the VA community care program created by the MISSION Act. The budget further includes \$137 million to support the processing of Blue Water Navy disability claims. The still unnumbered bill would block funding for installations named after Confederate officers and would also bar funding for the border wall. The bill will now go to the full House for further consideration.



How VA's Regulatory Policies Prevent OTH Veterans from Accessing Benefits

The House Veterans' Affairs Subcommittee on Disability Assistance and Memorial Affairs held a hearing on the Department of Veterans Affairs (VA) regulatory policies preventing "Bad Paper" veterans from critical benefits. Depending on the type of discharge, an "Other Than Honorable" (OTH) discharge can bar former service members from some VA benefits. In 2017, the VA changed their policy to allow mental health care treatments for OTH veterans. The FRA-supported "Honor Our Commitment Act" (S.699/H.R.1985) enacted into law in 2018 required the VA to provide mental health care to veterans with OTH discharges.

Subcommittee testimony revealed that approximately 500,000 living veterans from various wars have been discharged from the military under other than honorable conditions. Some of the service members with OTH discharges were due to PTSD or the "don't ask don't tell" policy. The VA launched a campaign to reach these veterans to apply for discharge upgrade and inform them of their eligibility for benefits.

According to the VA, the discharge review is automatically triggered when the former service member applies for VA benefits. The VA cannot re-

adjudicate the type of discharge but can investigate the facts and circumstances of the discharge to decide on whether a service member is eligible for benefits. The VA uses guidelines for eligibility that mirrors the GI Bill eligibility requirement that was established in 1944.

Testimony before the subcommittee revealed that the VA's campaign to reach former service members was ineffective. The VA is turning away service members based on their discharge status without investigating the circumstances of the discharge and there is no clear guidance for VA Veterans Service Reps. (VSR) to adjudicate these cases. The VA claimed to be training frontline workers on the steps they need to take when an OTH veteran walks into any VA facility to apply for help.

Subcommittee members encouraged the VA to seek their assistance in drafting legislations that will standardize and facilitate the processing of application for benefits by OTH veterans. Some subcommittee members also caution the VA not to move towards a process that will reward bad behavior in the services. The VA staff told the subcommittee that it will research the discharge review process and then request legislative changes to improve and standardize the process for OTH veterans.



Join the Fight Against COVID-19: Donate Convalescent Plasma

Do you want to join the fight against COVID-19? If you had the virus and meet eligibility requirements, you can help the military community. The Department of Defense aims to collect more than 10,000 units of COVID-19 convalescent plasma by Sept. 30.

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



The Defense POW/MIA Accounting Agency announced three 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 Air Forces 2nd Lt. William H. Melville, 20, was

a pilot assigned to the 36th Fighter Squadron, 8th Fighter Group. On Oct. 28, 1943, he was piloting a P-39Q Airacobra fighter on a combat mission over the island of New Guinea, Australian Territory of Papua (current day Papua New Guinea), when his aircraft and two others disappeared after encountering severe weather. Search and recovery efforts in the days following were unable to find any of the aircraft. Interment services are pending. [Read about Melville.](#)

Army Cpl. Richard L. Henderson, Jr., 18, was a member of Headquarters Battery, 57th Field Artillery Battalion, 7th Infantry Division. He was reported missing in action on Dec. 6, 1950, when his unit was attacked by enemy forces near the Chosin Reservoir, North Korea. Following the battle, his remains could not be recovered. Interment services are pending. [Read about Henderson.](#)

Army Cpl. Francis J. Rochon, 21, was a member of Company C, 1st Battalion, 23rd Infantry Regiment, 2nd Infantry Division. He was reported missing in action on Sept. 1, 1950, near Changnyeong, South Korea. The Army officially declared Rochon deceased on Dec. 31, 1953, and declared his remains non-recoverable Jan. 16, 1956. Rochon will be buried July 25, 2020, in Foxboro, Wisconsin. [Read about Rochon.](#)

Marine Corps Reserve Pfc. John E. Gillen, 20, of Champaign, Illinois, was a member of Company D, 1st Battalion, 6th Marine Regiment, 2nd Marine Division, Fleet Marine Force, which landed against stiff Japanese resistance on the small island of Betio in the Tarawa Atoll of the Gilbert Islands, in an attempt to secure the island. Gillen died on the third day of battle, Nov. 22, 1943. Gillen will be buried Aug. 12, 2020, in his hometown. [Read about Gillen.](#)

Air Force 1st Lt. Alva R. Krogman, 25, was a pilot assigned to the 504th Tactical Air Support Group, 7th Air Force, on temporary duty with the 23rd Tactical Air Support Squadron operating out of Nakhon Phanom Royal Thai Air Force Base, Thailand. On Jan. 17, 1967, he was flying an O1-F Birdog aircraft as part of a flight of two planes conducting a visual reconnaissance mission in Savannakhet Province, Laos. Krogman's aircraft was hit by enemy fire in the left wing and went down. He was never recovered and was declared killed in action. Interment services are pending. [Read about Krogman.](#)



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