



# Veterans-For-Change Newsletter

## *A Voice of the Veterans*

Week Ending Sunday, March 12, 2017

Volume 8, Issue 11

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### *This-N-That*

A Navy Veteran, Paul Shuping, killed himself in the parking lot of a VA hospital in Durham, North Carolina. He used a .22 caliber rifle to end his life after being denied full benefits.

Does this anger you? If not what about this little reminder?

We have a dentist who may have infected hundreds with HIV; we all know about the secret wait lists that may have led to the deaths of at least 300,000 Veterans waiting for health care; we know about the endless red tape; and we know that VA supervisors falsified the patient wait times at facilities in several states.

Does this anger you now?

My question to all our readers now is, if either of the above anger you, then why won't you join in the fight to resolve all the issues within the VA, get your benefits and medical care, or if you already are receiving your benefits and care, then why won't you help your fellow Veteran?

We already know the majority if not all of the Nationally Chartered Service Organizations do little to nothing, or cherry pick very minor issues to jump on, and at best a letter is sent about their dislike and nothing else is heard or done.

Again in this issue we have several "Action" items which truly do need your help as well as all those whom you know.

It only takes a couple of minutes to sign on the letters and click send, then you can either forward this newsletter to all on your mailing list and an added not asking them to also sign on the letters and forward on to their mailing list.

Blue Water Navy Veterans are dying and still are treated worse than a second class citizen for having served on the water and not actually having "boots on the ground!"

Widows are still being penalized and cheated from their spouses retirement benefits in full since they're receiving DIC (Disability Indemnity Compensation) which is deducted from retirement pay and are losing upward of \$1,200 per month and more.

Then we know that 22 Veterans commit suicide daily, however, this does not include those not "reported" to the VA and is more likely upward of 40+. The very first paragraph is just ONE very real incident!

What does it really take for each and everyone of you to take action and help in the fight for better care, far more timely claims review and processing, truly taking care of our homeless Veterans, to stop the insanity of Veteran Suicides and more?

One more step you can take is to send an E-Mail to: [president@whitehouse.gov](mailto:president@whitehouse.gov) and you can also visit the White House website and send a message there as well by clicking [HERE](#).

On behalf of our Volunteers nationwide and myself, we wish you and your family good health!

Respectfully,  
Jim Davis  
Founder  
[Jim.Davis@Veterans-For-Change.org](mailto:Jim.Davis@Veterans-For-Change.org)

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## **Help Blue Water Vietnam Vets Exposed to Agent Orange**

The “Blue Water Navy Vietnam Veterans Act” has been introduced in both the House and Senate (H.R. 299 & S. 422 respectively). These proposals would clarify that service members serving off the coast of the Republic of Vietnam during the Vietnam conflict have a presumption for filing disability claims with the Department of Veterans Affairs (VA) for ailments associated with exposure to the Agent Orange herbicide. FRA believes Congress should recognize that so-called “Blue water” veterans were exposed to Agent Orange herbicide and authorize presumptive status for VA disability claims associated with this exposure.

Please use the [Action Center](#) to ask your legislators to support this important legislation.

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## **The Repeal/Replace of Obamacare: Does it Affect TRICARE?**

The Republican House Leadership has just rolled out their ideas on how to repeal and replace Obamacare. Of course this is just the opening bid... and we see that many members on each side of the aisle intend to fight it. But while that is going on you should know how these proposals could affect TRICARE. The quickest answer is that they won't (though that is very simplistic). The House leadership version has just been rolled out and consists of two staggeringly long bills.

You should remember that TRICARE is a health care earned benefit. It is NOT an insurance policy or an insurance company and we must never forget that. We must continue to fight to keep that distinction clear in the minds of the members of Congress. The two programs were created separately and exist in two separate chapters of the Federal Code. Changes of one program should not affect the other program. TREA and the great majority of other VSOs and MSOs successfully fought to keep TRICARE separate and independent from Obamacare (Affordable Care Act) when it was first passed.

