

**VFW POST 1260 BEMIDJI, MN**  
**SURGEON/SERVICE OFFICER'S REPORT**  
August 2017





VFW Action Corps Weekly  
July 28, 2017

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**1. VFW Elects New National Leadership:** The 118th VFW National Convention ended Wednesday in New Orleans with the election of Keith E. Harman as the new VFW commander-in-chief for the year 2017-2018. During his acceptance speech, the Delphos, Ohio, native spoke of the relevance of the nearly 1.7 million members of the VFW and its Auxiliary, that, "every member of our great organization has walked the talk, and every member of our great Auxiliary has lived the fear of having a loved one downrange." He said he is proud to be part of an organization that exists to take care of veterans, service members and their families, and that he is honored to lead it. His theme for his year is "Service not Self," and his goals are to end sequestration, to fully fund the Defense POW/MIA Accounting Agency, to demand better leadership, management and accountability from the Department of Veterans Affairs and to help reduce the veteran suicide crisis to zero. Also elected were Senior Vice Commander-in-Chief Vincent "B.J." Lawrence of Alamogordo, N.M., and Junior Vice Commander-in-Chief William J. "Doc" Schmitz of Corning, N.Y. [Read more here.](#)

**2. Funding Agreement Reached for Choice Program and VA:** On Monday, the VFW asked its members and supporters to call their Representatives and demand they vote "NO" on S.114, which called for the gradual privatization of Department of Veterans Affairs' (VA) health care. The troubling bill would have sent billions of dollars into the private sector, using veterans' benefits to pay for it. Plus, it would have put no new resources into VA to address critical infrastructure and staffing shortages. This call to action worked and the House voted down S.114. Congress will soon pass legislation that would fix the funding shortfall of the Choice Program, make urgently needed improvements to VA's health care system, improve hiring and training for VA doctors and authorize VA to enter into 28 leases for medical facilities. This could not have been accomplished without direct support of VFW members, its supporters and partner veterans' organizations who also took part in the fight against VA privatization. Stay tuned for future action alerts in our fight for veterans' rights.

**3. VFW Lauds Unanimous House Passage of Forever GI Bill:** On Monday, the U.S. House of Representatives showed unquestionable, bipartisan commitment to America's student veterans by voting 405-0 to pass H.R. 3218, known as the Forever GI Bill. The VFW salutes the House for their unanimous support to improve veterans' educational benefits. The vote proves that no matter the political party or ideology, our elected officials are taking care of those who have worn our country's uniform. Strongly supported by the VFW and a coalition of veterans organizations, including VFW's strategic partner, Student Veterans of America, H.R. 3218 addresses current gaps in Post-9/11 GI Bill eligibility and coverage. It ensures more veterans and their surviving family members have an opportunity to pursue their educational goals, such as Purple Heart recipients

who do not have the requisite three years of active service; veterans attending schools that close abruptly through no fault of the veterans; and thousands of involuntarily activated National Guardsmen and Reservists. It also eliminates the 15-year, use-or-lose limitation, which means veterans truly have a lifetime to use their GI Bill. The Senate Veterans' Affairs Committee advanced its version of H.R. 3218. The bill now awaits consideration by the full Senate. The VFW urges its members and supporters to contact their Senators and ask them to pass this vital legislation. [Contact your Senator](#).

**4. Veterans Legislation Roundup:** This week, the House advanced several VFW-supported veterans bills to improve benefits and services. On Monday, the House passed H.R. 2006, the *VA Procurement Efficiency and Transparency Act*, which would encourage efficiency and transparency in VA's procurement processes by mandating high-level parameters for how the department calculates its savings through competition when awarding procurement contracts; H.R.1690, the *Department of Veterans Affairs Bonus Transparency Act*, which would require VA to submit an annual report to Congress regarding performance awards provided to regional office directors, medical center directors, service network directors, and senior executive staff; and H.R. 282, the *Military Residency Choice Act*, which would amend the *Servicemembers Civil Relief Act* to permit the spouse of a service member to elect to use the same residence as the service member for purposes of taxation and voting, regardless of the date they were married. Today, the House also passed: H.R.2772, the *VA Senior Executive Accountability Act*, which would improve transparency by requiring VA to inform Congress about where senior executives are being moved; H.R. 3262, the *Grow Our Own Directive: Physician Assistant Employment and Education Act of 2017*, which establishes a pilot program to provide educational assistance and training as VA physician assistants for certain former members of the armed forces with medical or military health experience; H.R. 95, the *Veterans' Access to Child Care Act*, which would make VA's pilot program for child care a permanent program at VA for veterans who are receiving regular mental health services or other intensive health care services from VA and serve as the primary caretaker of a child; and H.R. 873, the *Global War on Terrorism Memorial Act*, which would authorize the Global War on Terror Memorial Foundation to establish the National Global War on Terrorism Memorial as a commemorative work in the District of Columbia.

**5. VFW Participates in Congressional Opioid Roundtable:** The House Veterans' Affairs Committee hosted a roundtable discussion on the country's opioid epidemic and what the Department of Veterans Affairs is doing to assist veterans struggling with opioid addiction. Discussion participants included Chairman Phil Roe, Ranking Member Tim Walz and the all committee members, KellyAnne Conway, VA providers, VA researchers, Department of Health and Human Services, National Institute on Drug Abuse, Center for Disease Control, Drug Enforcement Administration, Substance Abuse and Mental Health Administration, law enforcement officials and other veteran organizations. The two-hour meeting allowed for in-depth conversation concerning addiction therapy research and how VA can implement best practices focused on patient-centered care with their providers. Chairman Roe also brought to light some of his concerns outside the medical scope of opioid addiction regarding the economic implications of drug abuse, particularly in rural areas already suffering from economic problems. The discussion ended with proper ways to move forward with addiction therapy and alternative methods of treatment. Committee members as well as VA expressed the desire to invest more into research for methods such as acupuncture, possible medical marijuana and telehealth options. At its 118th national convention in New Orleans, the VFW passed a resolution calling on the federal government to fund research on the use of medical cannabis. [Learn more about VA's opioid safety initiative](#).

**6. VFW Hosts Panel Discussion on Women Veterans:** The VFW hosted a panel titled, "Women Veterans: Strong and Growing" during its national convention in New Orleans. The panel included three members from the women's committee, as well as Kayla Williams, the director for VA's Center for Women Veterans. The panel took questions from members regarding VA health care for women. The attendees included both men and women, and grew to five times the attendance size of the 2016 women's panel. Since 2008, the VFW's female membership has grown by 421 percent. [Read more about what the VFW is doing for women veterans](#) and [see video of the panel discussion](#).



**7. MIA Update:** The Defense POW/MIA Accounting Agency announced the identification of the remains of six Americans who had been missing in action from WWII and Korea. Returning home for burial with full military honors are:

-- **Navy Fireman 1st Class Elmer T. Kerestes**, 22, of Holding Township, Minn., will be buried July 29 in Holdingford, Minn. Kerestes was assigned to the USS Oklahoma, which was moored off Ford Island in Pearl Harbor, Hawaii, when Japanese aircraft attacked his ship on Dec. 7, 1941. Kerestes was one of 429 crewmen killed in the attack. [Read about Kerestes.](#)

-- **Army Cpl. Edward L. Borders**, 20, of Harrisburg, Ill., will be buried July 29 in his hometown. Borders was a member of D Battery, 82nd Anti-Aircraft Artillery Battalion (Automatic Weapons), 2nd Infantry Division. Borders' unit, part of Support Force 21, provided artillery fire support for South Korean forces from Changbong-ni. On Feb. 11, 1951, Chinese forces launched a massive counter offensive, forcing the support force to withdraw. Borders could not be accounted for after the unit reassembled in Wonju on Feb. 13. A list later provided by the Chinese reported that Borders died while being held as a POW. [Read about Borders.](#)

-- **Navy Yeoman 3rd Class Edmund T. Ryan**, 21, of Wilbraham, Mass., will be buried August 2 in Arlington National Cemetery, near Washington, D.C. Ryan was assigned to the USS Oklahoma, which was moored off Ford Island in Pearl Harbor, Hawaii, when Japanese aircraft attacked his ship on Dec. 7, 1941. Ryan was one of 429 crewmen killed in the attack. [Read about Ryan.](#)

-- **Army Cpl. Glen E. Kritzwiser**, 19, of Piketon, Ohio, will be buried August 3 in the National Memorial Cemetery of the Pacific in Honolulu. Kritzwiser was a member of Battery C, 15th Field Artillery Battalion, 2nd Infantry Division. Kritzwiser's unit, part of Support Force 21, provided artillery fire support for South Korean forces from Changbong-ni. On Feb. 11, 1951, Chinese forces launched a massive counter offensive, forcing the support force to withdraw. Kritzwiser could not be accounted for after the unit reassembled in Wonju on Feb. 13. He was later reported to have been captured by the Chinese and died while being held at Camp #3, a prisoner of war camp near Changsong, North Korea. [Read about Kritzwiser.](#)

-- **Marine Reserve Pvt. Alberic M. Blanchette** was assigned to Company K, 3rd Battalion, 2nd Marines, 2nd Marine Division. Blanchette's unit landed on the small island of Betio in the Tarawa Atoll on Nov. 20, 1943, against stiff Japanese resistance. Blanchette was killed on the first day of the battle. Interment services are pending. [Read about Blanchette.](#)

-- **Marine Pvt. Joseph C. Carbone** was assigned to Company K, 3rd Battalion, 2nd Marines, 2nd Marine Division. Carbone's unit landed on the small island of Betio in the Tarawa Atoll on Nov. 20, 1943, against stiff Japanese resistance. Carbone was killed on the first day of the battle. Interment services are pending. [Read about Carbone.](#)

## **VA Community Based Outpatient Clinic – Bemidji (218) 755-6360**

- Audiologist appointments must be made through the Fargo VA
- Tele Health staff is available
- Flu Shots are available on a walk in basis Monday through Friday during the flu season.
- New Patient Orientation Group meeting each month check with clinic for time & date
- PTSD Group Meeting (Iraq & Afgan Vets) meets twice a month check with clinic for time & date
- Pain Group Meeting meets every two weeks on Tuesdays check with clinic for time & dates
- Veteran Support Group 2<sup>nd</sup> & 4<sup>th</sup> Tuesdays of the month from 10:00-11:30am at the Bemidji Public Library Meeting Room. The purpose of this group is to share and provide information through supporting, encouraging, listening, understanding, and respecting differences. Please call Shari Kosobuski (612) 360-1432 or the Vet Center at (218) 722-8654 for more information.

Education: <http://www.mymilitaryeducation.org>  
Health Care: 1-877-222-VETS (8387)  
VA Inspector General: 1-800-488-8244  
Suicide Prev. Hotline: 1-800-273-TALK (8255)  
Fargo VA: 1-800-410-9723 or 701-232-3241  
Help Line: 1-855-VET-TALK

For more information on veteran benefits, visit the [Military.com Benefits Channel](#) or contact the VA.

Some of the following information came from Military.com or MilitaryConnection.com. Some of these topics may have a full article to read. If you wish to view the full article on Military.com please follow this address <http://www.military.com> or contact me at [bskipton@att.net](mailto:bskipton@att.net). For more veterans benefits info and updates, visit the [Military Advantage blog](#).

### **Exchanges Soon Opening to Millions of Veterans**

Last month, 12,000 veterans began shopping at the military exchanges by way of a “beta test.” The beta test allowed veterans’ to test the new online exchange shopping experience, which will open for millions of honorably discharged veterans on Veterans Day Nov. 11th. All veterans are being encouraged to confirm veteran eligibility status at <https://www.vetverify.org>. It might be a multi-step process if the Defense Manpower Data Center lacks information to verify that a veteran served and received an honorable discharge.

