



Veterans-For-Change Newsletter

A Voice of the Veterans

Week Ending Sunday, April 30, 2017

Volume 8, Issue 18

This-N-That

For many years now several of us have been screaming to the VA and Congress over water contamination on many of the bases, but two of the worst bases are Maine Base Camp LeJeune, North Carolina and former Marine Corps Air Station El Toro.

I know for fact that in 1957 the base commander at Camp LeJeune was ordered to inform all military residents and civilian contractors of such contamination, but that never did happen.

I also know for fact from being at former MCAS El Toro with a couple of Veterans and collection of some soil samples while there and only needing to dig a couple inches down for samples was more than enough as the chemicals detected from the samples were more than 100 times the "acceptable EPA Limits!"

Now years later one bill was passed which personally I think was a very quickly and poorly written piece of legislation was put into effect, but they (the VA) again has been slower than molasses in helping those contaminated, and Veterans and their families from other bases have had one major uphill battle in trying to get benefits and care.

Finally even though well known over 400 other bases are coming to light via other than EPA reports.

Bases many years ago and who knows since I've not been in a military base since 1997 were literally dumping excess and waste chemicals right into the ground.

I know in El Toro the chemicals have traveled through the aquifer system into Turtle Rock and other surrounding areas of the MCAS El Toro base are equally contaminated and I would hesitate a guess that we will begin to see cancer clusters over the next 3-5 years, and the same with more cases of autism as well. Magically the EPA cleared the land in El Toro (former Marine Base) to be developed with high end homes, retail businesses, industrial businesses and of course the park they had constructed several years ago.

But they will never inform buyers and businesses, won't be forced to clean up which is almost impossible.

And it's a familiar story to residents from New York to Colorado, Pennsylvania to Idaho. Contamination from former or current military installations, including in Horsham, Warrington, and Warminster, has ignited a nationwide review of water on or around bases that used a firefighting foam containing toxic chemicals. In the Philadelphia suburbs, about 70,000 residents have contended with tainted water running from their taps.

My suggestion if you're feeling sick all the time, don't know what it is, or what is causing it, do your homework on the base(s) you served on and see what, if any chemicals were used, how they were disposed of, and if it falls in that list of 400.

For the past few weeks we've posted many legislative alerts, and to all those who have sent off the Pre-Written E-Mails we sincerely thank you and ask that you please keep it up, every single week.

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



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.

Report of Military-Veterans Advocacy Meeting with Secretary Shulkin

Military-Veterans
Advocacy Executive
Director CDR John B
Wells, USN (Retired)
and Deputy Chief of
Staff Susie Belanger,

met with VA Secretary David Shulkin, MD on Friday April 21, 2017. He was accompanied by John Rossie, Executive Director of the Blue Water Navy Vietnam Veterans Association, Mike Little Legislative Director of the Association of the U.



S. Navy, his assistant Kyle Derwist and Brian Condon from the Fleet Reserve Association. The subject of the meeting was appellate reform and the extension of the presumption of Agent Orange to Blue Water Navy veterans. Specifically there was a pending rule making request to include Da Nang and Nha Trang Harbors in the exposure presumption. The presence of the dioxin was confirmed in Nha Trang harbor 20 years of the end of the war. Significant evidence reveals probable pathways to Da Nang Harbor. Additionally, contaminated water from the Monkey Mountain reservoir was supplied to ships at anchor in Da Nang Harbor.

Discussion at the meeting centered around the hydrological effects of the river waters discharging into the harbor, rainwater wash off, currents and tidal action. The Secretary was briefed on direct exposure pathways via mailbags, equipment and personnel staged onshore but later brought aboard the ships. He was also made aware of the effects of helicopter and Carrier Onboard Delivery (COD) aircraft that landed in Da Nang prior to going to the ships. The lack of Navy surface ship experience among those within the VA assigned to this issue was also an important point raised in the meeting.

Deputy Chief of Staff Susie Belanger presented the Secretary with a folder containing 32 letters from Blue Water Navy veterans summarizing how they were affected by the VA policy.

