



Veterans-For-Change Newsletter

A Voice of the Veterans

Week Ending Sunday, May 26, 2019

Volume 10, Issue 21



This-N-That

This coming Monday is Memorial Day, it's a day we set aside for remembering and honoring people who have died while serving in the United States Armed Forces.

I only have two things I'd like to ask of everyone. When you set your dinner table, set a missing man place. And take time to visit a local national Cemetery, many will have services, you just need to check with them and see what event they have planned.

One of the "ACTION" items I had listed in a prior newsletter has been edited to meet the correct need.

It originally reflected two bills, but the latter bill is the one that truly needs the support, and unfortunately those who were responsible for the pre-written E-Mail chose not to edit the letter, so we've made it an action item where you need to make two calls one to each of your Senators, you will see it just below this piece.

I also wanted to apologize for the delay in sending out last weeks newsletter. I became pretty sick two weeks earlier and by last weekend it got pretty bad, but I wanted to make sure the newsletter was out before I had to stop.

At any rate, I am feeling better now, not quite 50%, but slowly getting there.

We are still looking for a new hosting service, and right now we're at a stand still as most want to change platforms, and in the change of platforms and conversions, looks like it could get into the thousands of dollars which is just out of the question. So we continue to move forward and look around for what we can find.

Further down in this newsletter there are is a list of bills in the Senate all needing to be passed. On those we need everyone's support to call both their Senators and ask for their full support, vote, and passage.

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



**Support Agent Orange Blue Water
Navy Bill S. 1195**

The VFC, the Association of the US Navy and the Blue Water Navy Vietnam Veterans Association believes Congress should recognize these veterans who were exposed to Agent Orange herbicide and authorize presumptive status for VA disability claims associated with this exposure. Now is the time to contact your Senators and urge them to support this proposal (**S 1195**).

Please, make the time to call both your Senators toll free: 866-272-6622 or 202-224-3841 or 202-224-3553.



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.



Veterans-For-Change Web Site

The Veterans-For-Change website has been under construction since day one back in 2009 and every day since then. The looks pretty much stay the same, but in the background constant improvement and change is being done to make our website the most user friendly “**One-Stop-Shop**” website to find almost everything you might have tried to find searching the internet.

Almost a hundred people have been involved; collecting web links to documents now houses on the VFC website, collecting thousands of web links for various issues, illnesses and benefits. Creating forums for all eras of service and two forums one just for men and one just for woman where you can go question, comment, share medical and personal

concerns, what ever you'd like it to be.

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

We average **3,452** hits per day, and downloads average **2,798** per day with a total **5,012,624** visitors as of Friday.

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

www.veterans-for-change.org

- Documents Library with over 17,275 documents on-line (Updated: 05/23/19)
- FAQ's with more than 1,600 FAQ's and answers
- Multiple Forums
 - o Afghanistan Veterans
 - o FMP - Foreign Medial Program
 - o Gulf War & Desert Storm Veterans
 - o Iraq Veterans
 - o Korean Veterans

- o Men Veterans Forum
- o Mental Health for Veterans (Counselor Needed)
- o Political Issues
- o Suggestion Box
- o The Mess Hall
- o VA Hospitals and Medical Centers
- o Veteran Affairs
- o Vietnam Veterans
- o Welcome Mat
- o Women Veterans Forum
- o WW II Veterans
 - Job Postings
 - Memorial Pages (Updated: 10/30/18) (37 Added)
 - News (Articles On-Line: **8,554**)
 - Polls
 - Web Links, more than **4,926**, Added 16 New Links (Updated: 05/07/19)

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





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



**Feedback, Please! Take the
TRICARE Publications Survey**

Do you read TRICARE publications to learn more about your TRICARE medical and dental benefit? Maybe you've recently downloaded the TRICARE Costs and Fees Sheet or TRICARE For Life Handbook? If so, share your feedback to help us improve your TRICARE benefit resources. Read the full article [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 Veterans-For-Change on MEWE Social Media~

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

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

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

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

We know most people don't like change, however, this new Social Media Site, [MEWE.COM](#) has no

advertisers, truly respects privacy and protects your security far better than Face Book ever could. They also have a fantastic customer service group who actually does respond to your messages, suggestions, ideas and more!