### **TRICARE Online Patient Portal**

The Defense Health Agency's TRICARE Online Patient Portal (TOL PP) recently upgraded several features. The online features allow TRICARE beneficiaries to schedule appointments, access personal health data by utilizing the "Blue Button" feature, refill prescriptions, access service separation and retirement information, send secure messages to their health care team by using RelayHealth and provides 24/7 access to registered nurses through the Nurse Advice Line. TOL PP is also now available on mobile devices to further enhance access-to-care capabilities. For more information on TOL PP, visit the [TRICARE Online Patient Portal website](#).

### **Lock in a Low Rate with the VA Loan Benefit**

Buying on the brain? Now is a great time to use your VA Loan Benefit. Qualified borrowers can buy or refi with as little as \$0 down, and have no PMI payments with great rates and financing up to \$424,000. [Use your VA Loan Benefit today.](#)

### **The Moving Wall**

In 1982, the Vietnam Veterans Memorial Wall was built and dedicated to those who served and died in the Vietnam War. While attending the dedication in 1982, a group of artists felt the positive power of The Wall and felt it should be shared not only in Washington D.C., but across the country. Sitting at about half the size of the actual Vietnam Veterans Memorial Wall, the two replicas began their journey in Tyler, Texas in 1984. Today,

the walls travel across the country from April to November, to pay tribute to those who made the ultimate sacrifice. For more information, visit the Wikipedia website at and [The Moving Wall homepage](#).

### **Documenting Income and Assets for a VA Loan Application**

VA loans have always had the lowest delinquency rate compared to any other loan program, even though the veteran comes to the closing table with zero down. The VA loan never participated in the “no down payment, no documentation” marketplace that contributed to the mortgage debacle in the 2000s. One of the reasons is because the VA didn’t allow for so-called “stated loans” or “no documentation” loans.

### **VA Loans and Credit Scoring: An In Depth Look**

Mortgage lenders can require a minimum score on VA loans, but did you know the VA actually doesn’t require a specific score? It’s true. Other programs may require a minimum score, but not the VA. The VA does require the lender however to verify a responsible credit history and they do so by reviewing a credit report along with requesting credit scores. How do credit scores work and what makes them rise or fall?

### **VA Offers PTSD Consultation Program**

Roughly eight out of every 100 people will experience post traumatic stress disorder (PTSD) at some point in their lifetime, and almost 500,000 of the Veterans treated by VA have a primary or secondary diagnosis of PTSD. One of the best kept secrets of the Department of Veterans Affairs (VA) is the [PTSD Consultation Program](#) at the National Center for PTSD. The PTSD Consultation Program is valuable for anyone providing mental health support within or outside of VA because all of its services and resources are free, and the consultants are leaders and innovators in PTSD treatment and research. To use the free PTSD Consultation Program resources, providers who treat Veterans can email the PTSD Consultation Program at [PTSDconsult@va.gov](mailto:PTSDconsult@va.gov), call 866-948-7880.

### **Senate Bill: TRICARE Fees, Pay Caps, and More**

The Senate Armed Services Committee has voted to their version of the National Defense Authorization Act bill (S 1519), which the committee approved before Congress began its July 4 holiday break. If the Senate NDAA passes, working-age retirees will no longer be exempt from a host of higher TRICARE fees. The Senate bill also would cut combined Basic Allowance for Housing for dual service couples with children, and the military pay raise next January would be capped at 2.1 percent, as President Trump proposed, versus the House bill’s support of a 2.4 percent hike to match recent private sector wage growth.

### **Tricare Officials to Continue Online Portal Upgrades**

Tricare officials plan more online portal updates meant to make it easier for users to access their health records and prescriptions, and to make doctor appointments. Tricare Online, as the site is known, has long allowed beneficiaries some access to a web-based appointment booking system, health records and prescription refill requests. But until late last year, when officials launched sweeping improvements to the site, it was not user-friendly and was plagued with technical problems.

### **VA Expands Transparency Efforts**

The Department of Veterans Affairs (VA) is taking a further step on transparency and accountability as a follow-on to the VA Accountability and Whistleblower Protection Act signed by the president less than two weeks ago. The department is making public a list of adverse employee actions taken since Jan. 20. This information is posted on the [VA Office of Accountability and Whistleblower Protection website](#), and will be updated weekly. For privacy reasons, the adverse action list will not include employee names, but will give information on the position, VA region or administration and type of adverse or disciplinary action taken.

### **VA Looks at Spray Pain Reliever**

Within the next decade, it may be possible for a Veteran to use a simple nasal spray to reduce pain if an ambitious research study at the [Southeast Louisiana Veterans Health Care System](#) completes early stage laboratory investigation and moves to human clinical trials. Dr. Nicholas Gilpin, who recently was awarded a

research grant from the Department of Veterans Affairs (VA), is working to identify the neurobiological mechanisms in underlying heightened pain states in the context of alcohol dependence and stress disorders. Gilpin and his staff are working to develop therapeutic strategies that reduce pain in Veterans living with PTSD and/or alcohol use disorder. For more information read the [VA Vantage Point Blog](#).

### **VA Partners to Better Serve Women Vets**

The Department of Veterans' Affairs [Center for Women Veterans](#) and the National Association of State Women Veterans Coordinators (NASWVC) are now partners in serving women veterans. The new partners will collaborate to advance and improve the quality of life for women Veterans by working to enhance accessibility to services, evaluate existing programs and gain information from the individuals that directly serve women Veterans. For more information about the NASWVC or to locate your state's coordinator, visit the [National Association of State Women Veterans Coordinators \(NASWVC\) website](#).

### **New GI Bill Would Make College Education a Lifetime Benefit**

A bipartisan bill was introduced in the House of Representatives on Thursday to make the GI Bill for post-9/11 veterans a lifetime education benefit for new recruits who go on to serve three years of active duty. For more details, see [this Military.com article](#).

### **VA Offers New Prosthetic**

The Life Under Kinetic Evolution (LUKE) arm, the world's most advanced commercial prosthetic, is about to change the lives of Veterans and others with upper arm amputations. Unlike less-advanced prosthetics, the entire LUKE arm can move as one unit, reducing the labor-intensive process of controlling one joint at a time. The LUKE arm also features the first commercially available powered shoulder, with up to 10 powered degrees of freedom. For more information, read [the VA Vantage Point Blog](#).

### **New GI Bill in the Works: The Full Details**

You may have heard about a new "forever GI Bill" that is working its way through Congress and may become law by the end of the year. What exactly is in this law? Is it good for you? We attempt to cut through all the legal language and [explain it here](#).

### **How GI Bill Reform Might Help (and Hurt) Families**

If lawmakers and veteran advocates have their way – and it looks like they will – a set of big changes will soon hit the post-9/11 GI Bill, including a trio of changes that could impact the amount of housing allowance you receive each month that you or your veteran is in school. But the bill includes more than 25 other individual changes — and some of them impact military and veteran family members. [Here's the rundown](#).

For more on GI Bill benefits, visit the [Military.com GI Bill section](#).

### **Momentum Builds for GI Bill Reform Package to Benefit Thousands**

The House and Senate veterans' affairs committees are moving with surprising speed and unanimity to correct inequities under the Post-9/11 GI Bill and boost or restore education benefits for thousands of veterans and select groups of dependents and survivors. For more details on the proposed changes, see [this Military Advantage post](#).

### **VA Launches Suicide Prevention Effort**

The Department of Veterans Affairs (VA) is launching an initiative called 'Reach Vet' to help prevent suicides and be more responsive to the mental health needs of patients. The new program was launched at the Bay Pines VA Health Care System in April, 2017. The program identifies the top one percent of veterans at risk just by reviewing the health records of veterans. These names are provided to the clinicians so they can reengage the veterans or enhance their care so they can reduce the risk of suicide. The suicide prevention team at Bay Pines is using analytic tools, outpatient care and education to reduce that number of veterans' suicides to zero. For more information, read [the article](#).

### **Committee Conducts Hearing on Gulf War Illness Claims**

Zachary Hearn, deputy director of claims for The American Legion's National Veterans Affairs and Rehabilitation Division, recently testified on the VA's processing of Gulf War Illness claims during a joint hearing on Capitol Hill. A Government Accounting Office (GAO) report and the Legion's findings paint a bleak picture of the development and adjudication of Gulf War-related claims. Medical providers have optional training, in which only 10 percent participate, and Veterans Benefits Administration personnel complain of a lack of adequate training on the subject, according to Hearn. A video of the hearing and relevant documents are available on the [House Committee on Veterans' Affairs website](#). Highlights of the GAO Report are available on the [GAO website](#).

### **Foundation Provides Veterans with Free Tickets**

The Veteran Tickets Foundation (or Vet Tix) is a national non-profit organization with the simple mission of furthering veteran and military family reintegration and resiliency by providing free tickets to events that those veterans or their families might not otherwise be able to attend. For more information, visit the [Vet Tix website](#). For more deals and discounts for service members, military families and veterans, visit the [Military.com Discount Center](#).

### **Bill Would Expand Mental Health Care for 'Bad Paper' Vets**

Although the VA has been offering mental health care since early this month to veterans with other-than-honorable discharges, a bill working its way through Congress would put the agency's new policy into law. The proposal would also require the VA to expand the care beyond its current "emergency" coverage to long term, non-urgent issues. For more details, [see this Military.com article](#).

### **Compare VA Loan Rates**

Home loan and mortgage offerings can vary dramatically based on variables such as institution, location, loan type and loan amount to name just a few. That's why it is best to shop multiple loan providers in order to get comfortable with the lingo, options and requirements. The rate table below provides a number of providers that offer VA Loans and/or conventional mortgages and work with both active military and veterans. [Click here for available rates](#).

### **VA Studies Veteran Physical Activity Using the Wii**

The Department of Veterans Affairs' (VA's) Wii Fit™ pilot research study at the [Central Arkansas Veterans Healthcare System](#) in Little Rock is looking for ways in which veterans can increase their balance and physical activity. The study involved a randomly assigned group of 30 participants. Researchers used the Wii™ program, comparing results with a control group that completed computer-based mental exercises. The results showed 12 times greater improvement in balance among the older Veterans using the Wii Fit™ program compared to the control group. For more information read the [VA VAntage Point Blog](#) and the [study in the Journal of Aging Research](#).

### **New Veteran-Focused Housing Community in Florida**

Carrfour Supportive Housing, Florida's largest not-for-profit affordable housing developer, is bringing affordable housing for hundreds of veterans in South Florida thanks to support from a new \$400,000 grant from The Home Depot Foundation's (THDF) Veteran Housing Grants Program. The grant is being used to help fund construction of Liberty Village, Carrfour's newest veteran-focused supportive housing community in Miami's Liberty City neighborhood, where 80% of the apartments are designated for homeless veterans suffering from disabilities. Construction of Liberty Village is currently underway and is expected to be completed in late 2017. For more details on the Home Depot program, [see this page](#).

### **Respite Care for Caregivers**

As a caregiver, to be strong for your veteran you must first be strong. Respite care is an occasional way to take a break from your caregiving duties and relax, renew your energy, and avoid caregiver burnout. Veterans who require a caregiver may be eligible for up to 30 days of respite care each year. This care can be offered in your



home, at a VA community living center, at a VA-contracted community residential care facility, or at an adult day health care center. To see if you are eligible for respite care services, call the Caregiver Support Line at 1-855-260-3274. For more information, visit the [VA Caregiver Support webpage](#).

### **VA Reacts to Whistleblower Concerns**

The U.S. Secretary of Veterans Affairs, David J. Shulkin, M.D., has announced actions the department is taking immediately to respond to whistleblower concerns at the Manchester, New Hampshire, VA Medical Center (VAMC) as detailed in a recent article in the Boston Globe. The VA Office of the Medical Inspector and the VA Office of Accountability and Whistleblower Protection are being sent in beginning July 17 to conduct a top-to-bottom review of the Manchester VAMC, including all allegations in the article. Effective immediately, the department has removed the director and chief of staff at the facility, pending the outcome of the review. For more information, read the article in the [Boston Globe](#).