Prior to engaging in the Blue Water Navy Discussion CDR Wells stated Military-Veterans Advocacy's opposition to the pending appellate "reform" legislation. The various bills (S 712, HR 457 and HR 611) pending would

strip the duty to assist for the veteran after the original agency decision and force the veteran to identify every factual or legal issue in the notice of disagreement. The statute does not allow for the notice of disagreement to be later amended or modified. Secretary Shulkin was presented options that would make the appeals system more efficient and increase fairness. This included electronic filing, implementation of pre-hearing conferences, scheduling orders with milestone dates and a smooth flow of communications. Military-Veterans Advocacy further recommended that the Board members be required to be certified as Administrative Law Judges and that they be sanctioned for an excessive remand rate. Currently 70% of the decisions appealed to the Court of Appeals for Veterans Claims are remanded.

The VA welcomed MVA and other representatives. Their protocol office made the delegation welcome and provided a courteous escort to the meeting. It started a little late, but the Secretary gave the group some additional time. The meeting was scheduled for one hour but the Secretary met for an hour and twenty minutes. He was animated, receptive and engaged throughout. He did not rush the meeting but listened until the delegation had completed its brief. Afterwards he was kind enough to pose for pictures.

Reflections of Commander Wells:

I have had these meetings before with VA officials. Former Chief of Staff John Gingrich, when presented with the Blue Water Navy brief said the policy did not “make sense.” Yet the VA doubled down and continued their exclusion policy. Former VA Deputy Secretary Sloan Gibson told me “We are leaning very closely to your views.” Again the VA continued their exclusion policy. Former Secretary MacDonald promised to review everything closely. Nothing happened.

This meeting was different. Secretary Shulkin actually took notes. None of the others did. He also admitted that there was much he had to learn on the topic but that he considered it important and he wanted to learn. Normally VA officials are too arrogant to admit that they do not have a complete understanding of the problem - even when they are clueless. He did not defend the VA testimony at the hearing on April 5 and appeared to be a bit embarrassed by it. He was very interested in the information provided. I might also add that this man strikes me as a “no nonsense” type. He is not

a glad handler or a politician. He seems committed to trying to change the culture at the VA. I hope that he is able to do so.

I cannot guarantee that the Secretary will do the right thing. I have felt good about previous meetings only to be disappointed. So I am only cautiously optimistic. But I certainly want to give Secretary Shulkin the opportunity to do the right thing. I did tell him that we were not going away.

I will be meeting with the Veterans Committee staffs next week and will report on that progress.

Please remember that our oral argument on the Blue Water case will be May 5th at the Court of Appeals for the Federal Circuit, 717 Madison Place NW, Washington DC. The court is located on the east side of Lafayette Park which is directly to the north of the White House. The hearing is open to the public and I would encourage anyone who can to attend.

Commander J. B. Wells U. S. Navy (Retired)
Attorney at Law
Executive Director
Military-Veterans Advocacy, Inc.



S. 319, Helping Veterans Exposed to Burn Pits Act

Senator Amy Klobuchar introduced S. 319, the Helping Veterans Exposed to Burn Pits Act. The bill would establish a Center of Excellence in preventing, diagnosing, mitigating, treating and rehabilitating conditions related to veterans' exposure to burn pits during Operations Enduring and Iraqi Freedom. DAV Resolution No. 237 supports improvement of care and benefits for veterans exposed to toxins and environmental hazards, including a rigorous research agenda to identify any associations between such exposures and adverse health outcomes.

VA's website states that exposure to toxins found in the burn pits may be associated with skin, eye, respiratory, cardiovascular, gastrointestinal, or internal organ problems. Exposure to burn pits is generally associated with short-term effects, such as eye irritation, acute respiratory symptoms, and skin itching or rashes. However, according to a 2011 Institute of Medicine report, fine dust particles and pollution in Iraq and Afghanistan may actually be more responsible for respiratory illness claimed by veterans who served there.