We hope you will join us on this new site.

VETERANS-FOR-CHANGE

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

HOMELESS HEROES PROGRAM OF VETERANS-FOR-CHANGE

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

AMVETS GROUP

www.mewe.com/join/amvetsgroup

VETERANS SOCIAL GROUP

www.mewe.com/join/veteranssocialgroup

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

www.mewe.com/join/usavetsupportinggodallwhoserveandserve

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





Join May 30 Webinar on TRICARE Coverage for College Students, Young Adults

Will your child be heading to college, graduating, or turning age 21 soon? If so, you don't want to miss this month's webinar. Join TRICARE for the "TRICARE Coverage for College Students, Young Adults," webinar on Thursday, May 30, from 1 to 2 p.m. ET. This webinar will discuss health care options for children moving away to college and those aging out of TRICARE.

Read the full article [here](#).



UPDATE

Senate Veterans Affairs Committee hold hearing on pending legislation

Pending Legislation

On Wednesday, May 22, 2019, the Senate Veterans' Affairs Committee will hold a hearing on several bills.

Time: 02:30 PM

Location: Russell Senate Office Building SR-418

Agenda

S. 123 Ensuring Quality Care for Our Veterans Act

S. 221 Department of Veterans Affairs Provider
Accountability Act

S. 318 VA Newborn Emergency Treatment Act

S. 450 Veterans Improved Access and Care Act of
2019

S. 514 Deborah Sampson Act

S. 524 Department of Veterans Affairs Tribal

Advisory Committee Act of 2019

S. 711 Care and Readiness Enhancement for Reservists Act of 2019

S. 746 Department of Veterans Affairs Website Accessibility Act of 2019

S. 785 Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019

S. 805 Veteran Debt Fairness Act of 2019

S. 850 Highly Rural Veteran Transportation Program Extension Act

S. 857 A bill to amend title 38, United States Code, to increase the amount of special pension for Medal of Honor recipients, and for other purposes.

S. 980 Homeless Veterans Prevention Act of 2019

S. 1101 Better Examiner Standards and Transparency for Veterans Act of 2019

S. 1154 Department of Veterans Affairs Electronic Health Record Advisory Committee Act

S. ___ *Janey Ensminger Act of 2019*

S. ___ A bill to amend title 38, United States Code, to extend the authority of the Secretary of Veterans Affairs to continue to pay educational assistance or subsistence allowances to eligible persons when educational institutions are temporarily closed, and

for other purposes.

Please call both your Senators in DC and kindly request they support and help pass the above bills to help Veterans and families!



Pay Raise, \$750 Billion Defense Policy Bill Gets Senate OK

The Senate Armed Services Committee resoundingly passed a defense policy bill May 22 that authorizes \$750 billion in Pentagon spending in fiscal 2020, establishes the U.S. Space Force and provides funds for the largest pay raise for active-duty troops in nearly a decade. In a 25-2 vote following a day-long debate on the proposed legislation and the adoption of 298 of 433 proposed amendments, the committee passed provisions that address a number of personnel problems, allow for the purchase of new ships and aircraft, and support overseas contingency operations. Read more about the bill [here](#).





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

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

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

S. 514 aims to eliminate barriers to care by:

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

- Requiring VA to report on the availability of prosthetics for women veterans; and
- Centralizing all information for women veterans in one easily accessible place on VA's website.