But there were items in the ACA that TRICARE beneficiaries liked and wanted. So after much lobbying the 2015 NDAA authorized Young Adults (until they reach 26) to be allowed to remain on their parents TRICARE. It also provided breastfeeding benefits without any co-pays or other costs to TRICARE beneficiaries (like sections of the ACA). Again this was done in the NDAA not the ACA.

The real area of concern for TRICARE beneficiaries is the NDAA 2015 also instructed TRICARE to follow the ACA. What does that mean if it is repealed and replaced? Not quite clear. But so far so good. TREA will watch it very closely and if any threats or troubles arise we will fight them and inform you about them immediately.

Source: TREA

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## Lawmakers Try Again to Accelerate Discipline of VA Employees

Lawmakers are trying again – this time with support from the Department of Veterans Affairs – to give the VA secretary more power to fire, demote or suspend poor-performing employees and recoup their bonuses. [Legislation](#) would also shorten the timeline VA employees have to appeal any disciplinary action against them and require quicker determinations from the Merit Systems Protection Board, which hears the appeals. For more details, see this [Military.com article](#).

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## Support SBP/DIC Offset Repeal Legislation

Senator Nelson (FL) has introduced legislation (S. 339) and Congressman Joe Wilson (SC) has introduced identical legislation in the house (HR 846) that repeals the SBP/DIC offset for survivors, sometimes referred to as the "Military Widows Tax.". Please use this action center contact your legislators to ask them to support this important legislation.

[Take Action!](#)

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## Deportation Risk for Immigrant Military Families?

In the last few days, there have been a number of stories with sensational headlines about the deportation risk to active duty military members or their family members like "Trump moves to Deport Military Spouses, Trump Order Drops Protection for Deployed Military," and "Military Families could face new risk of deportation under Trump rules." What's the truth behind these headlines? For more details, see this [SpouseBUZZ post](#).

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## New Veterans' Legislation

This legislation was just introduced in the last week, TREA: The Enlisted Association does not have a formal position, yes or no, on much of it yet. This list is provided for your information only.

**S.493:** A bill to amend title 38, United States Code, to provide for the removal or demotion of employees of the Department of Veterans Affairs

based on performance or misconduct, and for other purposes.

Sponsor: Sen. Marco Rubio (R-FL)

Read twice and referred to the Committee on Veterans' Affairs.

**S.521:** A bill to make the National Parks and Federal Recreational Lands Pass available at a discount to veterans.

Sponsor: Sen. Jon Tester (D-MT)

Bill Title: Recreational Lands Pass available at a discount to veterans.

Read twice and referred to the Committee on Veterans' Affairs.

**S.514:** A bill to direct the Secretary of Veterans Affairs to carry out a pilot program to provide access to magnetic EEG/EKG-guided resonance therapy to veterans.

Sponsor: Sen. David Perdue (R-GA)

Bill Title: A bill to direct the Secretary of Veterans Affairs to carry out a pilot program to provide access to magnetic EEG/EKG-guided resonance therapy to veterans.

Read twice and referred to the Committee on Veterans' Affairs.

**H.R.1359:** To provide for the reconsideration of claims for disability compensation for veterans who were the subjects of experiments by the Department of Defense during World War II that were conducted to assess the effects of mustard gas or lewisite on people, and for other purposes.

Sponsor: Rep. Jackie Walorski (R-IN-02)

Bill Title: reconsideration of claims for disability compensation for veterans who were the subjects of experiments by the Department of Defense.

**H.R.1331:** To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to provide educational and vocational counseling for veterans on campuses of institutions of higher learning, and for other purposes.

Sponsor: Rep. Jim Banks (R-IN-03)

Bill Title: Secretary of Veterans Affairs to provide educational and vocational counseling for veterans on campuses

Referred to the House Committee on Veterans' Affairs.

**H.R.1329:** To increase, effective as of December 1, 2017, the rates of compensation for veterans with service-connected disabilities and the rates

of dependency and indemnity compensation for the survivors of certain disabled veterans, to amend title 38, United States Code, to improve the United States Court of Appeals for Veterans Claims, to improve the processing of claims by the Secretary of Veterans Affairs, and for other purposes.