VA has established a registry for veterans who were exposed to burn pits. The Center would be charged with using data from the registry to study whether exposure is associated with long-term health effects in veterans who served in Iraq and Afghanistan in addition to improving diagnosis and treatments for those exposed. Veterans interested in registering should click here:

<https://veteran.mobilehealth.va.gov/AHBurnPitRegistry/#page/home>

Please write your elected officials to urge their co-sponsorship and support for passage of S. 319. Thank you for your continued efforts and participation in the Commander's Action Network.

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

**Free Legal Clinic for Veterans, May 6 in
Tomball**

Veterans who need legal advice or legal assistance can visit a free legal clinic on Saturday, May 6, from 9:00 a.m. until noon, at the Tomball VA Outpatient Clinic, 1200 W. Main Street, Tomball, TX 77375. The clinic is a public service of the Houston Bar Foundation's Veterans Legal Initiative, a coalition of local bar associations that provide pro bono legal services to U.S. veterans in 18 counties in Texas.

No appointment is necessary. Any veteran, or spouse of a deceased veteran, can receive advice and counsel from a volunteer attorney in any area of law, including family, wills and probate, consumer, real estate and tax law, as well as disability and veterans benefits. Veterans who need ongoing legal representation and who qualify for legal aid may be assigned a pro bono attorney to handle their case.

For more information on the May 6th clinic and other services for veterans, contact the Veterans Legal Initiative at 713-759-1133 or visit www.hba.org.



**VA Stops Dropping Family Caregivers Amid
Program Review**

Veterans Affairs officials have temporarily halted dropping caregivers from a program designed to compensate family members who provide primary care to severely injured troops. Designed by Congress to pay caregivers to keep post-9/11 veterans out of long-term treatment facilities, the Program of Comprehensive Assistance for Family Caregivers gives eligible participants a monthly stipend — some participants receive \$2,500 — depending on the veteran's needs and location. Critics of the caregiver program, as it's popularly known, say decisions on who to keep, who to drop and who to accept are inconsistent, at best. For more details, see this [article](#).



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!](#)

Trump Signs Bill to Extend Veterans Choice Program

President Donald Trump extended the Veterans Choice Act on Wednesday to set the stage for a [push in Congress to expand the program](#) and allow more access to private care for veterans. Flanked by veterans at an Oval Office ceremony, the president signed the bill to extend the Choice program, which was to expire on Aug. 7, and allow the expenditure of the remaining \$950 million in the program. For more details, see this [article](#).



S. 609, Chiropractic Care Available to All Veterans Act of 2017

Senator Jerry Moran (KS) introduced S. 609, the Chiropractic Care Available to All Veterans Act of 2017, which would require VA to offer chiropractic care at a minimum of 75 VA medical centers by the end of 2018 and at every VA medical center by the end of 2020. VA currently offers chiropractic services as part of its medical benefits package. However, VA's website indicates that only about 65 VA medical centers have chiropractors on site who are integrated into primary care, rehabilitation and other specialized care teams.

DAV Resolution 244 supports access to a "full continuum of care, from preventive through hospice services, including alternative and complementary care such as yoga, massage, acupuncture, chiropractic and other nontraditional therapies."

Please write your Representative today to urge co-sponsorship and enactment of S. 609. As always, thank you for your advocacy in participating in the Commander's Action Network.

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

VA to Review National Caregiver Support Program

The Department of Veterans Affairs (VA) has announced that it has suspended revocations initiated by VA medical centers based on eligibility for the Program of Comprehensive Assistance for Family Caregivers (PCAFC). VA Medical Centers will continue accepting PCAFC applications, approving applicants based upon current eligibility criteria, processing appeals and monitoring eligible Veterans' well-being at least every 90 days, unless otherwise clinically indicated. To learn more about the VA Caregiver Support Program, visit the Caregiver [website](#) or call the Caregiver Support Line at 855-260-3274.

Military Pay Mistakes: Have A Plan

While military pay is pretty simple, there are many situations that result in changes, and sometimes those changes can mess things up. Military pay mistakes are going to happen. Your preparation, with savings and a plan of action, will determine whether a pay mistake is a minor inconvenience or a serious emergency. For more tips, see this [Paycheck Chronicles post](#).