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

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

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

Take Action



Only 55% of Americans Know Why the Nation Marks Memorial Day, Survey Finds

Only 55% of Americans know what Memorial Day is about, and only about one in five plan to fly a flag at half-staff or attend a patriotic event on May 27, according to a Harris poll survey commissioned by the University of Phoenix. The survey, conducted April 9-11 among 2,025 adults, showed that only 28% had attended a local ceremony or patriotic event on a previous Memorial Day. It also found that only 23% had flown a flag at half-staff, while 22% had left a flag or flowers at a gravesite or visited a military monument. Only 55% could correctly describe Memorial Day as a day to honor the fallen from all the nation's wars, the Harris survey states, and 45% said they either always or often attended a commemoration activity. About 27% of those surveyed thought Memorial Day honored all military veterans, 5% thought it honored those currently serving, and 3% thought the day marked the official beginning of summer, the survey states. Read more about the survey [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





Get to Know Your TRICARE Select Plan

With TRICARE Select, you can choose your own TRICARE-authorized provider and manage your own health care. This means the plan is like a preferred-provider organization, or PPO plan. A primary care manager isn't assigned to you. For specialty care, you don't need a referral to see TRICARE-authorized specialty care providers. TRICARE Select differs from TRICARE Prime.

Read the full article [here](#).



**Search Over 1,000 Nationwide Jobs
Now**

Hundreds of companies are looking for Veterans.
Search over 1,000 nationwide jobs now and find
your next opportunity.



**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



VA Ready to Roll Out Mission Act Program on June 6 But Expect Glitches: Officials

The Department of Veterans Affairs is on track for the June 6 rollout of the transformative Mission Act program to expand private health care choices, but initial glitches should be expected, officials said May 23. Officials stressed that the benefits of a system giving veterans more say in their own health care outweigh any drawbacks. The new program, officially called the "Maintaining Internal Systems and Strengthening Integrated Outside Networks (MISSION) Act," will replace the previous Choice program that veterans and private doctors complained was riddled with inefficiencies in administration and delays in payments. About 70% of veterans currently have their own health insurance, either through Medicare, Medicaid or their employers. The officials said they expect a spike in the number of veterans using health care through the VA under the new program. Read more about the program [here](#).





AMERICAN SOLDIERS

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



Lawmakers Push Bills to Improve Veteran Care, Increase Medal of Honor Stipends

Senators considered 17 veteran-centric bills Wednesday, weighing proposed legislation on subjects such as mental health and unlicensed physicians at the Department of Veterans Affairs to health care for women and newborns, as well as stipends for Medal of Honor recipients.

The Senate Veterans Affairs Committee considered three bills introduced by veterans who now serve in the Senate. The first, from Sen. Tom Cotton, R-Arkansas, would increase the monthly stipend for Medal of Honor recipients from roughly \$1,300 to \$3,000 per month. Republican Sen. Joni Ernst, a former Iowa National Guard officer, pressed for her bill, the Ensuring Quality Care for our Veterans Act, which would require a third party to review VA medical care provided by physicians who had their licenses terminated for cause before they were hired by the federal government. The third piece of legislation introduced by a veteran is the Highly Rural Veteran Transportation Program Extension bill, which would allow the VA to provide grants to veteran service organizations for transporting vets to health care services. Sen. Dan Sullivan, R-Alaska, a former Marine, is the bill's sponsor. Read more about the measures [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.

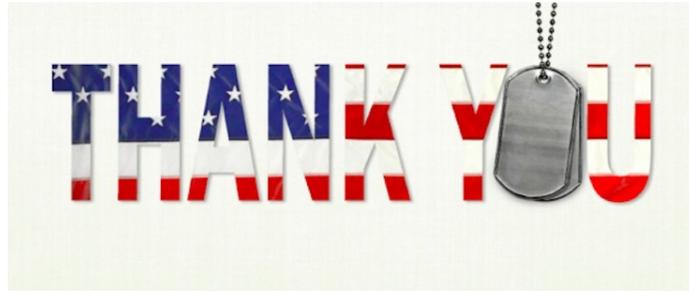
DAV Resolution No. 173 supports VA's provision of child care services and assistance to veterans accessing needed VA health care, benefits, education, employment, rehabilitative or other specialized services offered.

