

Veterans-For-Change Newsletter

A Voice of the Veterans

Week Ending Sunday, September 18, 2016 Volume 7, Issue 35

This-N-That

There are so many issues when it comes to the VA Healthcare System often it's hard to pick one to address.

The Top issues that always come to mind are Homeless Veterans, Wait Lists, Inappropriate or short comings when it comes to dealing with Women Veterans, MST, Improper medical procedures, procedures being done by unqualified and non-certified physicians. The list is endless.

One issue that haunts me all the time is how quickly the VA addressed Transsexual/Transgender Veterans.

What a person chooses or thinks they are in my eyes has no bearing on their service. Their service did not make them think and/or feel they were a man trapped in a woman's body or a woman trapped in a man's body.

This was not due to exposures to chemicals, burn pits, in fact has absolutely nothing to do with their service what-so-ever, yet they have been given what I see as "special privileges!"

And all the while we have Veterans waiting and dying because they can't get their claims approved, medical care provided, and maybe life saving treatments, but the VA can provide benefits, care and yes even gender re-assignment surgery. Does this make sense to you? It sure doesn't make sense to me!

Over the next few weeks I will be digging into this further to see if I can find costs involved, that in my opinion is being stolen from all other Veterans. And if by chance any of our readers have information, please send it to me.

Women Veterans, and some male Veterans as well have been victims of Military Sexual Assault, also known as Rape. And to this day they are all still being treated badly, and in some cases perpetrators never saw any legal action brought against them.

Victims of MST are being treated badly by VA Staff, not provided any privacy, not provided proper medical care, in fact in many case are forced to relive their abuse, but this time by VA Staff in how they are treated, or for many not treated.

There is a bill that has been presented that of course VA Employee's Union is against as it would remove their protections and make it far easier to terminate them.

The first time this type of bill was presented and passed by both houses, of course President Obama vetoed the bill claiming it was discriminatory. Well Congress put forth another bill and again Obama has vowed to veto that bill too.

One of the first steps in making the VA what it's meant to be, and provide the care needed by caring and compassionate medical staff is the ability to immediately remove those who are there merely to collect a paycheck and have no compassion, and could care less about you the Veteran.

So I am asking that everyone who reads this newsletter, regardless if you're a Veteran, family member or friend to Veterans, PLEASE, call the White House, flood their switchboard at 202-456-1111 and let them know WE THE PEOPLE are demanding this bill be signed into law when presented.

Next article down is regarding Blue Water Navy Veterans, please we need your help here too!

Read the article, and further down in this newsletter are telephone numbers you can use to call you Reps in DC and ask that they co-sponsor and vote YES on this bill. All Veterans are entitled to medical care and benefits, and Blue Water has been one of the black sheep of the family, and now we need to help them, so please call!

The Veterans-For-Change website has broken a new record, we've now had more than 3 Million people visit and use the site. Thank you! You're showing us we're doing something great!

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

Respectfully, Jim Davis Founder <u>Jim.Davis@Veterans-For-Change.org</u>

Congressional resolution would recognize Bluewater Navy veteran's under the Agent Orange Act

Today, at the request of Military-Veterans Advocacy, a concurrent resolution concerning the Blue Water Navy situation was introduced in the United States House of Representatives and the United States Senate. The resolution expresses the sense of the Congress that the original Agent Orange Act of 1991 included the bays, harbors and territorial seas of the Republic of Vietnam. It further calls upon the Secretary of Veterans Affairs to reverse his irrational and discriminatory policy that bars 90,000 sea service veterans from benefits for disabilities cased by Agent Orange. This policy enacted in 2002 has come under heavy criticism from lawmakers, veterans organizations and scientists who have studied the problem,

The resolution was introduced by Congresswoman Elise Stefanik of New York along with Congressman Chris Gibson of new York, Congressman David Valadao of California, Congressman Tim Walz of Minnesota, Congressman Kathleen Rice of New York and Congressman Mark Takano of California. Senator Chuck Grassley of Iowa, a co-sponsor sponsor of the Agent Orange Act, introduced the measure in the Senate along with Senators Kristen Gillibrand of New York and Senator Steve Daines of Montana.

While the measure, if passed, is non-binding, it will show Congressional support for the Blue Water Navy veterans and will hopefully convince the Secretary to conduct a proper review of the issue. To date, the Secretary has ignored hydrological studies showing that contaminated river water discharges into the bays harbors ad territorial seas, where it entered the shipboard potable water supply The VA also ignored documented evidence that self propelled water barges furnished contaminated drinking water to ships at anchor in several harbors of Vietnam.

Military-Veterans Advocacy has filed suit in federal court on behalf of the Blue Water Navy Vietnam Veterans Association and its membership, seeing to set aside the VA exclusion policy arbitrary and capricious. Additionally, a separate bill to require the inclusion of the bas a, harbors and territorial seas is pending in Congress with 336 supporters in the House and 46 in the Senate. The need to locate a new funding source have kept the matter in Committee

As this Congressional session draws to a close, the concurrent resolution is seen as the quickest way for Congress to show its support for the Blue Water Navy veterans. Military-Veterans Advocacy endorses these resolutions and invites all veterans to express their support to their Members of Congress and Senators.