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

AF Warrior CARE Event

The Air Force Wounded Warrior Program (AFW2) will host a combined Warrior CARE event and a Department of Defense Warrior Games team training camp April 24 to 28 at Eglin Air Force Base, Florida, for about 150 wounded, ill or injured service men and women from around the world. The CARE event will provide personalized service through caregiver support training, recovering Airman mentorship training, and employment and career readiness guidance along with music, art and comedy-based engagements that build resiliency. The Air Force Warrior Games team will train in wheelchair basketball, sitting volleyball, swimming, track and field, air pistol and rifle shooting, archery and cycling. For more information, visit the Air Force Wounded Warrior Program [website](#).



S. 681, the Deborah Sampson Act to Improve VA Services for Women Veterans

On March 21, the Ranking Member of the Senate Committee on Veterans Affairs, Senator Jon Tester, introduced S. 681, the Deborah Sampson Act. This comprehensive measure addresses gender disparities and would improve and expand programs and services for women veterans provided by the Department of Veterans Affairs (VA).

The bill would establish a pilot program for peer-to-peer counseling and authorizes group retreat counseling for women veterans recently separated from military service. It would expand the capabilities within the VA Women Veterans Call Center and extend the number of days, from seven to 14, VA can cover the cost of care for newborns of women veterans and authorize medically-necessary transportation for newborns.

The legislation aims to eliminate barriers to care by ensuring every VA

medical facility has at least one full-time or part-time women's health provider, as well as a Women Veterans Program Manager and a Women Veteran Program Ombudsman. Additional resources are authorized for mini-residency training in women's health for clinicians, and retrofitting VA facilities to enhance privacy, safety and improve the overall environment of care for women veterans.

S. 681 would provide support services for women veterans seeking legal assistance and authorizes additional grants for organizations supporting women veterans and their families. Finally, The Deborah Sampson Act would require data collection and reporting on all VA programs serving veterans, by gender and minority status, including a report on the availability of prosthetics for women veterans and would better coordinate outreach by centralizing all information for women veterans in one easily accessible place on VA's website.

DAV's 2014 report, *Women Veterans: The Long Journey Home* identified many of these gaps in VA programs for women and has long advocated for a more comprehensive provision of VA women's health services that appropriately recognizes and honors their service and sacrifice.

Please contact your elected representatives to urge co-sponsorship and passage of S. 681. A letter has been prepared for this purpose or you may write your own to express your personal views. Click the link below to log in and send your message:

As always, thank you for your support.

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

Allowance or Financial Abuse? The Fine Line for Military Spouses

We may joke about the commissary being crazy busy on payday, but the real reason for the long lines is no laughing matter: Some families are only able to shop for groceries on a payday. Many military families are in strained financial situations, especially if they married young and the spouse has never held a full-time job. Since the military is paid every two weeks, some couples take drastic measures to make the money last. For a checklist of questions you should ask yourself about your family's financial situation, and how you can avoid issues, see this [Spousebuzz post](#).

Navy to Launch Behavioral Health Poll

This month, 42,000 Sailors will have the opportunity to participate in the Navy's Behavioral Health Quick Poll (BHQP). The poll examines the amount of stress Sailors are experiencing, how Sailors react to stress, and Sailors' knowledge of available resources. Participation in the BHQP takes less than ten minutes. The poll consists of 17 multiple choice questions that are completed and submitted online. Participation is anonymous and responses cannot be traced back to an individual. Learn more about the Behavioral Health Quick Poll and get tips to help you and your family navigate stress by liking Navy Operational Stress Control on Facebook, following on [Twitter](#), and subscribing to the [NavyNavStress blog](#).



New TRICARE Dental Could Scare Off Docs

Responsibility to provide dental care coverage for TRICARE beneficiaries will shift May 1 from MetLife to United Concordia. The change in TRICARE Dental Program contractor will bring lower patient premiums and a modest expansion of covered services. However, United Concordia also will lower key reimbursements to dentists below what they have been paid, prompting some dentists to warn patients they won't be joining the new network. Read the full [article](#).