### **Women and Minority Veteran Conference in Reno**

The American Legion's Women and Minority Veteran Outreach team will host The Conference For Women Aug. 21 at the Reno Sparks Convention Center. The conference is an opportunity to participate in discussions, led by women who have discovered the keys to success. The first session will take place from 9 a.m. To 12 p.m., and a second session will be held from 1 p.m. to 4 p.m. Those who are interested in this free event are asked to [register in advance](#), as seating is limited. For more information, contact Keronica Richardson at (202) 263-5764 or email [wmvo@legion.org](mailto:wmvo@legion.org).

### **House Votes Unanimously to Extend VA Choice Program for 6 Months**

After [failing in the first try](#) earlier last week, the House unanimously passed a \$3.9 billion bill Friday to extend the Veterans Choice Program on private care for six months. The 419-0 vote on the emergency spending measure came after the Senate worked out a deal with House negotiators to add an amendment to the bill on the leasing of 28 new VA facilities in 17 states to overcome the objections of the veterans service organizations (VSOs). For more details, see [this Military.com article](#).

### **Trump Announces Transgender Ban for the Military**

President Donald Trump last week announced a ban on transgender people from serving in the U.S. military. In a series of [tweets](#), the president said, "After consultation with my Generals and military experts, please be advised that the United States Government will not accept or allow ... Transgender individuals to serve in any capacity in the U.S. Military." For more details, see [this Military.com article](#).

### **House Passes New 'Forever' GI Bill**

Without a single vote in opposition, the U.S. House of Representatives passed a bill last week to expand the [post-9/11 GI Bill](#) and eliminate the 15-year time limit on the use of education benefits for new recruits. For more details, see [this Military.com article](#).

### **The Impact of VA Choice Funding and the Transgender Ban**

This week saw two major events in the nation's capital that will have repercussions for veterans and active service members: the extension of funding for the VA choice program and a ban on transgenders serving in the military. For a detailed analysis by military benefits expert Tom Philpott, or more details, see [this Military Advantage post](#).

### **A Look at Education**

Many military veterans returning home do not have a degree yet, but do have invaluable experience from their time served. How can a veteran apply what they already learned toward a degree, to gain a meaningful career for life after military service? Research from experts at Online College Plan shows that veterans may be uniquely qualified for a variety of degree types. For example, if during their service a soldier was responsible for monitoring spending, preparing a budget or analyzing financial records, a degree in accounting or finance

may be a good route. Veterans should check into their education benefits to determine if they qualify for scholarships, benefits or loan programs. For more information, read the [VA Vantage Point Blog](#). For more on military education benefits, visit the [Military.com Education](#)

### **TRICARE Expands Mental Health and Substance Abuse Treatment**

TRICARE has expanded [mental health and substance use disorder \(SUD\) services](#), adding [intensive outpatient programs](#) and expanding options for [opioid treatment](#). There are no limits for the number of times beneficiaries can get SUD treatment, smoking cessation counseling and outpatient treatment per week. Also, lower copayments and cost-shares continue from last year. For more information on the updated services and expanding treatment options for mental health and SUD, visit the [Mental Health Care](#) webpage on the TRICARE website.

For more on TRICARE benefits, visit the [Military.com TRICARE section](#).

### **Upcoming Tricare Change Could Hurt Families**

A short sentence buried in a series of major [Tricare](#) reforms passed by Congress in 2016, set to roll out late this year, is causing alarm among military family advocates. They worry that the measure will block Tricare beneficiaries from accessing the healthcare they need. For more details, see [this Military.com news article](#).

### **Health Transparency Website Launched**

Patients who use military hospitals and clinics can better see how their facility is performing due to changes by the Military Health System to its [transparency website](#). The website improvements include: (1) each military hospital and clinic now has a landing page; and (2) users can compare up to three nearby hospitals or clinics on one custom report. For more information, visit the [MHS Quality, Patient Safety, and Access Information \(for Patients\) webpage](#).

For more on healthcare and other military benefits, visit the [Military.com Benefits Center](#).

### **New PTSD and Stress Guidelines Issued**

A panel of experts from the Department of Veterans Affairs (VA) and the Department of Defense (DoD) has developed the latest guideline for managing PTSD and acute stress disorder. The [2017 Clinical Practice Guideline](#) (PDF) includes the most effective treatments for PTSD, rated both for the quality of the clinical studies and the strength of the recommendations. There are a number of treatment options including psychotherapy (talk therapy) and/or medication. But, studies have shown that in general, trauma focused psychotherapy is more effective than medications. Use the [PTSD Treatment Decision Aid](#) to help you compare PTSD treatment options.

### **Making the Most of Job Fairs**

If you take time to properly prepare for job fairs, they can be very beneficial to your overall job search strategy. Here are several tips: (1) before attending the job fair, you should get a list of all employers attending. Research the companies to gain a thorough understanding of their products and services; (2) choose the employers that interest you the most and make a checklist to use at the job fair; (3) have your job fair resumé in order and plan to take many copies; (4) complete an application and take it with you will have the information to copy onto other applications at the job fair; (5) dress as if you were going on an interview. It is appropriate to wear your uniform if the job fair is being held on a military installation.

For more veteran job fair listings, tips and resources, visit the [Military.com Veteran Jobs Center](#).

### **The FAQs on VA Home Loans**

Why get a VA loan over other types? Can you re-use a VA loan? Do all local lenders offer the VA loan? For answers to these and other important VA loan questions, read [this Military.com article](#) and visit the [Military.com VA home loan section](#).

## VA Tests Mobile App

The Department of Veterans Affairs (VA) is testing a new system called the Genetic Diagnostic Testing App (GDx). Both the provider and veteran versions of the app, as well as extensive training materials, will be available on the [VA App Store](#) when the system goes live nationwide. For more information, read the [VA Vantage Point Blog](#).

For more military apps related to military pay, veteran jobs and news, visit the [Military.com App section](#).

## Warrior Community Event Coming in September

The Warrior Integration Community Symposium will be held September 6, 2017 at the Hyatt Regency in Atlanta, GA 9 a.m. to 3 p.m. (lunch included). VetConnect is a unique learning & networking opportunity that kicks off the 4th Annual Warrior Community Integration Symposium. VetConnect is free to veterans, active military, spouses, and veteran-serving professionals. For more information on VetConnect see [this site](#). For more information on the Symposium and to register, visit the [America's Warrior Partnership website](#). For more veteran job fair listings, tips and resources, visit the [Military.com Veteran Jobs Center](#).



## Minnesota Department of Veterans Affairs

<http://mn.gov/mdva/resources/>

## Minnesota State Veteran's Benefits



The state of Minnesota provides several veteran benefits. This section offers a brief description of each of the following benefits.

- [Housing Benefits](#)

- [Financial Benefits](#)
- [Employment Benefits](#)
- [Education Benefits](#)
- [Parks and Recreation Benefits](#)
- [Other State Veteran Benefits](#)

## **Minnesota Veteran Housing Programs**

### **Minnesota Veterans' Homes**

Minnesota Veterans' Homes are located in Fergus Falls, Hastings, Luverne, Minneapolis and Silver Bay.

There is also an Adult Day Center located in the Minneapolis Veterans' Home. The Adult Day Center provides a broad array of therapeutic health care services – delivered by trained, highly dedicated professionals. It is a Veteran-based community that allows participants to connect with other Veterans in a safe, comfortable environment. The Adult Day Center allows participants to achieve the highest attainable level of physical, mental and social well-being – with the independence of living at home. It also provides much-needed respite – and a full array of support services – for Veterans' caregivers.

Admission to Minnesota Veterans Homes is available to honorably discharged veterans who entered service from Minnesota, or are current residents, who served 181 consecutive days on active duty, unless discharged earlier because of disability incurred in the line of duty. The spouse of an eligible Veteran who is at least 55 years old and meets residency requirements. The applicant must also be able to demonstrate a medical or clinical need for admission. Residents contribute to the cost of their care according to their means.

## **Minnesota Financial Benefits**

### **State Income Taxes**

Military pay and retirement pay are not taxed.

### **Short Term Financial Assistance (Subsistence)**

The Subsistence program provides temporary assistance with shelter payments (rent/mortgage), current utility bills and health insurance premiums to eligible Veterans and their Dependents. This benefit is income and asset based, and is designed to assist Veterans for up to six months for those who are unable to work his/her normal occupation due to a temporary disability, or who are permanently disabled and are waiting to receive a permanent disability benefit from VA Compensation, VA Pension, Social Security or other long term benefit.

## **Minnesota Employment Benefits**

### **MN Veterans Preference Act**

MN Veterans Preference Act (VPA) grants veterans a limited preference over non-veterans in hiring and promotion for MN public employment and also provides protection against unfair dismissals and demotions. VPA grants veterans the right to a hearing, prior to dismissal.

## **Minnesota Education Benefits**

### **Minnesota GI Bill**

The Minnesota GI Bill is available to Minnesota Veterans who served honorably in any branch of the armed forces at any time; non-veterans who served honorably for a cumulative total of five years or more as a member of the MN National Guard or any other active or reserve component and had active service after September 11, 2001; or eligible spouses, surviving spouses, and children of permanently and totally disabled veterans who are eligible for the Federal GI Bill.



Full-time undergraduate or graduate students may be eligible to receive up to \$1,000 per semester and part-time students can receive up to \$500 per semester (up to \$3,000 per academic year and \$10,000 per lifetime).

OJT and Apprenticeship individuals are eligible for up to \$2,000 per fiscal year for either program. Approved employers are eligible to receive \$1,000 placement credit payable upon hiring a person under this program and another \$1,000 after 12 consecutive months of employment.

Recipients must be a Minnesota resident under the age of 62, and enrolled at a Minnesota institution.

#### **Surviving Spouse & Dependent Education Benefit**

Surviving Spouse and Dependent Education assistance is provided to spouses and dependents, including adopted and step-children, whose Veteran spouse and/or Veteran parent died while on active duty, or as a result of a service-connected condition. The Veteran must have been a resident of Minnesota when entering the U.S. military, or have been a resident of Minnesota for at least six months prior to passing away due to a service connected disability as determined by the USDVA. Applicants must be Minnesota residents and the spouse cannot be remarried. There is no age limitation for eligible survivors.

If found eligible, survivors are allowed admission to Minnesota postsecondary education institutions either operated by this state or is operated publicly or privately and maintains academic standards substantially equivalent to those of comparable institutions operated in this state. Surviving spouses and dependents will be able to attend free of tuition until he/she obtains a bachelor's degree. In addition, MDVA will pay \$750 per fiscal year for fees, books and supplies, and/or room and board.

#### **Parks and Recreation Benefits**

##### **Veterans Campground on Big Marine Lake**

The Veterans Campground on Big Marine Lake is a family campground that provides facilities and opportunities for recreation, rest, and recovery for all who have served in the Armed Forces of the United States, whether still serving or have served in the past, their Families, and sponsored friends.

##### **Minnesota State Park Vehicle Permits**

Any active military service personnel stationed outside of Minnesota within the past 90 days can get a free one-day Minnesota state park vehicle permit. Bring your current military orders and military ID, and let the park attendant know your military status when you arrive.

Military personnel or their Dependents who have a Federal government access pass to Federal recreational sites can get a free one-day Minnesota state park vehicle permit. Bring your Federal access pass and military ID, and let the park attendant know your military status when you arrive.

Any resident Veteran with any level of service-connected disability can get a free one-day Minnesota state park vehicle permit. Bring a copy of your determination letter and a photo ID, and let the park attendant know your military status when you arrive.

Any Veteran who has a permanent and total service-connected disability can get a free annual Minnesota state park permit. Present a copy of your determination letter or VA ID card to the park attendant for the free annual sticker, which must be placed on a vehicle that is owned by the Veteran. If the Veteran with the permanent service-connected disability does not own the vehicle transporting the Veteran, you can still get a free one-day Minnesota state park permit.