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



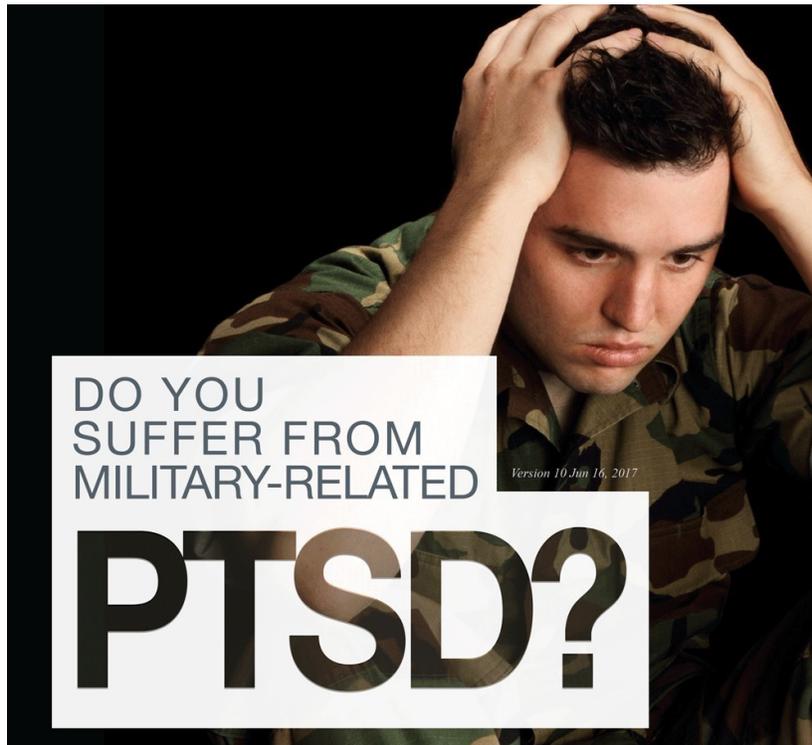


Download Your Region's TRICARE Health Matters Newsletter Today

Change is the only constant in life, which is particularly true in military life. When life changes for you and your family, your TRICARE health plan options may also change. In this newsletter, learn about TRICARE Qualifying Life Events, like moving, a child going away to college, or adding a new family member. Also, learn about referrals and authorizations, sun protection, and much more.

Download the latest East Region or West Region newsletter (2019 - Issue 2) at www.tricare.mil/publications.





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



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

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

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

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

These bills are in line with DAV Resolution No. 023 which calls for comprehensive and scientifically rigorous research by the VA into the therapeutic benefits and risks of cannabis, cannabis-derived

products as a possible treatment for service-connected disabled veterans.

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

Take Action

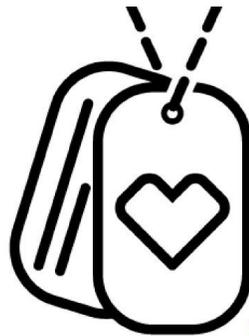


Free Museum Visits for Military Families, Guard, Reservists

For the last 10 years, the Blue Star Museums program has connected military families and guests with free museum visits at some really stellar locations annually. What started as a small program in 2009 between then-new nonprofit Blue Star Families and the National Endowment for the Arts has since exploded to a partnership featuring more than 2,000 museums nationwide. This year's museum program started May 18 and runs through Labor Day. The program is open to active-duty ID card holders and their families as well as Guard and Reserve members and their families. Read more about the program [here](#).