**Ensure All Veterans are Provided Timely
Access to Care**

The House Veterans Affairs Committee (HVAC) has approved the “Eliminating the Sunset Date of the Choice Act” (H.R. 369), legislation that eliminates the sunset (expiration date) on the VA Choice law. The bill now goes to the House floor for further consideration.

FRA supports this act because the Department of Veterans Affairs (VA) first priority must be to ensure that all Veterans currently waiting for treatment are provided timely access. This law gives Veterans who have waited more than 30 days for an appointment—or who live more than 40 miles from a VA medical facility—the choice to seek VA-funded care outside of the VA system.

Please use the [Action Center](#) to ask your U.S. Representative to support continuing the VA Choice program.

DeCA Case Lot Sales Begin

Commissary patrons stateside will be able to stock up on their favorite items at significant savings during the Defense Commissary Agency's spring Customer Appreciation Case Lot Sale event. Each stateside store hosts an individual two- or three-day case lot sale. The majority of sale dates occur in late April and throughout the month of May. Patrons are encouraged to check [case lot schedules](#) for the scheduled sale dates for their local commissary. Commissaries in Europe and the Pacific, while not officially participating, may have substitute events such as sidewalk sales.



**Thank You
For Your Service
Now Let Us Serve You!**

U.S. Government Accountability Office Reports

- 1) [F-35 Joint Strike Fighter: DOD Needs to Complete Developmental Testing Before Making Significant New Investments.](#)
- 2) [Federally Owned Vehicles: Agencies Should Improve Processes to Identify Underutilized Vehicles.](#)

One Way To Strategize Your Transferred GI Bill Benefits

If you have multiple children, and one set of GI Bill benefits, you've probably wondered about the best way use the GI Bill entitlements. There are many factors to consider: how many children you have in total, if one child is more or less likely to receive other financial assistance, the costs of the different schools, and whether there will be any change in your family's financial status during the college years, such as leaving the military. However, all other variables removed, there is one thing that remains consistent: your family will likely be more eligible for need-based aid during years that you have multiple children in college. Including that information in your overall college financing strategy can be very important — for more details, see this [Paycheck Chronicles post](#).

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

Online Tool Helps Assess VA Care

The Department of Veterans Affairs (VA) has launched a new Access and Quality Tool that provides veterans with an easy-to-use way of accessing patient wait time and quality of care data. The tool allows veterans to access the average times patients are waiting to be seen in their local area; how veterans describe their experiences scheduling appointments at specific VA facilities; and the timeliness of appointments for care needed right away. The Access and Quality Tool is available at the Access and Quality in VA Care [website](#). Watch the video at the VA [VAntage Point Blog](#) to learn how the tool can be used.

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 3,261,642 visitors as of Friday.

If you subscribe you will have full access to the entire website and best of

all it's FREE of charge! You just need a valid E-mail address so the system can send you a confirmation E-Mail. Once received, click on the link to be authorized automatically.

www.veterans-for-change.org

- Documents Library with over 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: 6,424)
- Polls
- Web Links, more than 3,545, Added 1 New Links (Updated: 04/06/17)

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

Jim.Davis@veterans-for-change.org

TRICARE Update: E-Mail the Doctor

Want to email your primary care manager (PCM) from a smartphone, tablet, laptop, or desktop computer? Sign up for TRICARE Online Patient Portal Secure Messaging at the new Patient Portal [website](#) or at [TRICARE Online's Patient Portal](#) or at a kiosk at the hospital or branch health clinic. When registering, be sure to add the patient's provider to the account. For technical help, call 866-RELAY-ME (866-735-2963). Use Secure Messaging to email the health care team for non-urgent questions, ask for lab results or a medication renewal. Patients generally get a response from their health care team within one business day.



<https://twitter.com/Veterans4Change>

VA Explores New Health Treatments

The Department of Veterans Affairs (VA) has announced the launch of the Center for Compassionate Innovation (CCI), which will explore emerging therapies. Also, VA is accepting proposals to fulfill CCI's mission of finding innovative approaches to health care, which may support those Veterans who are unsuccessful with conventional treatment. Proposals may be submitted through the [CCI website](#). CCI explores innovations in the health-care industry as well as innovative practices currently being piloted on a small scale within the Veterans Health Administration (VHA). CCI is primarily interested in innovations that address post-traumatic stress disorder, traumatic brain injury, chronic pain and suicidality but will consider other innovations.