Sponsor: Rep. Mike Bost (R-IL-12)

Bill Title: December 1, 2017, the rates of compensation for veterans with service-connected disabilities and the rates compensation for the survivors of certain disabled veterans, to amend title 38, United States Code, to improve appeals for Veterans Claims, to improve the processing of claims by the Secretary of Veterans Affairs.

Referred to the House Committee on Veterans' Affairs.

**H.R.1328:** To amend title 38, United States Code, to provide for annual cost-of-living adjustments to be made automatically by law each year in the rates of disability compensation for veterans with service-connected disabilities and the rates of dependency and indemnity compensation for survivors of certain service-connected disabled veterans, and for other purposes.

Sponsor: Rep. Mike Bost (R-IL-12)

Bill Title: year in the rates of disability compensation for veterans with service-connected disabilities and the rates survivors of certain service-connected disabled veterans, and for other purposes.

Referred to the House Committee on Veterans' Affairs.

Source: TREA

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## **To Contact your Members of Congress**

To Call your Representative: 202-225-2305

To call your Senator: 202-224-3841 or 202-224-3553

To call different members of Congress: 202-224-3121

Toll FREE Number: 866-272-6622



**S. 423, CHAMPVA Children's Protection Act**

On February 16, 2017, Senator Jon Tester introduced S. 423, which would extend the eligibility of children under the CHAMPVA program.

Under the Affordable Care Act, Congress and the Administration made a decision to cover every adult child on their parents' policies until they reach age 26, except for those who could be covered under CHAMPVA. This situation is unfair and unacceptable.

To address this inequity, National Convention delegates representing the 1.3 million members of the DAV endorsed national resolution 128 supporting legislation to extend the eligibility of a qualifying veteran's child for CHAMPVA coverage to age 26 under the same conditions of adult children covered by private health plans.

DAV believes dependents of severely disabled veterans and survivors of veterans who paid the ultimate sacrifice for our nation should not be penalized or otherwise not allowed to enjoy the same rights and privileges as other citizens of a grateful nation.

Please use the prepared e-mail, or draft your own message, to request that your Senators support this important bill and ask that it be brought to the floor for a vote and passed as soon as possible.

Click [HERE](#) and send your message.

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## **Adopt-A-VA Program**

The Military Outreach USA Adopt-a-VA program connects community organizations and residents with a local VA medical center (VAMC) or community-based outpatient clinic (CBOC). These local adopters commit to helping VA provide support to homeless area Veterans and their families who are experiencing homelessness or are at risk of becoming homeless. Under the Adopt-a-VA program, adopters are contacted by their local VA facility to donate services, support local events, or participate in other efforts to help vulnerable Veterans as needs arise. To learn more, visit the Adopt-a-VA [website](#).

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## NARFE President Applauds Introduction of CPI-E Bill to Improve COLAs at Capitol Hill Press Conference

NARFE President Richard G. Thissen made the following remarks at a press conference on the introduction of H.R. 1251, the CPI-E Act of 2017, hosted by the bill sponsor, Congressman John Garamendi, D-CA-3.

Thank you, Congressman Garamendi, for including NARFE at today's event, and for your dedication to our nation's seniors.

While the CPI-E Act of 2017 amends a complex calculation, it provides a rather simple improvement, rooted in common sense. What this bill says to seniors is that your cost-of-living adjustment will more accurately reflect your cost of living. That's it! It's that simple! It's so simple, in fact, that many of your colleagues may not get it.

The fact that we do not use the CPI-E already is shocking. Instead, cost-of-living adjustments for seniors collecting Social Security and federal civilian or military retirement benefits are based on the costs experienced by "urban wage earners and clerical workers." They are not based upon the costs retired individuals experience. And that does not make a lot of sense.

Worse yet, it is costing seniors, including federal civilian and military retirees, precious dollars every year. The 2017 COLA was 0.3 percent, and the year before, there was no COLA at all.