##### **Cross Country Ski Pass Exemptions**

Minnesota residents who have served at any time during the preceding 24 months in federal active service outside the United States and has been discharged from active service is exempt from the pass requirement if the resident possesses official military discharge papers (DD214). Minnesota residents in the US Military who are stationed outside the state and home on leave are also eligible for a pass exemption, (must have leave form).

## Fishing Licenses

The Minnesota Department of Natural Resources, (DNR) has a number of benefits for military Service members and Veterans:

- A person in the U.S. Armed Forces who is stationed or training in the state may purchase a resident fishing license. (Includes those in training at Camp Ripley.)
- A resident who has served at any time during the preceding 24 months in federal active service outside the United States and has been discharged from active service may take fish without a license. Discharged residents must carry proof of Minnesota residency and official military discharge papers. Trout stamps are not required. (*Note: Free sturgeon tags are available only from the DNR License Center in St. Paul.*)
- Any Minnesota Veteran with a 100% service-connected disability may obtain a permanent angling license. These permanent licenses are available only from the DNR License Center. A trout stamp is not required with this license.

The following are Exempt from Fishing License Requirements:

- Minnesota residents in the U.S. Military who are stationed outside the state and home on leave. Military staff must carry leave or furlough papers.
- Patients of a U.S. Veterans Administration hospital (with written permission of the superintendent or chief executive of the institution).

## Residents on Leave Hunting License

Who have maintained legal residency in Minnesota (must have a valid MN DL or Public Safety ID) and who are serving in the U.S. Military and stationed outside the state may:

- Hunt small game without a license while on leave. No Minnesota Waterfowl Stamp or Pheasant Stamp is needed but must have a Federal Migratory Bird Stamp to hunt waterfowl.
- May hunt deer (Firearms: Code 232; Archery: Code 233, Muzzleloader: Code 234), bear (Code 663), and wild turkeys (Spring: Code 615; Fall: Code 654) and Wolf (Early Season Firearm: Code 691; Late Firearm Code 692; Trapping Code 693) without charge after obtaining the appropriate licenses and tags from an ELS license agent by presenting official leave papers.
- Does not include Moose, Elk or Deer bonus permits. Such service personnel must carry proof of Minnesota residency and official leave papers on their person while hunting. Licenses are valid immediately upon issuance.

## Residents Discharged Hunting License

Minnesota residents discharged from the U.S. Armed Forces within 10 days of the start or during the Firearms Deer Season may purchase a Firearms Deer License during the season upon showing official discharge papers. The license is valid immediately after purchase.

- Veterans who have served at any time during the preceding 24 months in federal active service outside the United States and have been discharged from active service may:
  - Take small game without a license. Discharged residents must carry proof of Minnesota residency and official military discharge papers. No state stamps required. (Federal stamp required for migratory waterfowl hunting.)
  - Obtain a free deer license. Eligibility is limited to one deer license per person per year. Discharged residents must provide proof of residency and a copy of their official military discharge papers. (Firearms: Code 232, Archery: Code 233, Muzzleloader: Code 234).

- Obtain a free wolf license. Eligibility is limited to one wolf license per person per year. Discharged residents must provide proof of residency and a copy of their official military discharge papers. (Early Firearms Season: Code 694, Late Firearm Season Code 695; Trapping Code 696)
- Veterans who have served at any time during the past 24 months, in active service as a member of the United States armed forces, including the National Guard or other military reserves will receive first preference in drawings for special deer hunts, bear and turkey permits.

#### Resident 100% Disabled Veterans Hunting License

With proof of a 100% service-related disability may obtain a free Small Game License (241) and a free Firearms (242), or Muzzleloader (240), or Archery (243) Deer License from an ELS license agent. In addition, a disabled Veteran is exempt from purchasing state pheasant or waterfowl stamps, but must purchase a turkey stamp and license to hunt turkeys and a federal duck stamp to hunt waterfowl. Disabled Veterans with 100% service connected disability will receive first preference in drawings for special deer hunts, bear and turkey permits.

*Note:* Military personnel and Veterans who are issued firearms deer licenses under these provisions may take antlerless deer, but are restricted to bucks-only hunting in those lottery deer permit areas that have an either-sex permit quota of zero. To participate in special deer hunts, they must apply and be drawn. They may also purchase bonus permits.

#### Resident Veteran 100% Permanent Card

Resident Veterans who have 100% permanent service-connected disability as defined by the United State Department of Veterans Affairs may apply for a permanent card that may be presented to an agent annually to receive a free Small Game and/ or a Deer License. This card will assist with the process of receiving these types of license's, however all eligibility requirements must be meet prior to receiving the license(s).

#### Resident Purple Heart Recipients

Purple Heart recipients must purchase licenses, but will receive first preference in drawings for antlerless deer permits, bear and turkey permits.

#### Nonresident Hunting and Fishing Licenses

- Nonresident Spouses of residents on active military duty may purchase resident hunting and fishing licenses. Nonresidents must provide proof of Spouse's residency and active military duty.
- A person in the U.S. Armed Forces who is stationed in the state may purchase resident hunting and fishing licenses, but not moose or elk licenses.

#### Firearms Safety Training

Military personnel who are on active duty and has successfully completed basic training in the US armed forces, reserve component, or National Guard may obtain a hunting license or approval authorizing hunting regardless of whether the person is issued a firearms safety certificate. *Note:* They must be on active duty, home on leave with leave papers (they then qualify only for that time frame). Once discharged or no longer on active duty, they must complete the firearms safety training course or online adult course the same as all others born after Dec 31, 1979.

#### **Other Minnesota State Veteran Benefits** Guardianship Division

The Guardianship Division provides financial case management services to incompetent veterans, their dependents, and survivors, who may be vulnerable to exploitation by others or by their own inability to manage their funds.

#### Minnesota State Veterans Cemetery

The Minnesota State Veterans Cemeteries provide dignified burial services to Minnesota veterans and their eligible dependents and survivors. They are located 7 miles north of Little Falls, on the banks of the Mississippi River, and in Preston in southeastern Minnesota. Both cemeteries are managed and maintained by the Minnesota Department of Veterans Affairs.

#### Bronze Star Grave Markers

The Minnesota Department of Veterans Affairs offers bronze stars to mark the grave site of any veteran buried in the state, where permitted. Bronze Star Markers are available through your local county veterans service officer.

Visit the [Minnesota Department of Veterans Services](#) website for more information about any of these programs.

Visit the [Minnesota Department of Veterans Services](#) website for more information about any of these programs.

## **MilitaryConnection.com**

LEARN ABOUT CAREERS FOR MILITARY VETERANS, VETERAN SCHOOLS, NEW GI BILL RESOURCES AND MILITARY LOANS

Providing information on government/federal jobs for Veterans, schools in which to further your education, Veteran benefits and more is what Military Connection does best. The brave men and women of the U.S. military, past and present, are who we serve, and as an online directory, we strive to be comprehensive and specific in the information we provide. This is the perfect place to learn more about military education and benefits provided to you through the GI Bill, and about employment opportunities that apply to your skill set and interests. We are here to provide help for Veterans in all aspects of their lives as a way to honor their service.

Military Connection salutes and proudly serves veterans and service members in the [Army](#), [Navy](#), [Air Force](#), [Marines](#), [Coast Guard](#), [Guard and Reserve](#), and their [families](#).

## **WHAT MAKES A SCHOOL TRULY VETERAN FRIENDLY?**



By [Debbie Gregory](#).

Veterans who have transitioned out of the military do so with rich veteran education benefits, especially those who have the Post 9/11 GI Bill benefits. In addition to tuition, the benefit covers housing, books and supplies. It's no wonder that schools want to recruit these potential students.



But because veterans can only spend these veteran education benefits once, finding the right institution to help guarantee success is of great importance. This is achieved by finding an institution that fosters a culture which is supportive, appreciative, respectful, embracing, and inclusive of the veterans it educates. Schools that genuinely value diversity will make an active, sustained effort to attract veterans, because they recognize the value of their presence in the classroom.

Being veteran friendly also means being responsive to the unique needs of their student-veteran population.

Here are some characteristics a veteran education program should provide:

- A veterans lounge as a designated space for the veterans to gather, study, and socialize
- Department of Veterans Affairs resources directly on campus
- A chapter of Student Veterans of America
- Fully covered tuition through the G.I. Bill, and a commitment to meet any shortfalls through institutional aid
- Exemption from standard residential housing policies since veterans are older and may have families
- Credit for military service
- A quality education

Military bases maintain an education office, and conduct transition assistance workshops for servicemen and women preparing to reenter civilian life.

Additional resources include:

- The Warrior Scholar Program empowers enlisted military veterans by providing them with a skill bridge that enables a successful transition from the battlefield to the classroom. The program works to maximize their education opportunities by making them informed consumers of education, and increases the confidence they will need to successfully complete a rigorous four-year undergraduate program at a top-tier school.
- Service to School, a 501(c)(3) non-profit that provides free application counseling to military veterans. Their goal is to help veterans win admission to the best universities possible and to help them maximize their education benefits. The Posse Foundation, which forms groups of 10 veterans who all are admitted to the same college at once, and form a ready-made squad of peers who can support each other throughout their college experience and succeed as a team.

# GRAND JURY REPORT ON \$5 MILLION PROGRAM FOR HOMELESS VETERANS



By [Debbie Gregory](#).

You would think that \$5-million would go a long way to end veteran homelessness in Los Angeles. But despite the funding, a program to get homeless veterans off the streets has only helped 268 veterans over an 18 month period, according to a recent Los Angeles County grand jury report.

In Los Angeles, veterans comprise a little over 3% of the general population, but make up about 11% of the homeless population. Transition from military to civilian life, sometimes complicated by service related disabilities, may make it difficult for veterans to find housing.

Homes for Heroes, a county program funded by the federal government, provides interim shelter to veterans and pays for move-in costs and minor repairs for landlords who agree to rent to ex-service members. But the grand jury's report expressed concern about Homes for Heroes' administrative costs. And the report also found that in the 18 months from January 2016 to June 2017, the program helped more property owners (363) than it did veterans.

Phil Ansell, the director of L.A. County's homeless initiative said the grand jury's information was out of date, and that further progress has been made, although "more certainly remains to be done," he said.

While Southern California has made progress over the years, the area continues to lead the nation in veteran homelessness, with 4,800 living on streets and riverbed, according to the report.

Mayor Eric Garcetti had made a pledge to end veteran homelessness a signature of his administration.

Another impediment is that much of the housing that accepts veteran rent vouchers is for men only. This leaves their family members and female veterans to find shelter elsewhere.

However, Los Angeles is making progress in cutting into veteran homelessness, said Nan Roman, president of the National Alliance to End Homelessness, a Washington nonprofit.

"It cut unsheltered homelessness 43% and veteran homelessness overall 41% in a year, which is unheard of," she said.

## **MILITARY VETERAN, NOW A CONGRESSMAN, FIGHTING VETERAN SUICIDES**



U.S. Congressman Brian Mast (R-FL) has seen, first-hand, the impact that war can have on soldiers returning home.

The military veteran served as an explosive ordnance disposal technician with the elite 28th Ordnance Company in Afghanistan as part of Operation Enduring Freedom. On September 19, 2010, while clearing a path for United States Army Rangers in Kandahar, Mast took a wrong step into an IED along the road. The explosion resulted in the amputation of both his legs and one of his fingers

Mast is committed to doing all that he can to increase mental health resources for veterans and to reduce veteran suicide rates. To that end, he is promoting the unique idea of a pledge to combat suicide among the nation's veterans.

Troops leaving the service could take a voluntary oath to "to preserve the values I have learned, to maintain my body and my mind, and to not bring harm to myself without speaking to my fellow veterans first."