[Links to Other Stories](#)

- 1) Nearly 400 military bases must be tested for drinking water contamination - and it will take years
- 2) The Veterans Treatment Court Improvement Act
- 3) VA Silent on Timeline for Veteran ID Cards

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



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

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

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Please remember these women who died during April while serving our country in or during war times!

3 Apr 1944: WAFS Evelyn Sharp, WW II

3 Apr 1998: USAF TSGT Shelly Kelly assigned to the T-43 (a modified Boeing 737) carrying

Secretary of Commerce Ron Brown that crashed. She survived the crash, found

several hours later, placed on a helicopter and evacuated to the hospital, but

strangely, was dead on arrival of a broken neck, CROATIA

3 Apr 1998: USAF TSGT Cheryl Turnage, Steward assigned to the T-43 (a modified Boeing 737)

carrying Secretary of Commerce Ron Brown that crashed, CROATIA

3 Apr 2009: USN FN Amber L Winbourne, 23, onboard USS Theodore Roosevelt from sudden

cardiac while in the English Channel enroute to Portsmouth, England

4 Apr 1975: USAF CPT Mary Therese Klinker, 27, VIETNAM

4 Apr 2009: USA PFC Cassaundra N Beckel, 19, murdered by husband at Ft Bliss, TX

5 Apr 1991: USN AG1 (AW) Shirley Marie (Mellon) Cross, died in Oman, DESERT STORM

6 Apr 2005: USA SGM Barbaralien Banks, 41, AFGHANISTAN

6 Apr 2005: SCARNG SPC Chrystal Gaye Stout, 23, AFGHANISTAN

7 Apr 2004: USA SPC Tyanna S. (Avery) Felder, 22, IRAQ

7 Apr 2006: USA SPC Chauna Lynn Corethers-Turks, 30, dead in barracks Germany

8 Apr 2006: USMC L/CPL Juana Navarro Arellano, 24, non-combat gunshot, IRAQ

8 Apr 2007: USA PFC MarciAnna (Rivera) Bennington, 18, murdered by husband, Killeen, TX

8 Apr 2013: USAR PVT Michelle L Miller, 17, murdered in MD

9 Apr 2004: WIARNG SPC Michelle M. Witmer, 20, IRAQ

10 Apr 1944: USA WAC PVT Byrl Babock, murdered by husband, Des Moines, IA
10 Apr 1944: WASP Marie Ethel Sharon, WW II
11 Apr 1943: USA PFC Rita McCarthy, unknown causes, WWII
12 APR 2008: USA SPC Diana (Juarez) Mota, 30, murdered by husband, Killeen, TX
13 Apr 1945: USA ANC LT Christine A Gasvoda, medevac crash, WW II
14 Apr 1994: USAF 1LT Laura Piper, 25, her helicopter was shot down by a U.S. Air Force F-15 jet

in what the military later called “a tragic series of errors”, IRAQ

14 Apr 2012: USA PFC Kelli Bordeaux, 23, murdered, Ft Bragg, NC
15 Apr 1988: USN RM3 Angela S Santos, 21, USO Naples, Italy bombing
15 Apr 2005: USA SPC Aleina Ramirez-Gonzalez, 33, IRAQ
16 Apr 1944: WASP Jayne Elizabeth Erickson, WW II
16 Apr 1944: WASP Mary Holmes Howson, WW II
18 Apr 2002: USN SN Katrina Grady, assigned to the USS Port Royal, died at Bethesda, MD
18 Apr 2005: USA PFC Sam Williams Huff, 18, IRAQ
19 Apr 1995: USA SFC Lola Renee Bolden, 40, Murrah Building Bombing, OKC
19 Apr 1995: USAF A1C Lakesha R. Levy, 21, Murrah Building Bombing, OKC
19 Apr 1995: USAF A1C Cartney Jean McRaven, 19, Murrah Building Bombing, OKC
19 Apr 1995: USA MSG Victoria Lee Sohn, 36, Murrah Building Bombing, OKC
20 Apr 2008: USN NC Cherie Morton, 40, died in her quarters in Bahrain
22 April 2009: USA PFC Jaynie May Askew, 43, apparent suicide after failing combat medic training