Employer Spotlight: Aerojet-Rocketdyne is Hiring Vets

Give your career rocket power. [View jobs now.](#)



Our values
match yours.



www.veterans-for-change.org

White House VA Hotline Has Received More Than 250,000 Calls

A hotline aimed at addressing questions and concerns from veterans and veteran community members received more than 250,195 calls between June 1, 2018, and May 14 of this year, according to a news release. The hotline, 855-948-2311, fields calls 24 hours a day year round. Over half of the calls are general Department of Veterans Affairs inquiries. Problems that can't be solved right away are logged as cases. To date, about 94 percent of the 157,346 cases have been resolved, the release states. Wait time on the hotline is about nine seconds, and calls last about 15 minutes, according to the release. Read more on [VA.gov](https://www.va.gov).





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 Now Notifying Vets Directly of Home Loan Funding Fee Exemption

You might not know that the VA charges you a "funding fee" when you use a VA home loan. The fee is required by law and is used by the department to offset the taxpayers' cost of offering the benefit. This funding fee can range from 1.25% to 2.4% of the loan value for first-time homebuyers. But there is a little-known exemption to this rule. Veterans who have been awarded a VA disability rating are exempt from the funding fee. This means that even if you are rated at 0% disability, you are exempt from paying that fee. Surviving spouses of veterans who died in service or as a result of a VA-rated disability are also eligible for this exemption. Now the VA is notifying veterans in their home loan welcome that they may qualify for the exemption. Read more [here](#).



Military Advocates Push for Stricter Oversight of Predatory Lenders

Six military and veterans advocacy groups have asked the federal government to increase its oversight of lenders who work with military service members to ensure they don't prey on unsuspecting or needy consumers. In a May 15 press conference in Washington, D.C., the organizations said the Consumer Financial Protection Bureau, or CFPB, should resume examinations of payday lenders and others to make sure they are complying with the Military Lending Act, or MLA. Read more about the request [here](#).





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



Never forget our fallen!



H.R. 553, Military Surviving Spouses Equity Act

On January 15, 2019, Congressman Joe Wilson introduced H.R. 553, the Military Surviving Spouses Equity Act. This bill would eliminate an unfair offset placed on many surviving spouses of service

members who pass away during active duty or spouses of retirees who die of a service-connected disability.

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

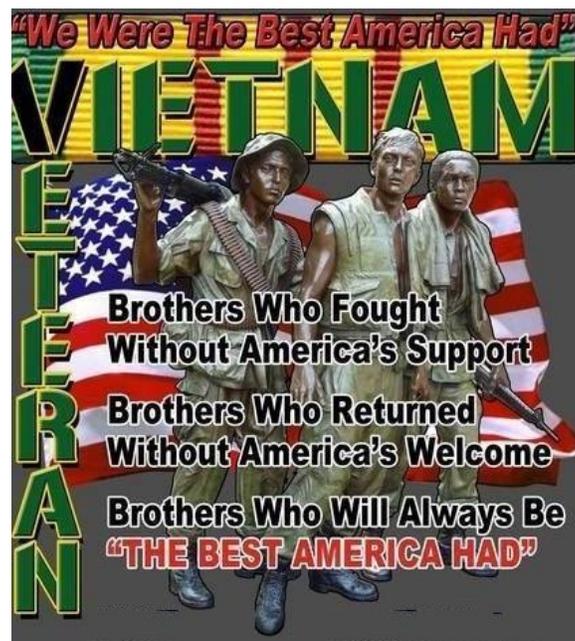
Upon the retiree's death, the SBP annuity is paid monthly to eligible beneficiaries; however, if a surviving spouse is also entitled to DIC, the SBP benefit is reduced by the amount of the DIC benefit (currently \$1,283.11 per month). In general, when DIC benefits are payable but the monthly rate is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

This bill would eliminate the offset and allow surviving spouses to receive both the purchased

SBP annuities and their earned DIC benefits. This bill is in accordance with DAV Resolution No. 014, which calls for Congress to repeal the offset between SBP annuity payments and DIC payments.