The "Oath of Exit" passed the U.S. House of Representatives on July 14<sup>th</sup> as part of the National Defense Authorization Act. Part of the pledge would also commit troops who are being discharged to "continue to be the keeper of my brothers- and sisters-in-arms" in addition to the United States and the Constitution.

After his injury and during his recovery, Mast's father was the one who inspired him by telling him to ensure that the greatest service he gives to the country is still ahead of him.

After his retirement from the Army, he continued working in counter-terrorism and national defense as an Explosive Specialist with the Department of Homeland Security.

His service now continues in the political arena.

Mast is in his first term representing the 18th Congressional District of Florida.

## **VETERANS: WHAT YOU NEED TO KNOW ABOUT GLAUCOMA AND CATARACTS**



By [Debbie Gregory](#).

Two recent studies reveal that the rate of eye disease may be increasing in the VA system.

One study showed that VA patients with serious mental illness have an even higher rate of dry eye, cataract and glaucoma than the general veteran population. Both glaucoma and cataract are leading causes of blindness worldwide.

The other study found that the rate of eye disease, specifically glaucoma and cataract, increased in veterans 50 years old and up.

Glaucoma is a group of eye diseases in which the optic nerve, a bundle of over 1 million nerves that convey vision from the eye to the brain, slowly becomes damaged over time. In many cases, blood flow to the optic nerve is reduced, and may be further reduced by increased fluid pressure inside the eyes slowly rising, leading to vision loss or even blindness. Glaucoma usually starts without any symptoms.

Because there are no symptoms of the disease early on, eye screening is needed to detect it. However, if the disease is caught early, treatment can prevent vision loss.



African-American Veterans should especially get their eyes checked regularly as glaucoma is six-to-eight times more common in African-Americans than Caucasians. Also, among Hispanic populations, Glaucoma is the leading cause of blindness.

Cataracts happen when the lens of the eye becomes cloudy over time. This happens in all individuals with aging, and it is estimated that half of all people age 80 or older will have had cataract surgery or need cataract surgery.

Cataract symptoms include blurriness of vision at distance, or glare that may be most bothersome when driving at night. Diabetics or those on long-term steroids for medical conditions may develop cataracts earlier in life. Cataracts can be removed with a relatively simple surgery that often takes 20 minutes or less.

VA patients, particularly those in high-risk groups, should get eye exam screenings to identify any eye problems as early as possible.

## **WOMEN VETERANS SUMMIT REGISTRATION NOW OPEN**



By [Debbie Gregory](#).

It's been six years since the VA held its last national-level event for women veterans, and a lot has changed since 2011.

Registration is now open for the Women Veterans Summit, which will take place at the Hyatt Regency Downtown in Houston, Texas, August 25-26, with an opening reception on August. 24. Focusing on the issues important to women veterans, the event will provide training and guidance in navigating VA resources, as well as the resources that are available at the state, local, and partner level.

One of the keynote speakers, Lt. Gen. Patricia Horoho (Ret.) was the first woman and first nurse to serve as the Army's surgeon general.

Additional speakers will include senior VA leaders who will be on hand to share information regarding employment, mental health, entrepreneurship, military sexual trauma, reproductive health, culture change and more.

Who should attend? Of course, women veterans, but also public sector partners, including military, federal, state and local agencies; Veterans service organizations, non-profits that serve this populations; academics; representatives and corporations from the tech industry; community partners; and VA employees, including women Veteran program managers and women Veteran coordinators

To keep current on the event, there is a dedicated [summit webpage](#) for updates. For more information, read the [VA Vantage Point Blog](#) or [Register for the Summit](#).

## **WOULD CHANGES TO THE GI BILL IMPACT MILITARY RECRUITMENT?**



By [Debbie Gregory](#).

Patriotism is usually among the top three reasons people give for joining the military. So is the promise of great educational benefits provided through the GI Bill. With that said, changes to the Post-9/11 GI Bill and other education benefits would probably have a bigger impact on military recruitment and retention if the recipients actually understood what they were getting.

It is common knowledge that a college education is expensive. A recent RAND report evaluating military education benefits revealed that many new recruits and service members don't really understand what their benefits entail.

Some of the benefits you could be eligible for through the Post-9/11 GI Bill include 100% coverage of tuition and fees paid directly to a state operated college or university on your behalf, a monthly living stipend based on your school's zip code, an annual book and supply stipend, a one-time relocation allowance, and the ability to transfer GI Bill benefits to a spouse or eligible dependent. And since 2009, servicemembers are not required to contribute to the program to access the benefits.

Veteran advocacy groups, including the Student Veterans of America, have been pushing Congress to make changes to the Post-9/11 GI Bill that would expand eligibility for wounded service members and reservists.

For the report, RAND researchers polled 165 new recruits who had yet to attend boot camp, in order to ascertain how much they knew about the Post 9/11 GI Bill education benefit. While education was among the recruits' commonly cited reasons for joining the military, many were unclear about the actual details of the Post-9/11 GI Bill. The new recruits who were well informed about the benefits were generally older, more likely to have college experience and more likely to be female.

## **NEW FOREVER GI BILL UNVEILED**



By [Debbie Gregory](#).

It looks like big changes may be on the horizon for the Post 9/11 GI Bill.

The "forever" GI Bill, officially titled the "Harry W. Colmery Veterans Educational Assistance Act of 2017" looks to be a broad, permanent bill of rights for student veterans and their families. And it has a pretty good chance of passing through Congress.

Named for Harry W. Colmery, the past American Legion national commander who hand-wrote the original GI Bill in 1944, the proposal contains reforms to benefit Purple Heart recipients, reservists, veterans' surviving dependents, and victims of for-profit school closures.

If the bill, introduced on July 13<sup>th</sup> by House Veteran Affairs Committee Chairman and Republican Rep. Phil Roe, is passed by Congress, it will affect veterans who become GI Bill-eligible after January 1, 2018.

Major changes would include:

- The elimination of the 15-year "use it or lose it" time limit on veteran education benefits
- A permanent change to the program's name- just "GI Bill"
- The guarantee of full veteran benefits for ALL Purple Heart recipients
- Help for victims of predatory for-profit schools
- Assistance for survivors and dependents by extending Yellow Ribbon eligibility to those survivors
- Changing housing allowances for student veterans to the same BAH as similarly situated active-duty service members

The Student Veterans of America, the Veterans of Foreign Wars (VFW), the American Legion, Vietnam Veterans of America, Got Your Six, the Military Order of the Purple Heart, and Tragedy Assistance Program for Survivors assisted in putting the bill together and readying it for approval.

"This beefed-up Post-9/11 GI Bill recognizes the long service and sacrifice of the one percent of Americans who have voluntarily put their personal lives on hold to fight an unimaginable multi-front war for 16-plus years," said VFW National Commander Brian Duffy.

What do you think?

## **VACCINE RESEARCH BY DOD SAVES MILITARY & CIVILIAN LIVES**



By [Debbie Gregory](#).

Military personnel at the Walter Reed Army Institute of Research (WRAIR ) are researching and developing vaccines that can save military and civilian lives from the threats of deadly viruses and bacteria.

There has been a lot of coverage in the news about the Zika virus. With U.S. service members deploying to areas where there is a danger of Zika, malaria and other dangerous pathogens, vaccines could be the key to not only keeping the troops healthier, but the civilian population as well.

Pharma companies Glaxo-Smith-Kline and Sanaria, in conjunction with WRAIR, are near ready to release their vaccines for malaria. But this wasn't new territory for the institute: WRAIR has been a research partner in the development of every existing malaria medication on the market today, as well as the first effective licensed vaccine against meningitis in the 1970s.

"Every single licensed therapy for malaria has somehow made its way through Walter Reed Army Institute of Research at some point in its development," said Kayvon Modjarrad, WRAIR's director for emerging infectious diseases. "It was tested, validated and developed within our institution," Modjarrad said.

WRAIR is the largest and most diverse biomedical research laboratory in the Department of Defense. The institute's greatest resources are the dedicated scientists, technicians, and support personnel who make up the core of the institute.



WRAIR is working on vaccines for Zika. Middle East respiratory syndrome (MERS) and chikungunya, a mosquito-borne disease that has appeared in the Caribbean, Africa, Asia, Europe, and the Indian and Pacific Oceans.

Private-sector pharmaceutical companies are not always in the financial position to pursue vaccine research, so WRAIR provides resources and support to advance vaccine research.

“By us funding further studies of the more-promising vaccine candidates, we can generate more data on how safe and effective they are,” said Paul Keiser, director of WRAIR’s viral diseases branch. “More data means less risk. And less risk makes it more likely that a drug company may pick them up.”

## **ARTIFICIAL INTELLIGENCE – MOVING FORWARD**



By [Debbie Gregory](#).

Modern artificial intelligence (AI) has proven that at times, it works better than the human brain. There is no denying the fact that artificial intelligence is the future. From the security forces to the military applications, AI has spread out its wings to encompass our daily lives as well. However, AI comes with its own limitations. The biggest area where AI is challenged is explaining to humans is the how and why of the decision making, limited by the machine’s current inability to explain their actions to human users.

Developing Explainable Artificial Intelligence (XAI) is of interest to commercial users of AI, as well as to the military. Explanations of how algorithms are thinking make it easier for leaders to adopt artificial intelligence systems within their organizations

XAI, especially explainable machine learning, will be essential if future warfighters are to understand, appropriately trust, and effectively manage an emerging generation of artificially intelligent machine partners.

Last month, the Defense Advanced Research Projects Agency (DARPA) engaged 10 research teams in multimillion-dollar program designed to develop new XAI systems.

XAI program will incorporate new explanation techniques with the results produced by the machine in order to create more explainable models and results.

Processes such as architectural layers, design data, loss functions and optimization techniques are used to experiment and develop interpretable models of the AI machines.

Model induction would also take place to treat the machine processes like a black box and experiment with it to develop a better understanding of its processes.

"Each year, we'll have a major evaluation where we'll bring in groups of users who will sit down with these systems," says David Gunning, program manager in DARPA's Information Innovation Office.

## **YOU MAY NOT WANT TO SAVE YOUR POST 9/11 GI BILL BENEFITS FOR YOUR KIDS**



By [Debbie Gregory](#).

While the Post-9/11 GI Bill offers a very generous post-service education benefit, a special provision of the program allows career service members the opportunity to share their education benefits with immediate family members. The Post 9/11 GI Bill is the only one which allows transferring education benefits.

Now that the Post 9/11 GI Bill allows servicemembers and veterans to transfer their benefits to their spouse or children, it begs the question: is that a good idea?

The first consideration is the value of using the GI Bill for a parent's education. On average, a college graduate earns about \$25,000 more per year than a high school graduate. If you run the numbers, just 10 years of this increased income would yield an additional \$250,000. Especially if your children are young, the extra income an adult would add over the course of a number of years would more than likely cover the cost of a child's college education.

If you were to save your GI Bill benefits and transfer them to a dependent, you would not only have a lower lifetime income, you'd only be able to use the benefit to put one child through school on the GI Bill.

Of course if you have older children or already have a degree, this scenario doesn't apply.

The other thing to take into consideration is possible changes to the GI Bill. There have been a number of different versions over the years, and more than likely, it will continue to evolve over time.

## **SUPREME COURT ASKED TO TAKE UP WORKPLACE RIGHTS FOR RESERVISTS**



By [Debbie Gregory](#).

Lawmakers are asking the Supreme Court to decide whether military reservists' unfair dismissal claims can be forced into arbitration by their civilian bosses.

Because the case involves veterans' rights, the legislators are hopeful that the Supreme Court will show appreciation for our citizen soldiers by allowing them to legally stand up for their workplace rights.

The filing's intention is to overturn a previous appeals court ruling against Kevin Ziober, a Navy reservist who sued his employer for firing him before his year-long deployment to Afghanistan.