test at Ft Sam Houston, TX

24 Apr 1944: USA ANC 2LT Thelma W Rounds, suicide, London
25 Apr 1944: WASP Edith “Edy” Clayton Keene, WW II
28 Apr 1945: USA ANC 2LT Margaret Billings, WW II
28 Apr 1945: USA ANC 2LT Frances Chelsey, WW II
28 Apr 1945: USA ANC Evelyn Eckert, WW II
28 Apr 1945: USA ANC 2LT Ida Greenwood, WW II
28 Apr 1945: USA ANC 1LT Florence Grewer, WW II

28 Apr 1945: USA ANC 2LT Dorothy Stanke, WW II

30 Apr 1991: USA PVT Candace Daniel, 20, accident in Kuwait, DESERT
STORM

Complementary and Alternative Medicine at VA Medical Centers

Like other Americans, veterans have grown increasingly interested in alternative treatment options to enhance wellness or address symptoms that are not well managed with conventional medicine. A 2014 study found that service members experienced chronic pain post combat at a much higher rate (44%) than the general population (26%). They were also far more likely to be prescribed opioids (15% v. 4%) to manage pain. Many veterans view complementary and alternative treatment approaches as a means to limiting or avoiding the use of opioids and other pharmaceuticals that may have adverse side effects.

Based on these findings, Representative Julia Brownley (CA) introduced two bills aimed at expanding veterans' access to complementary and alternative medicine (CAM) in VA medical centers. The first measure, the Expanding Care for Veterans Act, H.R. 102, would require VA to develop a plan for expanding delivery and integration of CAM in at least 15 VA medical centers and evaluate the effectiveness of these interventions for veterans with mental health issues, chronic pain and other debilitating conditions.

The Chiropractic Care Available to All Veterans Act of 2017 (H.R. 103) would require VA to offer chiropractic care at every VA medical center by the end of 2019. VA currently offers chiropractic services as part of its medical benefits package. However, only about 65 VA medical centers have chiropractors who are integrated into primary care, rehabilitation and other specialized care teams.

Please write your Representative today to urge co-sponsorship and enactment of H.R. 102 and H.R. 103. As always, thank you for your advocacy by participating in the Commander's Action Network.

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

VA's New Online Tool Helps Veterans Make Informed Health Care Decisions

Information from the Department of Veterans Affairs:

For many Veterans, deciding when, where and how to receive medical care is often one of the most complex and challenging decisions of the entire health care process. Health care performance, access or quality of care data, is very complicated - leaving many Veterans at a loss for the best course of action. To help, VA is launching a new [website](#) with an access and quality tool to help Veterans make more informed choices.

The new online tool allows Veterans, caregivers and the public to access the most transparent and easy-to-understand wait time and quality of care measures across the health care industry. That means Veterans can quickly and easily compare access and quality measures from their VA facility to other VA facilities, and make informed choices about where, when and how they receive their health care. Further, Veterans at some of VA's largest medical centers will now be able to compare the quality of VA care to local private-sector hospitals with more hospital comparisons being added soon.

This tool is designed with transparency in mind - taking highly complex data and making it easily available to Veterans and the public. It's just one way VA is working to restore Veterans' trust and confidence.

The online tool provides easy-to-use data related to:

- How long patients are waiting to be seen in their VA facility
- How Veterans describe their experiences scheduling primary and specialty care
- Timeliness of appointments for care needed right away
- Information about the quality of healthcare delivered at every medical center compared to local private sector hospitals

The new access and quality web tool is a work in progress and will continue to evolve as Veterans, VA employees, Veterans service organizations and others provide feedback to improve its tools and capabilities. VA's goal is to make this tool a Veteran-driven, Veteran-designed point of access for the services our Veterans deserve.

Source: TREA



Veterans-For-Change, Inc.

Riverside County, CA

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