Please use the prepared letter to write your Representative to cosponsor and support passage of H.R. 553, the Military Surviving Spouses Equity Act. Thank you for your efforts and support of the Commander's Action Network.

Take Action



Links to Other Stories

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2. [Ask the VA: Should I be screened for lung cancer?](#)
3. [Bible display at Veterans Affairs facility in New Hampshire triggers lawsuit](#)
4. [Costs of Expanding Agent Orange Vet Benefits Perplexing Congress](#)
5. [Glyphosate found in pregnant women](#)
6. [Loophole leaving Veterans liable for ER bills](#)
7. [Make good on promises made to Veterans](#)
8. [Medal of Honor recipient Allen Lynch continues to save Veterans](#)
9. [Scientists Find Hidden Dioxins In African E-Waste Hubs](#) Researchers in Japan have characterized dioxins and other soil contaminants from an e-waste hub in Ghana.
10. [Some Vietnam Veterans are just now experiencing the effect of Agent Orange](#)

11. Supreme Court delays final ruling on 'blue water' Vietnam Veterans benefits
12. Top VA official honored for contributions to women's health
13. Union Accuses VA Secretary of Trying to Strip Workers' Rights in New Proposal
14. VA celebrates 'Science of Hope' during National Research Week
15. VA launches digital campaign encouraging mental health conversations
16. VA lenders subpoenaed as investigators explore whether Veterans are being overcharged for their mortgages
17. VA mortgage lenders hit with federal subpoenas
18. VA nurse gives a family the chance to say goodbye
19. VA proposes new AFGE collective bargaining agreement
20. VA recognizes elementary school students for role in ending Veteran homelessness
21. Veterans urged to learn more about hazardous environments and burn pit exposure

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





TRICARE Beneficiary Bulletin #503

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- TRICARE Select
- TRICARE Health Matters Newsletters

Visit the Multimedia Center for this podcast and previous podcasts at www.tricare.mil/podcasts.



Lawmakers Seek to Slow DoD's Efforts to Slash Medical Billets, Outsource Moves

The House Appropriations Committee moved to rein in the Defense Department as it plans to [cut 18,000 military medical billets](#) and proceeds with [outsourcing its household goods management system](#). The committee on May 21 passed a fiscal 2020 defense spending bill that would withhold \$250 million from the Defense Health Agency to pay for contractors or civilians to work in jobs in military hospitals now held by nearly 18,000 uniformed personnel whose positions will be eliminated or transferred to operational billets. The committee also has asked for more information on plans to close treatment facilities or eliminate health care services at select hospitals or clinics. The bill also contains provisions aimed at delaying the Pentagon's plans to turn the Defense Personal Property Program, or DP3, over to a single private company. Read more about the spending bill [here](#).