In mid-May, Connecticut Democratic Senator Richard Blumenthal spearheaded the filing of a amici curiae brief, also known as a "friend-of-the-court" brief on behalf of himself, six fellow senators and 13 House members.

The members of Congress urged the Supreme Court to reaffirm a longstanding principle that all veterans' rights laws must be interpreted for the benefit of veterans. It is also imperative to protect veterans and servicemembers against waiving any of their rights under the Uniformed Services Employment and Reemployment Rights Act (USERRA), including their procedural enforcement rights like the right to file an action in federal court.

"They're serving and sacrificing so we have these rights, and then they come home and they are denied those very rights that they are fighting to uphold."

The aforementioned case alleges that in 2012, real estate company BLB Resources told Ziober he was out of a job. The company denied wrongdoing, saying it terminated Ziober for sub-par performance on a federal contract assignment, and not for his deployment.

Upon returning to the U.S., Ziober brought a lawsuit against BLB under the Uniformed Services Employment and Reemployment Rights Act (USERRA) a 1994 law banning companies from discriminating against employees for taking time away from work to serve in the reserves.

If the Supreme Court accepts the lawmakers' request, it could finally end what has become a pain point for employment in several industries.

## CAN AN INJECTION ALLEVIATE PTSD?



By [Debbie Gregory](#).

The U.S. Army has commissioned a study to see if an anesthetic injection to the neck can alleviate the symptoms of Post-traumatic Stress Disorder (PTSD.)

Stellate ganglion blocks have been used to treat shingles and arm pain, but the \$2 million Army study is the first to examine whether the treatment might be helpful to those with PTSD.

During the procedure, a doctor uses ultrasound to guide the needle carefully into the stellate ganglion, a mass of nerve tissue in the neck, and injects the local anesthetic. The injections work on blocking messages along nerve fibers that influence the fight-or-flight response, which can include symptoms such as nightmares and hot flashes.

The study is being led by scientists at RTI International, a North Carolina-based research and development institute. It has begun recruiting active duty troops who have PTSD at military hospitals in North Carolina, Hawaii and Germany.

Some military doctors have already begun treating PTSD patients, particularly Navy SEALs and Army Green Berets, with the shot. It appears that once the treatment has been administered, the shot eases the patient's anxiety enough so that they can receive other treatments.

"Once people have the shot, they get dramatically better immediately," said Col. Jim Lynch, command surgeon at the joint Special Operations Command-Africa

Early experiments with the injection have proved effective.

The military is cautiously optimistic about the treatment, but won't endorse it until there is sufficient evidence that proves its efficacy.

The researchers expect to complete the study in 2018.

## **VA WITHDRAWAL OF STAAB APPEAL COULD AFFECT 370,000 CASES**



By [Debbie Gregory](#).

VA Secretary David Shulkin said he was dropping VA's appeal of the Staab case decided last year by the U.S. Court of Appeals for Veterans Claims.

The case, filed by Richard W. Staab, appealed a December 6, 2013, Board of Veterans' Appeals decision that denied Staab reimbursement of medical expenses incurred for emergency medical services provided at non-VA medical facilities.

Shulkin said Staab had been wrongly decided. In Staab's case, the court agreed with lawyers for the 83-year Air Force veteran who was forced to pay \$48,000 in healthcare costs following open-heart surgery in December 2010.

For a number of years, the VA has maintained that, by law, it can only reimburse VA-enrolled veterans for outside emergency care if they have no alternative health insurance. That includes Medicare, TRICARE, employer-provided health insurance or contracted health plans of any kind.

Unfortunately for veterans with other health insurance, they are often stuck paying hefty out-of-pocket costs that their plans won't cover, while veterans with no other insurance see the VA routinely pick up their entire emergency care tab.

Pulling the appeal means VA intends to begin covering private sector emergency care for any VA-enrolled veteran, even if they have alternative health insurance that pays part of their emergency care costs.

As many as 370,000 veterans with pending claims could benefit from the decision to appeal.

The VA has completed draft regulations to implement the new emergency care benefit. The benefit must clear the Office of Management and Budget (OMB) and be published in the Federal Register for comment before VA can begin reimbursements. could take nine months or more.

## **MOST DISABLED VETERANS DON'T HAVE ACCESS TO FULL VA CAREGIVER SUPPORT**



By [Debbie Gregory](#).

Family caregivers sacrifice so much of themselves in order to give their loved ones the highest quality of life possible. Yet most people are unaware of who these caregivers are and the role they play and the unique obstacles they face, especially those who are caring for a disabled veteran.



Veterans who were injured after Sept. 11, 2001 and require at-home care have access to for the full package of caregiver supports through the VA. However, this is not true for veterans who were severely injured prior to 2001.

Veteran service organizations such as Disabled American Veterans (DAV) are working with the VA and Congress to change this policy, in the hopes of expanding VA caregiver benefits, such as training and education, financial stipends, health insurance and respite care to all veterans, regardless of when they served.

Of the 5.5 million caregivers who provide support to current and former service members, roughly 80%, (4.4 million) are caring for veterans from military service prior to 2001. The majority of caregivers are spouses who receive very little in the way of benefits or support.

Expanding the VA's caregiver support program is not just the right thing to do, but the smart thing to do, as family caregivers not only enhance the quality of life for those they care for, but also save the government significantly in long-term health care costs.

And with some 57% of veteran caregivers over the age of 55, they are more likely to experience health concerns of their own, which could result in increased strain on both the veteran and the caregiver.

## Military Hero's



- Home State: West Virginia
- Awarded: Silver Star

### **The Story:**

During the invasion of Baghdad, Master Sgt. Miles and his team were ambushed by enemy fighters at a bridge overpass in southern Baghdad on April 7, 2003. Outnumbered 20-to-1, three members of Miles's group got pinned down under the intense firefight and were unable to escape. Miles organized the recovery mission as the enemies continued to attack. He performed first aid on two of his team members, one of whom would have bled to death without treatment. He was able to carry both of them to safety. In all, Miles killed or directed the killing of up to 20 Saddam loyalists.

For his actions, Miles was awarded the Silver Star Medal on March 10, 2005.



- Hometown: Boise, Idaho
- Awarded: Bronze Star

### **The Story:**

Then-Sgt. Luke Miller's tank was participating in an insurgent sweep called "Operation Matador," near Karbala, Iraq, from May 8-14, 2005. On May 8, his team was told to hold a position near the bridge because the team originally assigned the position was stuck in the desert.

As they entered the town, small-arms and gunfire erupted around them, but they made it safely through the town and to their assigned spot. They waited for their relief to come without incident. With a relief crew on its way, Miller's and another tank began rolling out of the area.

That's when Miller heard a large explosion: a roadside bomb had gone off under a nearby tank, severely damaging it. Miller rushed from his tank to help those trapped inside the wrecked tank. As his team provided protective fire, Miller and another Marine pulled a wounded Marine from the tank. Miller then pulled out another injured Marine, slung him over his shoulder, and dodged insurgent fire and delivered him to a waiting helicopter for evacuation. He then returned to his team to rejoin the fight.

When he rejoined his team, they continued sweeping the area and found more than 10 additional areas where insurgents were hiding out.

On Nov. 10, 2005, Miller received the Military Vanguard Award, bestowed annually upon one member of each branch of the military. On Nov. 14, 2005, Miller was awarded the Bronze Star for his efforts in Iraq.

# Veterans Administration

<http://www.va.gov/>

A photograph of an elderly veteran in a white military uniform with a peaked cap, saluting with his right hand. He is wearing a green and white floral patterned shirt. The background is a blurred wall of names.

#ExploreVA  
Explore.VA.gov

Spread the word about VA benefits  
to help the Veterans in your life.

A photograph of a young woman in a military uniform, smiling.

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VETERANS' EMPLOYMENT AND TRAINING SERVICE  
UNITED STATES DEPARTMENT OF LABOR

# VETERAN DISABILITY COMPENSATION PAY RATES

Current VA Disability Compensation Rates are effective as of Dec. 1, 2016.

Increases in VA Service-Connected Disability Rates are tied to the same Cost of Living Adjustments (COLA) provided by the Social Security Administration. These are the same rates the government uses for determining cost of living increases for Social Security recipients, military retirees, and federal civilian retirees.

**2017 VA Disability Compensation Rate Increase – 0.3%.** There was a small increase for disability compensation rates for 2017. This small rate increase follows 2016, a year in which there was no cost of living increase. The previous rate increase was in 2015, when VA Disability rates increased by 1.7%. 2014 was the first year the VA has included amounts above a flat dollar amount. In previous years, the amount was rounded down to the nearest dollar. This change won't make a huge difference now, but if this policy remains in place, it will compound over time.

## VA Disability Rating: 10% – 20% (No Dependents)

Percentage	Rate
10%	\$133.57
20%	\$264.02

## VA Disability Rating: 30% – 60% Without Children

Dependent Status	30%	40%	50%	60%
Veteran Alone	\$408.97	\$589.12	\$838.64	\$1,062.27
Veteran with Spouse Only	\$456.97	\$654.12	\$919.64	\$1,159.27
Veteran with Spouse & One Parent	\$495.97	\$706.12	\$984.64	\$1,237.27
Veteran with Spouse and Two Parents	\$534.97	\$758.12	\$1,049.64	\$1,315.27
Veteran with One Parent	\$447.97	\$641.12	\$903.64	\$1,140.27
Veteran with Two Parents	\$486.97	\$693.12	\$968.64	\$1,218.27
Additional for A/A spouse (see footnote b)	\$45.00	\$59.00*	\$74.00	\$89.00

## VA Disability Rating: 70% – 100% Without Children

Dependent Status	70%	80%	90%	100%
Veteran Alone	\$1,338.71	\$1,556.13	\$1,748.71	\$2,915.55
Veteran with Spouse Only	\$1,451.71	\$1,686.13	\$1,894.71	\$3,078.11
Veteran with Spouse & One Parent	\$1,542.71	\$1,790.13	\$2,011.71	\$3,208.56
Veteran with Spouse and Two Parents	\$1,633.71	\$1,894.13	\$2,128.71	\$3,339.01
Veteran with One Parent	\$1,429.71	\$1,660.13	\$1,865.71	\$3,046.00
Veteran with Two Parents	\$1,520.71	\$1,764.13	\$1,982.71	\$3,176.45
Additional for A/A spouse (see footnote b)	\$105.00	\$119.00	\$134.00	\$149.08

## A Disability Rating: 30% – 60% With Children

Dependent Status	30%	40%	50%	60%
Veteran with Spouse & Child	\$492.97	\$702.12	\$978.64	\$1,230.27
Veteran with Child Only	\$440.97	\$632.12	\$892.64	\$1,127.27
Veteran with Spouse, One Parent and Child	\$531.97	\$754.12	\$1,043.64	\$1,308.27
Veteran with Spouse, Two Parents and Child	\$570.97	\$806.12	\$1,108.64	\$1,386.27

Dependent Status	30%	40%	50%	60%
Veteran with One Parent and Child	\$479.97	\$684.12	\$957.64	\$1,205.27
Veteran with Two Parents and Child	\$518.97	\$736.12	\$1,022.64	\$1,283.27
Add for Each Additional Child Under Age 18	\$24.00	\$32.00	\$40.00	\$48.00
Each Additional Schoolchild Over Age 18 (see footnote a)	\$78.00	\$104.00	\$130.00	\$156.00
Additional for A/A spouse (see footnote b)	\$45.00	\$59.00	\$74.00	\$89.00

#### **VA Disability Rating: 70% – 100% With Children**

Dependent Status	70%	80%	90%	100%
Veteran with Spouse & Child	\$1,534.71	\$1,781.13	\$2001.71	\$3,197.16
Veteran with Child Only	\$1,414.71	\$1,642.13	\$1,845.71	\$3,024.27
Veteran with Spouse, One Parent and Child	\$1,625.71	\$1,885.13	\$2,118.71	\$3,327.61
Veteran with Spouse, Two Parents and Child	\$1,716.71	\$1,989.13	\$2,235.71	\$3,458.06
Veteran with One Parent and Child	\$1,505.71	\$1,746.13	\$1,962.71	\$3,154.72
Veteran with Two Parents and Child	\$1,596.71	\$1,850.13	\$2,079.71	\$3,285.17
Add for Each Additional Child Under Age 18	\$56.00	\$64.00	\$72.00	\$80.76
Each Additional Schoolchild Over Age 18 (see footnote a)	\$182.00	\$208.00	\$234.00	\$260.91
Additional for A/A spouse (see footnote b)	\$105.00	\$119.00	\$134.00	\$149.08

If you have specific VA benefits related questions, it is always best to call or visit your [regional VA medical center](#), as they will be able to access your file and answer your specific questions.