Yet, over these two years, the actual cost of living incurred by seniors increased by 2.7 percent – 2.1 percent in 2016 and 0.6 percent in 2015. That is what seniors should have received and that is what this bill would provide them. For the average federal annuitant, that would have meant an increase of approximately \$950 per year.

That is just from the last two years. Over time, the difference adds up to tens of thousands of dollars. For those living on fixed incomes, every dollar counts.

But, if it is that simple, why hasn't the formula been changed? And, why is there a difference between how we determine COLAs now, and how this bill would require it?

Well, it turns out that the so called CPI-W, the cost index used for COLAs now, is simply a historical relic. When Congress first made COLAs automatic, it was the only price index available.

But since 1982, the Bureau of Labor Statistics has been calculating an index measuring prices experienced by those 62 years of age and older, called the CPI-E. Between 1982 and 2014, it showed prices increased for those individuals by 0.2 percent more, per year, on average. That's mostly because seniors rely more on medical care and medical price increases have far outpaced the increases for other consumer goods.

So we have an index that accounts for price effects on seniors – that would give seniors a fair COLA – yet Congress has failed to adopt it.

The good news is that this bill offers that simple fix, and is an equitable improvement for the millions of seniors relying on their earned Social Security benefits and millions of federal and military retirees who have served their country both in and out of uniform.

Thank you again Congressman Garamendi for leading on this issue. I urge the rest of Congress to follow Congressman Garamendi's lead and pass this bill.

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**Operation Mail Call**

**Never Forgotten**



**Never Enough Thanks for Your  
Sacrifices**

Operation Mail Call needs your help! We need cards and letters to send to our troops currently serving on foreign soil.

Our men and women in uniform often go months without hugging their children, walking through the park with a significant other or enjoying Mom's home-cooked Sunday dinners.

Ask them where they'd go if they had a free plane ticket anywhere in the world, and the overwhelming majority would say, "home."

Of course, we can't replace the hugs, the love or the secret family chili recipe – but with your help, we can provide them a connection to their fellow Americans who are grateful for their service.

Now, we're hoping you'll take your support to the next level by sending more cards and letters. Hand made cards by your children, or class mates are a terrific means of putting smiles on their faces even if only for a moment.

Cards and Letters of encouragement to help boost moral and let them know we sincerely appreciate the job they are doing and look forward to they day they are all brought home. Your card or letter will show your appreciation and help thousands more American heroes feel connected to the people they love and the country they serve.

Please help us to make a powerful expression of how much their fellow Americans care about them.

Thank you so much for all you're doing to show our service men and women they are appreciated missed and loved.

If you're a school teacher, please contact me at my E-Mail address at the top, our troops love to hear from kids too!

For more information, click [HERE](#).

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## VA Offers Hep C Treatment

The Department of Veterans Affairs (VA) is offering new treatments for Hepatitis C. The new treatments usually consist of one to two pills a day for 12 weeks and have a 95 percent cure rate compared to 40 to 45 percent for the older treatments. The new treatment also has very few side effects and those are usually very mild. More than 80,000 Veterans nationwide have been treated for hepatitis C since January 2014 with an estimated cure rate of 94 percent. Another 64,000 who have tested positive for the virus are potentially eligible for treatment. For more information, read the [VA Vantage Point Blog](#).

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## VA Secretary Goes Online to Answer Questions

The new Department of Veterans Affairs (VA) Secretary, Dr. David Shulkin, recently took questions from Veterans during a town hall-style digital event on YouTube Live. Shulkin and other VA senior leaders joined moderator Bill Rausch for the 30-minute discussion. The YouTubeLive discussion is one of several events over the next few weeks where Shulkin will meet directly with Veterans, Veterans service organizations, state Veterans Affairs directors, as well as VA employees to highlight the progress VA is making in delivering the care and services veterans need and deserve. Watch a video of the discussion on [YouTube](#).

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## Report: VA Not Tracking True Health Care Delays in Two States

Government inspectors say actual delays in delivering [medical care to military veterans](#) remain far worse at Veterans Affairs medical facilities in North Carolina and Virginia than internal records showed. U.S. Sen. Richard Burr of North Carolina said Friday the new report by the Veterans Affairs Department's inspector general found 90 percent of the vets eligible to see private doctors because of long VA delays weren't getting the help they were due. For more details, see this [article](#).