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

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

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

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

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

Take Action



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

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

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

TAKE ACTION

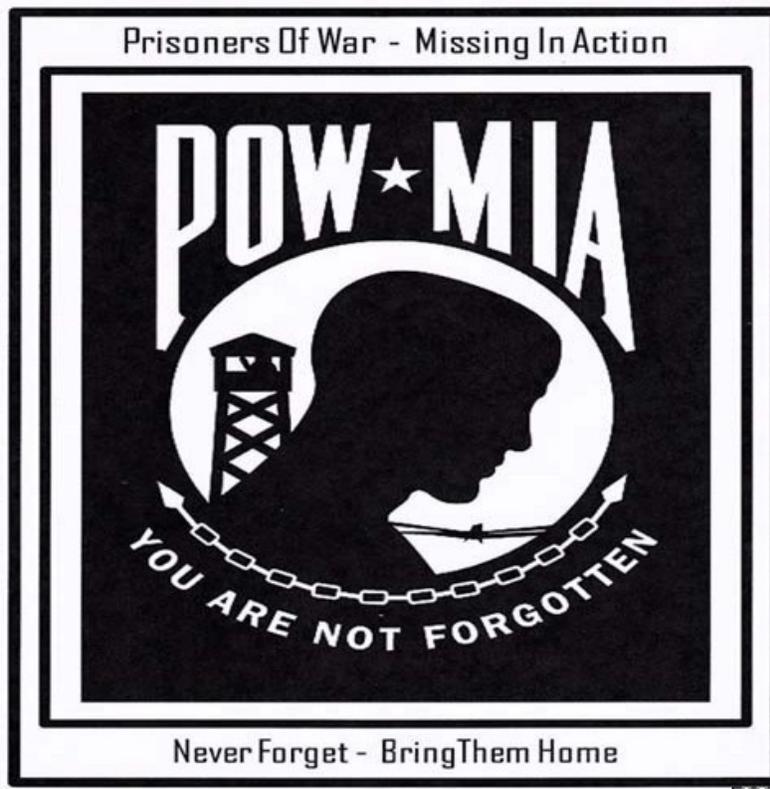




VFW Storms the Hill to #AxeWidowsTax

On Tuesday, the VFW joined veteran and survivor organizations, surviving spouses, and dependents to storm Capitol Hill to urge lawmakers to end the disgraceful Widow's Tax. More than 65,000 surviving military spouses and dependents are unjustly penalized because their loved ones made the ultimate sacrifice for our country. America must honor military survivors, NOT tax them! Stand with the VFW and [call on Congress](#) to #AxeWidowsTax. Watch the [Senate press conference](#) or the [House press conference](#).





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



GAO

U.S. Government Accountability
Office Reports

1. VA Health IT: - Use of Acquisition Best Practices Can Improve Efforts to Implement a System to Support the Family Caregiver Program
2. Veterans Affairs: - Sustained Leadership Needed to Address High-Risk Issues
3. U.S. Secret Service: - Further Actions Needed to Fully Address Protective Mission Panel Recommendations
4. Prescription Opioids: - Voluntary Medicare Drug Management Programs to Control Misuse
5. Medicaid Demonstrations: - Approvals of Major Changes Need Increased Transparency



**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



Navy Cracking Down on Tuition Assistance Eligibility

With its 2019 funding for Tuition Assistance (TA) running out this month, the Navy has decided to make changes to who can use the active-duty education benefit, as well as how much they can use each year. In a [message to the fleet](#), Chief of Naval Personnel Vice Adm. Robert Burke said that the service's demand for TA benefits was 30%

higher than at the same point last fiscal year. As a result, changes will be made effective Oct. 1, 2019, which marks the beginning of fiscal 2020. Burke also said that many junior sailors were using the benefit to attend college classes and not focusing on their military training. The service expects its allocation for TA funding to run out by the end of this month, with no additional money coming from the Pentagon. As a result, no new TA requests will be approved for the four months remaining in this fiscal year. To prevent the problem from recurring next year, the Navy is cracking down on who can qualify for tuition assistance and how much they can use. Effective next fiscal year, all enlisted personnel and officers must have a minimum of two years of service to be eligible to use TA or any Navy College Program for Afloat College Education (NCPACE) courses. In addition to requiring at least two years of time in service, the Navy will also limit how much TA any sailor can use. Read more about the new rules [HERE](#).





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



Congress Advances Legislation to Fix the Kiddie Tax

This week, the Senate and the House both passed legislation to end the Kiddie Tax. The Senate passed S. 1370, the [Gold Star Family Tax Relief Act](#). The House passed H.R. 1994, the Setting Every Community Up for Retirement Enhancement Act of 2019, which includes a fix for the Kiddie Tax. On Wednesday the VFW participated in a press conference to urge immediate congressional action to fix the unintended consequence of the Tax Cuts and Jobs Act of 2017, which doubled the taxes for military surviving children who receive their parent's retirement pay. [Watch the press conference](#). We ask you to **take action** with the VFW and our supporters to end this injustice!