## **VA Memorial Benefits**

VA takes special care to pay lasting tribute to the memory of Veterans who served and sacrificed and that of their families. VA meticulously maintains 135 VA national cemeteries in 40 states and Puerto Rico and is working to increase access to accommodate Veterans and eligible family members close to home. In a few years, 95 percent of Veterans will have a burial option in an open VA, state or tribal veterans cemetery located within 75 miles of their home. Some benefits are also available for Veterans who choose burial in a private cemetery.

Veterans with a qualifying discharge are entitled to VA burial benefits. Spouses and dependent children are eligible too, even if they predecease the Veteran.

The following burial benefits may be provided:

#### ***Burial in a VA national cemetery***

- Opening and closing of the grave or burial of cremated remains or placement in an above-ground vault, also called a columbarium
- A government furnished grave liner
- Perpetual care of the gravesite
- A headstone or marker with an inscription
- A burial flag
- A Presidential Memorial Certificate
- Transportation of flower arrangements from the committal service shelter to the gravesite

#### ***Burial in a private cemetery***

- A government headstone, marker, or medallion



- A [burial flag](#)
- A [Presidential Memorial Certificate](#).
- Some survivors may also be entitled to VA [burial allowances](#) as partial reimbursement for the costs of funerals and burials for eligible Veterans.

Please note that gravesites in a VA national cemetery cannot be reserved in advance. To prepare for a private cemetery burial, VA suggests families [review these questions and complete required forms](#) in advance.

## Dedicated My HealtheVet volunteer finds joy in serving his Veteran colleagues



Despite the odds, Emerson Beach survived being shot in the head twice while serving in the U.S. Navy. The traumatic brain injury ended his military service at age 24, but Beach went on to earn a degree from The Citadel, leading to a 20-year career as an electrical engineer.

A few years ago, Beach found it difficult to work and started experiencing epileptic seizures. His VA provider determined that he was no longer able to work and needed brain surgery to remove part of his brain. After the surgery, Beach stopped having seizures, but felt his life started to take a downward spiral.



*Heather Friesen and Emerson Beach at work as part of the Charleston My HealtheVet team*

"Prior to the surgery, I felt very smart," said Beach. "After the surgery, I was very limited in spelling, technical activities and remembering. I didn't ever feel like doing anything, and even was hospitalized for suicidal thoughts."

Beach's provider suggested that he start volunteering at the [Ralph H. Johnson VA Medical Center in Charleston, South Carolina](#) to help keep him actively engaged. He did just that, and more.

"We have three computers in the hospital and Emerson takes Veterans to these computers and shows them how to find a forgotten password, lab results and answers their questions," said Heather Friesen, a My HealtheVet coordinator who works with Beach. "He really helps Veterans see the value in My HealtheVet and he takes the time to explain the benefits available to them."



*Emerson Beach assists Veteran, Ron Keeler*

Since 2012, Beach has been volunteering 40 hours a week with the Charleston My HealtheVet team. He enjoys helping fellow Veterans and on a good day he has been known to help 20 or more register for My HealtheVet.

"I couldn't just stay at home all day," said Beach. "I needed to do something meaningful and I feel like I add value by helping Veterans sign up for My HealtheVet."

Beach also participates twice a week in a program run by [Rein and Shine](#), an equine therapy facility. The program was introduced through the Charleston VAMC's Veteran Enrichment Center, a transitional learning center that teaches skills and promotes community opportunities essential for Veterans to develop an active and meaningful life in their home community. During his therapy sessions he cares for, rides and interacts with the horses.

Beach also volunteers as a local expert and helps teach other Veterans about how to care for and ride the horses.

"I never thought I would ride a horse, or help teach someone else how to ride a horse," Beach said. "The program is great for Veterans because it allows them to learn step-by-step and helps build them up, which keeps them in the program."

Each month, the Charleston ABC News 4 chooses one person to win a Jefferson Award for community service. The Jefferson Awards Foundation, founded in 1972 by the American Institute for Public Service, empowers others to have a maximum impact on the things and people they care about the most. This year, [Beach was chosen as one of the Jefferson Awards winners](#), a well-deserved honor because he truly exemplifies someone who does extraordinary things without asking for recognition.

## **VA expands transparency, accountability efforts**



## **VA becomes first agency to post information on adverse employee actions, requires senior official sign-off on all settlement actions above \$5,000**

Today U.S. Secretary of Veterans Affairs David J. Shulkin announced that the VA is taking a further step on transparency and accountability as a follow-on to the VA Accountability and Whistleblower Protection Act signed by the President less than two weeks ago.

Beginning today, the department is making public a list of adverse employee actions taken since January 20. This information is posted at <http://www.va.gov/accountability> and will be updated weekly.

Secretary Shulkin pointed to the move as another step in long-sought transparency and accountability actions at VA, and noted that the VA is the first federal agency to make such data public. "Under this administration, VA is committed to becoming the most transparent organization in government. Together with the accountability bill the president signed into law recently, this additional step will continue to shine a light on the actions we're taking to reform the culture at VA," said Shulkin.

"Veterans and taxpayers have a right to know what we're doing to hold our employees accountable and make our personnel actions transparent. Posting this information online for all to see, and updating it weekly, will do just that," he added.

For privacy reasons, the adverse action list will not include employee names, but will give information on the position, VA region or administration, and type of adverse or disciplinary action that has been taken.

The list includes terminations, demotions and suspensions over 14 days since the new administration came into office on January 20. Additional categories of accountability actions will be included in upcoming releases.

In addition to posting the adverse action information, Secretary Shulkin announced that he is requiring approval by a senior official of any monetary settlement with an employee over the amount of \$5,000. Any settlement above this



amount will require the personal approval of the under secretary, assistant secretary or equivalent senior-level official within the organization in which the dispute occurs.

“Taxpayers need to know that we will engage in good faith settlement negotiations, where required by third parties, but will look to settle with employees only when they clearly have been wronged or when settlement is otherwise in Veterans’ and taxpayers’ best interests, and not as a matter of ordinary business. We’re changing to a culture of accountability at VA, and this is an important step in that direction,” said Shulkin.

## Video game technology helps Veterans improve their balance, get moving



When 69-year-old Vietnam Veteran Robert Brown was looking for ways to increase his balance and physical activity, he joined VA’s Wii Fit™ pilot research study at Little Rock, Ark. Motivated to lose weight, he overcame his concerns about falling and started walking and exercising again on a regular basis.

Brown and other Veterans took part in the VA- funded study led by Dr. Kalpana Padala at VA’s Geriatrics Research, Education and Clinical Center (GRECC) at the [Central Arkansas Veterans Healthcare System](#) in Little Rock.

Dr. Padala and Brown are pictured above along with research coordinator Christopher Parkes.

The study involved a randomly assigned group of 30 participants. Researchers used the Wii ™ program, comparing results with a control group that completed computer-based mental exercises.

The Nintendo® Wii Fit™ Plus program includes a Wii console, Wii balance board, and Wii remote. It consists of balance games, yoga, strength training, aerobics and training plus (more advanced activities). Balance exercises involved posture

control (e.g. Half Moon, Torso Twist), weight shifting (e.g. Ski Slalom), multidirectional balance (e.g. Table Tilt), and multidirectional balance while doing a mental activity (e.g. Perfect 10).

### **Combining activity with technology is the focus**

The results showed 12 times greater improvement in balance among the older Veterans using the Wii Fit™ program compared to the control group. Results were published in the *Journal of Aging Research*. Dr. Padala said the study's results show promise to help understand and improve mobility in older adults. "Combining physical activity with readily available technology is the focus of our research," said Dr. Padala. "These exercise programs are most effective if they are readily available and easy to do."

Army Veteran William Boehmer took part in the program and also had a positive experience. He suffered a serious spinal cord injury while serving in the first Gulf War and was nearly paralyzed at one point. His back had increasingly become worse after a series of operations and physical therapy.

Boehmer said the Wii Fit™ video games and exercise program have helped him the most. He used to have problems in doing simple things, like walking to the mailbox. But now he is skiing—albeit indoors — through use of the video and balance board. Boehmer said the balance board and video games require the participant to move and twist and turn while watching a video as if you are skiing on a course. The weight shifts and turns help in ways they don't originally focus on for their balance.

"I could tell I was more balanced; my gait was better," Boehmer said.

### **Thousands die from falls every year**

Studies show that 22 percent of older adults living in the community fall each year. An estimated 2.8 million older adults get treated annually for falls, of which about 800,000 are hospitalized, and 27,000 die as a result of falls.

Dr. Padala said the long-term goal is to increase physical activity level in older adults and lower their risk of falls. "These results are very encouraging because balance and gait problems are very common in older adults and are important risk factors for falls. Falls in turn are associated with increased morbidity and mortality in the older adults," Dr. Padala said.

Dr. Padala plans to apply for grant money to offer the program to a larger group of Veterans and to bring the program to peoples home so it is readily available for the Veterans to use it.

"Expanding this program based on the research makes tremendous sense for us in VA because more than 50 percent of Veterans enrolled in VA's health care system are over the age of 65," said Dr. Richard Allman, Chief Consultant for VA's Geriatrics and Extended Care (GEC) program.



# VA testing mobile app that helps tailor care based on each Veteran's genetics



When a new system being field tested this summer goes live, VA will become the first U.S. health care organization ever to put genetic testing data into the hands of patients via a mobile application.

The system, named Genetic Diagnostic Testing App — called GDx — will put individual genetic information in the hands of Veterans — providing them with access to their information anywhere, anytime, as well as the ability to share it with VA and non-VA providers alike. In short, medical professionals will be able to provide highly-individualized care and better treat their patients.

To explain a bit more in detail, GDx project leads Dr. Michael Icardi, national director of VA Pathology and Laboratory Medicine Science, and Dr. Julie Lynch, nurse research scientist at VA Informatics and Computing Infrastructure answered the following questions about this initiative.

**Question:** What is the current landscape of clinical genetic testing at VA?

**Answer:** VA is one of the country's largest consumers of clinical genetic testing, and it has been on the forefront of developing informatics systems to ensure appropriate use of precision medicine. Currently, if Veterans are sent for clinical genetic testing, in most cases their specimen is sent to a commercial laboratory outside of VA. Test results are then sent to the VA clinician through a 10-12 page faxed report. Sometimes these tests are single gene tests, other times these tests are gene panels that analyze anywhere from 100 to 300 genetic variants to determine whether the Veteran has clinically actionable mutations. This data is not currently standardized or stored within Veterans Health Information Systems and Technology Architecture (Vista), so it's not easily searchable within the medical record. In addition, if Veterans go elsewhere for care, then they have to fill out forms for the facility to request hard copies of those reports. The same is true for Veterans tested on the outside coming into the VA system. They have to remember where the test was done and fill out a request for the information to be sent to VA. That takes time. If the facility can't get the reports soon enough, then the patient has to be retested.