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## U.S. Government Accountability Office Reports

- 1) 2016 Filing Season: IRS Improved Telephone Service but Needs to Better Assist Identity Theft Victims and Prevent Release of Fraudulent Refunds.
  - 2) Foreign Assistance: Agencies Can Improve the Quality and Dissemination of Program Evaluations.
  - 3) Immigrant Investor Program: Proposed Project Investments in Targeted Employment Areas.
  - 4) VA Construction: Improved Processes Needed to Monitor Contract Modifications, Develop Schedules, and Estimate Costs.
  - 5) Veterans' Health Care: Preliminary Observations on Veterans' Access to Choice Program Care.
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## **Veteran Crisis Resources**

**Veterans Crisis Line 1-800-273-8255 and Press 1**

**Military Crisis Line 1-800-273-TALK (8255)**

**National Call Center for Homeless Veterans**

**1-877-4AID-VET (424.3838)**

**VA Caregiver Support Line 1-855-260-3274**

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## **VA Extends Native American Health Care**

The Department of Veterans Affairs (VA) is working to improve the health of our nation's American Indian and Alaska (AI/AN) veterans by expanding access to care and care coordination efforts with the Indian Health Service (IHS) and Tribal Health Programs (THPs) nationwide. In 2012, VA signed a national reimbursement agreement with Indian Health Service allowing VA to compensate IHS for direct health care provided to eligible AI/AN veterans. Recently extended through June 30, 2019, the agreement will continue to provide timely access to care closer to home. For more information, read the VA Vantage Point [Blog](#).

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## **Veterans' Information Possibly Compromised**

A former Veterans Affairs (VA) employee in St. Louis recently released 724 patient records to an employee not involved in the medical care of those veterans. The VA's office of the Inspector General is aiding in the investigation of this alleged information leak. Each of the veterans whose information was potentially disclosed is receiving a letter from the VA notifying them of the apparent privacy breach. Veterans who have questions or concerns about the personal data leak are encouraged to call a special VA hotline at 1-800-228-5459 extension 50998 between the hours of 7:30 AM to 4:00 PM Monday through Friday.

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## **Veterans-For-Change Web Site**

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

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

We also have a forum with a licensed Mental Health Worker, again where you can seek help or just ask questions.

We average 1,700 hits per day, and downloads average 1,000 per day with a total 3,202,268 visitors as of Friday.

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

authorized automatically.

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

- Documents Library with over 15,905 documents on-line (Updated: 12/12/16)
- FAQ's with more than 1,600 FAQ's and answers
- Multiple Forums
  - o Afghanistan Veterans
  - o FMP - Foreign Medial Program
  - o Gulf War & Desert Storm Veterans
  - o Iraq Veterans
  - o Korean Veterans
  - o Men Veterans Forum
  - o Mental Health for Veterans
  - o Political Issues
  - o Suggestion Box
  - o The Mess Hall
  - o VA Hospitals and Medical Centers
  - o Veteran Affairs
  - o Vietnam Veterans
  - o Welcome Mat
  - o Women Veterans Forum
  - o WW II Veterans
- Job Postings
- Memorial Pages (Updated: 10/10/16)
- News (Articles On-Line: 6,369)
- Polls
- Web Links, more than 3,542, Added 1 New Links (Updated: 03/01/17)

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

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

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<https://twitter.com/Veterans4Change>

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## Links to Other Stories

- 1) [39 workers suspended at Pennsylvania-run home for Veterans](#)
- 2) [It's move-in time for homeless Veterans at new apartments built from shipping containers](#)
- 3) [New Veterans Affairs Secretary: Help those with other than honorable discharges](#)
- 4) [Tragic: Veteran Commits Suicide After VA Denies Him Full Benefits](#)
- 5) [VA enlists help of electromagnetic head device to treat Veterans battling depression](#)
- 6) [VA expands mental health care for discharged Veterans](#)
- 7) [VA hears from Veterans](#)
- 8) [Volunteers Constructed An Entire Community To House Homeless Veterans](#)

You can help VFC by reading articles posted and commenting at the bottom and rate the articles. If you don't have an account, sign up today, it's FREE. Your comments and rankings tell us what type of information you want most.