1. [Beckman Coulter Life Sciences Recalls DxH800 and DxH600 and DxH 900 Hematology Analyzers](#)

- Due to Risk of Inaccurate Results
2. Coolhaus Issues Voluntary Recall on Dairy Free Horchata Frozen Dessert Sandwich
 3. Hearthside Food Solutions Issues Allergy Alert on Undeclared Egg Allergen
 4. Hill's Pet Nutrition Additionally Expands Voluntary Recall of Select Canned Dog Food for Elevated Vitamin D
 5. House of Spices (India) Issues Allergy Alert on Undeclared Sulfites in "Laxmi Dried Apricot"
 6. In Association with ADM Milling Co., ALDI Issues Isolated Recall for 5 lb. Bakers Corner All Purpose Flour
 7. New Seasons Market Issues Allergy Alert on Undeclared Eggs in Bacon Shallot Potato Salad
 8. Purely Elizabeth Voluntarily Recalls Granola Due to Potential Presence of Foreign Material
 9. Risk of Cross-Contamination From 24-Hour Multi-Patient Use Endoscope Connectors - Letter to Health Care Providers and Staff at Health Care Facilities Performing Gastrointestinal Endoscopy Procedures
 10. U.S. Trading Recalls RATTAN SHOOTERS in BRINE Due to Undeclared Sulfites
 11. UPDATE: Increased Rate of Mortality in Patients Receiving Abiomed Impella RP System - Letter to Health Care Providers

12. Wegmans Food Markets Issues Allergen Alert on Undeclared Milk in Wegmans Neptune Salad Sold in Six Wegmans Stores Only



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





House Armed Services Hearing on Military Suicide

On Tuesday, the House Armed Services Subcommittee on Military Personnel and House Veterans' Affairs Subcommittee on Health held a joint hearing on Military and Veteran Suicide. Ranking member Trent Kelly (R-MS) expressed that with approximately 20 veterans who die by suicide each day, "we must take decisive action to disrupt the status quo and reverse this epidemic." This summer, DOD will be releasing its first annual suicide report to address military suicides and has started leveraging scientific evidence and learned practices to generate an effective initiative to help service members and their families. [Watch the hearing.](#)



Tax & Credit Information



1. Here's what historic building owners should know about the rehabilitation tax credit
2. IRS releases Data Book for 2018 showing range of tax data including audits, collection actions and taxpayer service
3. IRS: Doing a 'Paycheck Checkup' is a good idea for workers with multiple jobs
4. It's not too late to check IRS payment options
5. It's summertime...and these tips can help make livin' easy for teens with jobs
6. Taxpayer Bill of Rights provides protections



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



MIA Update

The Defense POW/MIA Accounting Agency has announced the identifications of three American servicemen who had been missing and unaccounted for from Korea and WWII. Returning home for burial with full military honors are:

U.S. Army Air Forces 2nd Lt. William J.

McGowan was a pilot, serving with the 391st Fighter Squadron, 366th Fighter Group, 9th U.S. Air Force. On June 6, 1944, he was killed when his P-47 Thunderbolt aircraft crashed while on a mission near the city of Saint-Lô, France. Interment services are pending. [Read about McGowan.](#)

Army Pfc. Roger L. Woods was a member of Company I, 3rd Battalion, 34th Infantry Regiment, 24th Infantry Division, during the Korean War. On July 29, 1950, he was reported missing in action from the vicinity of Kochang, South Korea, following an engagement with enemy forces. Interment services are pending. [Read about Woods.](#)

Army Cpl. Billy J. Butler was a member of Company C, 2nd Engineer Combat Battalion, 2nd Infantry Division, engaged in combat operations against the enemy near Kujang, North Korea. On

Nov. 28, 1950, his unit's defensive positions were attacked and he was captured by the Chinese People's Volunteer Force. Interment services are pending. [Read about Butler.](#)



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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



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CAN MAKE
ALL THE DIFFERENCE!



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