**Q: How does GDx change this?**

**A:** The GDx backend is the system that captures the data, indexes it and makes it computable. Both VA and outside labs send their data to GDx. So, using the provider version of the app, a VA clinician can pull up the data, regardless of where it was done. But even better, the Veteran version of the app puts the information into the hands of Veterans. Now, they

can walk in the door at a cancer facility, for example, and say “Here is my information. Let me Airdrop it to you.” It becomes a patient-mediated data exchange – the patient is now in control of this specialized data.

**Q: Why is having this genetic data in your pocket so important?**

**A:** A patient’s genetic data informs diagnosis, prevention and treatment of several diseases, so it is extremely important that both patients and their health care providers understand whether patients have a clinically actionable genetic variant. Delivering this directly to the patient via an app is something that no other health care organization has done. It’s historic and will be life changing for the Veteran. This makes individualized care, that is, personalized medicine a reality for Veterans. It puts the power of diagnosis and treatment in their hands.

**Q: Can you explain further what you mean by that?**

**A:** I can offer three examples. First, let’s say you’ve been diagnosed with cancer. They’ve done the molecular genetic tests to identify tumor mutations. This allows you to find the best treatment program for your cancer. Treatments, such as immunotherapy, can be ordered based on the genetic characteristics of your particular tumor. There is no more one size fits all.

But this isn’t just for cancer. Here’s a second example. GDx creates a database that pharmacists can access to make prescribing decisions. If you’re a Veteran, they might order a drug metabolism profile for you. They can then look at whether you’re a fast metabolizer of codeine versus a slower metabolizer, for example, and customize your dosage accordingly.

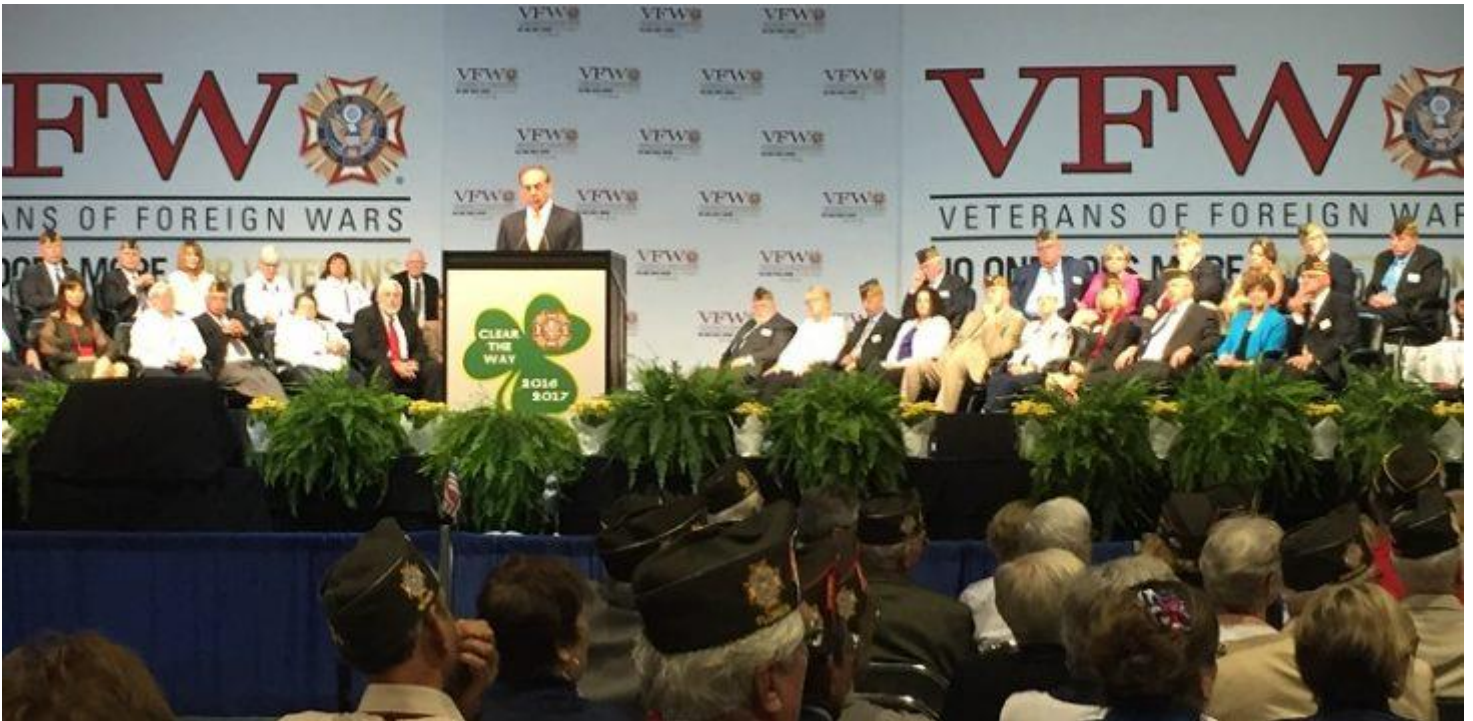
Finally, for those who have an infectious disease – hepatitis or HIV, for example – the genetic information pinpoints what your treatment options should be. You can take a New York City workup with you to Iowa. It makes treatment uniform across the board.

**Q: Are there long-range benefits to collecting and storing this genetic information?**

**A:** Absolutely. Before, we only kept the information that was pertinent to the clinical issue at the time. Now, with GDx, in five or six years when genetic research reveals more to us, we’ll be able to go back and look at a patient’s data afresh and generate an updated report. This really is assembling a genetic testing database that will be available for future clinical analysis to directly benefit the patient.

The GDx team’s goal is to wrap up the last leg of development by the end of August. Stay tuned for more information about GDx in the coming months. Both the provider and Veteran versions of the app, as well as extensive training materials, will be available on the [VA App Store](#) when the system goes live nationwide.

## Shulkin to VFW: We want Veterans to get the right care at the right place



On Monday, July 24, Secretary of Veterans Affairs Dr. David J. Shulkin addressed an audience of VFW and Auxiliary members at the Veterans of Foreign War (VFW) 118<sup>th</sup> National Convention in New Orleans.

In his remarks, Shulkin spoke on the five key priorities he has identified to transform VA. The first of those five priorities is to give Veterans greater choice.

"When I talk about greater choice, right now we have a system that I would call a rules-based system," Shulkin said, highlighting how administrative rules, such as how far a Veteran lives from a VA, dictates whether that person can get care in their local community. "I believe we need a system that's not based on rules, but is based on your clinical needs."



*Sec. Shulkin speaks to the VFW 118th National Convention.*

"We want that clinical flexibility to be able to allow Veterans to be able to get the right care at the right place," Shulkin told the VFW convention attendees.



The secretary's comments echoed an editorial that appeared earlier on Monday. [Shulkin wrote in USA Today](#) that community care, or private capacity, and VA's internal capacity are not mutually exclusive.

"We are ramping up both simultaneously in order to meet the health care needs of the Veterans we are charged with serving," [he wrote](#).

VA is embarking on the largest transformation and modernization effort in recent history. Secretary Shulkin recently established the VA Office of Accountability and Whistleblower Protection and [announced that the VA will dispose of 430 vacant buildings](#) in 24 months. In June, the President signed into law the VA Accountability and Whistleblower Protection Act and Secretary Shulkin [announced that the VA will adopt a joint electronic health record system](#) integrated across all Department of Defense and VA components.

VFW is a nonprofit Veterans service organization comprised of eligible Veterans and military service members from the active, guard and reserve forces. Today, membership stands at nearly 1.7 million members of the VFW and its Auxiliary

## 10 things to know about the Veterans Choice Program



*The Veterans Choice Program (VCP) is a benefit that allows eligible Veterans to receive health care from a community provider rather than waiting for a VA appointment or traveling to a VA facility.*

### 1. Am I eligible for the Veterans Choice Program?

To be eligible for the program, you must be enrolled in VA health care and must also meet at least one of the following criteria:

- You are told by your local VA medical facility that you will need to wait more than 30 days for an appointment.
- Your residence is more than a 40 mile driving distance from the closest VA medical facility with a full time primary care physician.
- You need to travel by air, boat, or ferry to the VA medical facility closest to your house.

- You face an unusual or excessive burden in traveling to the closest VA medical facility based on a geographic challenge, environmental factor, medical condition, or other specific clinical decisions. Staff at your local VA medical facility will work with you to determine if you are eligible for any of these reasons.
- You reside in a State or a United States Territory without a full-service VA medical facility that provides hospital care, emergency services and surgical care, and reside more than 20 miles from such a VA medical facility. Note: This criterion applies to Veterans residing in Alaska, Hawaii, New Hampshire, Guam, American Samoa, Commonwealth of the Northern Mariana Islands, and the U.S. Virgin Islands. Also note that some Veterans in New Hampshire reside within 20 miles of White River Junction VAMC and are therefore not eligible for the Veterans Choice Program.

## **2. What if I think I am eligible?**

- Call the VCP Call Center at 866-606-8198 or visit the Veterans Choice Program website to verify eligibility and set up an appointment [here](#).

## **3. Can I call my non-VA doctor to make an appointment?**

- No, please call the VCP call center at 866-606-8198 to verify eligibility and set up an appointment.

## **4. How is the 40 mile calculation determined?**

- This calculation is based on the driving distance from your permanent residence (or active temporary address) to the closest VA facility, including Community-Based Outpatient Clinics and VA Medical Centers. You are eligible if you live more than 40 miles driving distance from the closest medical facility that has a full-time primary care physician.

## **5. If I am eligible for the Veterans Choice Program, can I receive Beneficiary Travel for travel to appointments with a VCP provider?**

- Yes, the Choice Act does provide funding to pay for travel to VCP providers for Veterans who are eligible for Beneficiary Travel. However, it did not provide any new Beneficiary Travel eligibility.

## **6. If I didn't get my Choice Card or I lost my Choice Card, what do I do?**

- You do not need your Choice Card to access the VCP. If you didn't receive a Choice Card or lost your Choice Card, simply call 866-606-8198 to find out if you are eligible and to make an appointment.

## **7. How do I get my prescription filled if I use the Veterans Choice Program?**

- The community provider you see through the VCP can issue a prescription for up to a 14 day supply of a national formulary drug. You may have the 14 day supply filled at any non-VA pharmacy of your choosing.
- Prescriptions can be reimbursed through the Business Office/Non-VA Care Coordination Office at VA facilities. This reimbursement may take 30-45 days to process, and requires a copy of the prescription and the original receipt. Veterans cannot be reimbursed at the VA Pharmacy.
- For prescriptions needed past 14 days, please follow standard procedures to fill a prescription at the VA pharmacy.

## **8. If I use the Veterans Choice Program, does that affect my VA health care?**

- No, not at all. You do not have to choose between the two. The VCP is here to make it easier to access the care you need. VA is building a high-performing integrated health care network to deliver the best of VA and the community. This integrated network will give Veterans more choices to access care and ensure care is delivered where and when you need it.

## **9. What is my responsibility for co-payments to my other insurance?**

- Nothing. VA is now the primary coordinator of benefits for VCP, so you are only responsible for your VA copayment.

- Your VA copayment will be determined by VA after the care is provided. VA copayments will be billed by VA after the appointment.

#### **10. How does the new VCP extension law affect me?**

- Public Law 115-26, enacted April 19, 2017, made three key changes to help improve the VCP. The law removed the expiration date for the program, made VA primary coordinator of benefits for services provided to you, and it removed barriers with sharing necessary health information with community providers.

#### **More Information**

- Please refer to the Veterans Choice Program website for more information about the program, its benefits, and eligibility criteria [here](#).
- Providers interested in participating must establish a contract with one of the contractors, Health Net Federal, or TriWest Healthcare Alliance. For more information, about how to participate please visit [Veterans Choice Program website for providers](#).

**Respectively Submitted,**  
**Bruce W. Skipton VFW Post 1260 Surgeon/Service Officer**