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

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## Hiring Freeze is Affecting Commissaries

Reports are starting to surface that the federal hiring freeze ordered by President Trump is causing long lines at military commissaries and could

eventually force commissaries to implement shorter hours or even to close. In fact, that's already happened at some installations.

According to the Military Times, "Army and Air Force Exchange Service officials said they have been forced to reduce hours at some operations at [Joint Base Lewis-McChord](#), Washington; [Luke Air Force Base](#), Arizona; [Davis-Monthan AFB](#), Arizona; [Holloman AFB](#), New Mexico; and [Fort Bliss](#), Texas.

"Some Marine Corps Community Services programs at [Camp Lejeune](#) and [Marine Corps Air Station New River](#), North Carolina, including several marts, have had to reduce hours or close, officials there announced Feb. 24."

The Times also says military child care is being affected.

"Officials at Lejeune and [Fort Knox](#), Kentucky, have shuttered hourly services, among other reductions. Officials at [U.S. Army Garrison Wiesbaden](#), Germany, have ended their part-time programs, and Naval Air [Station Lemoore](#), California, is planning to reduce hours starting later this month if hires are not made.

"While child care hires are exempted from the freeze, base officials are still required to get clearance to fill the positions and the hiring process can be lengthy due to required background checks."

Because of this situation, an open letter to President Trump was sent last week by the American Logistics Association which said in part of the commissary system:

"Here, Mr. President, is a program that you can point to as one that needs to be replicated in Government and not decimated at the altar of hasty and radical cost cutting and experimentation. It's a fragile ecology built up over the years and carefully constituted to give the troops, their families, and America the best bang for the buck.

**Supporting strong National Defense.** The Sun never sets on the vast network of commissaries, Veterans Canteens, and Army, Air Force, Navy,

Marine and Coast Guard exchanges that operate 24/7 worldwide from Guantanamo to the Korea Demilitarized Zone to Afghanistan and Iraq. In support of our Armed Forces and their families at both their home bases and in far-flung and forward deployed areas. With operations aboard ships, providing school lunches overseas, providing plants to generate bread and water, forward distribution centers, tactical field exchanges and so much more that is vital to the support, readiness, and direct operational support of our military members. The program adapts to military force structure and basing changes, expanding and contracting to meet the needs of an ever-evolving military. And, it keeps good people in the Service because when the family is happy, everyone is happy.

**Enhancing quality of life for service men and women.** The system provides all of those name-brand, recognizable products and services that Americans have come to love. This includes everything from name-brand fast food to the best brands that they have come to love — thousands of brands that represent a little touch of America wherever our dedicated military serves — and at savings to them from 20 to 50 percent. Greatly stretching the household income of millions of military and Veteran families.

**Supporting Veterans.** Not only do Veterans benefit from using these programs, the system employs thousands of Veterans and is the top employer of wounded warriors and disabled Veterans.

**Employing family members.** Over 50 percent of employees in these operations have a military affiliation, with almost one-third being military family members. That's money that's cranked right back into the military community and into military households.

**It's a benefit that is used the most by those who need it the most.** Junior enlisted, junior officers with families, retirees, and Veterans and surviving spouses on fixed incomes are the primary users of these programs. It directly provides non-pay compensation for service men and women that we can never pay enough for their sacrifice and service.

**Providing for accountability and transparency in Government.** You want accountability — you got accountability with these programs that consistently have a clean audit year in and year out ... something that few

DoD programs can claim.

**Supporting American industry and promoting American products, and tipping the balance of trade in favor of America.** Every day, across the globe, Americans are consuming products made in America through a sophisticated and complex distribution network that makes sure America's industry is supported.

**Bringing together the best attributes of the private sector and public sector to create a working partnership.** This system provides the optimal mix of out-sourcing and in-sourcing Government functions, allowing the troops to benefit from all of the advantages of both Federal and business status.

**Supporting a multitude of benevolent programs for our Military and Veterans.** From the USO to Fisher House, NFL ProCamps for military kids, and Blue Star families, the system and the American industry that supports it contribute and underwrite the costs of operating these vital programs.

**Providing a system that self-generates funding and gives back more to the Nation and the American people than it consumes.** Over the past 20 years, this system has donated over \$15 billion in facilities to the Federal inventory and over \$10 billion to support needed military community and family support programs. This, along with military patron savings and direct and indirect contributions to military readiness and Federal assets, make it a program that your Administration can be proud of.

Source: TREA

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<http://veterans-for-change.org/documents-library/category/167-job-fairs-job-postings>



Are you seeking employment? Been looking and not found the right job?

Well Veterans-For-Change is working hard to bring you more information on Job Fairs and Job postings available across the country.

Click [HERE](#) to see all job postings!

If you're an employer and have a job to post, send and E-Mail to:  
[Jim.Davis@veterans-for-change.org](mailto:Jim.Davis@veterans-for-change.org)

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**In-Vitro Fertilization Treatment Available to Eligible Veterans**

Congress passed Public Law 114-223 on September 29, 2016 as part of a multi-agency continuing appropriations package. In Title II of the Act, Congress authorized VA to pay for assisted reproductive technologies including in-vitro fertilization (IVF), notwithstanding the longstanding ban on VA to pay or provide such care. In addition, Public Law 114-223 authorized VA to reimburse eligible veterans for adoption costs.

On January 19, 2017, VA proposed its final rule to allow provision of assisted reproductive technologies, including IVF, to certain eligible veterans and their spouses. In order to be eligible, veterans must be service connected for a condition that makes them unable to procreate without assistance. VA is following guidance established by DOD, which generally limits funding for IVF to 3 completed cycles and 6 attempts. It is estimated that IVF results in pregnancy for about 80% of patients. The regulations for reimbursement for adoption costs have not yet been promulgated.

VA already offers a limited array of diagnostic and treatment options including fertility counseling, lab blood testing, surgical correction of structural pathologies, reversals of vasectomy or tubal ligation, medication and other diagnostic testing and procedures. It is estimated that genitourinary injuries and other conditions such as traumatic brain or spinal cord injuries will make up to 400,000 eligible for such care.

Interested veterans should contact their local VA primary care providers to schedule appointments to determine their eligibility for assisted reproductive technologies, including IVF.

In addition, women veterans may call the VA Women's Call Center at 1-855-VA-Women (1-855-829-6636).

DAV Resolution 256 calls for improved care for veterans in need of assisted reproductive technologies because of service connected disabilities which affect their ability to procreate.

Click [HERE](#) and send your message!

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**~We Proudly Support our  
Military Personnel & Families~**

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

**<https://gem.godaddy.com/signups/193302/join>**

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**Veterans-For-Change, Inc.**

**Riverside County, CA**

**Visit our website today**

**[www.Veterans-For-Change.org](http://www.Veterans-For-Change.org)**

**Serving those who served!**

**Please pass on to all your Veteran Friends and Family**

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Distribution	
Express Mail	144,723
Boston	74,683
Courtesy Copies	3,500
Department of VA	12,403
DoD	29,360
Face Book Pages	3,487
Google	28,241
Los Angeles	134,400
Microsoft	9,465
National Guard	3993
New York	151,055
Other Social Media	41,401
San Francisco	77,379
Twitter	39
US House of Reps & Staff	986
US Senators & Staff	105
University of So. California	5,038
US Air Force	25,025
US Army	64,338
US Marines	27,610
US Navy	36,751
Veterans	19,078,997
Washington DC	139,710
Yahoo	134
	20,092,823

Please do not reply to this E-Mail, this is an unattended E-Mail address, please send all correspondence to: [Jim.Davis@veterans-for-change.org](mailto:Jim.Davis@veterans-for-change.org)

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