Military-Veterans Advocacy is on <u>Facebook</u>. For more information or to make a donation please go to <u>www.militaryveteransadvocacy.org</u>

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

Lejeune Illnesses Considered for VA Compensation

The Department of Veterans Affairs (VA) has published proposed regulations to establish presumptions for the service connection of eight diseases affecting military members exposed to contaminants in the water supply at Camp Lejeune, N.C. The presumptive illnesses apply to active duty, reserve and National Guard members who served for no less than 30 days at Camp Lejeune between August 1, 1953 and December 31, 1987, and are diagnosed with the following conditions: adult leukemia, aplastic anemia and other myelodysplastic syndromes, bladder cancer, kidney cancer, liver cancer, multiple myeloma, non-Hodgkin's lymphoma, and Parkinson's disease. The 30-day public comment period on the proposed rule is open until Oct.10, 2016.



Signs of a Crisis

People experience emotional and mental health crises in response to a wide range of situations—from difficulties in their personal relationships to the loss of a job. For Veterans, these crises can be heightened by their experiences during military service. When emotional issues reach a crisis point, it's time to call on the Veterans Crisis Line for support.

Sometimes a crisis may involve thoughts of suicide. Learn to recognize these warning signs:

- Hopelessness, feeling like there's no way out
- Anxiety, agitation, sleeplessness, or mood swings
- Feeling like there is no reason to live
- Rage or anger
- Engaging in risky activities without thinking
- Increasing alcohol or drug abuse
- Withdrawing from family and friends

The following signs require immediate attention:

- Thinking about hurting or killing yourself
- Looking for ways to kill yourself
- Talking about death, dying, or suicide
- Self-destructive behavior such as drug abuse, weapons, etc.

If you are a Veteran or know a Veteran who is experiencing any of these signs, call the Veterans Crisis Line immediately. Responders are standing by to help.

You can also learn to identify and understand risk factors for suicide.

Identifying the Signs

Many Veterans may not show any signs of intent to harm themselves before doing so, but some actions can be a sign that a Veteran needs help. Veterans in crisis may show behaviors that indicate a risk of harming themselves.

Learn more about how you can identify additional signs of suicide risk.

VA CRISIS HOTLINE: 1-800-273-8255

Pence Asks VA to Reinstate GI Bill for ITT Vets

Indiana Governor Mike Pence is asking the VA to provide relief to veterans who attended ITT Technical Institute which shut its doors earlier this month. The now defunct private college had its headquarters in Carmel, IN, a suburb of Indianapolis. Pence, who is Republican Presidential candidate Donald Trump's running mate, sent VA Secretary Robert McDonald a letter Friday, asking the VA to reinstate the GI Bill benefits of veterans affected by the closure of ITT Tech. Nearly 7,000 veterans were attending ITT Tech or planned to do so during an upcoming term, according to a recent email from Terry Jemison, a spokesperson for the VA's Veterans Benefits Administration, which oversees the educational program. The total enrollment at ITT Tech's 130 locations spread across 38 states topped 40,000.

VA BEGINS NATIONWIDE STUDY ON THE HEALTH OF VIETNAM ERA VETERANS

The Department of Veterans Affairs (VA) launched the Vietnam Era Health Retrospective Observational Study (VE-HEROeS), a national study on the health and well-being of Vietnam Veterans, including Blue Water Navy Veterans, as well as Veterans who served elsewhere during the Vietnam Era (1961-1975), and similarly aged U.S. residents who never served in the military.

Beginning this fall, VA will invite approximately 43,000 Vietnam and Vietnam Era Veterans, and approximately 11,000 members of the general U.S. population to participate in VE-HEROeS. Researchers have scientifically selected a random sample of individuals for participation, and are not able to accept volunteers. VA encourages all those who are invited to fully participate in the study.

Because of the small sample size (which was limited because of budget), it is vital that every veteran who receives a survey do their best to fill it out completely and honestly and return it to the Survey Team. Because the Blue Water Navy segment is just a small subset of the overall veteran population, it is even more important that every Survey that goes out to a Blue Water Navy veteran be completed and returned; the higher the return rate, the better the picture of our current health status that can be drawn. This Study can show important 'indications and tendencies' for the health of each cohort, but this Study WILL NOT be a "groundbreaking study of Blue Water Navy health outcomes" as has been previously stated by the Compensation Division of the Veteran Benefits Administration. But even assessing the health trends and tendencies still depends on a high return rate to provide a higher probability for whatever data that can be gathered at this point in time. And every survey received will be one additional data point reporting the overall health for each group of Vietnam Era veterans.

All participants in VE-HEROeS will be asked to fill out a questionnaire on their military service, general health, age-related conditions, health care use, and the health experiences of their children and grandchildren. A smaller group will be invited to agree to a medical records review. Topics of special focus for the study include cognition, hepatitis C infection, and neurological conditions.

To learn more click HERE.

Source: Paul Sutton



AF Wounded Warrior Care Event

The Air Force Wounded Warrior Program, in coordination with the 55th Wing, Offutt Air Force Base, Nebraska, will host a Warrior CARE event Sept. 19-22. The CARE event provides seriously wounded, ill and injured military members, veterans and their caregivers focused and personalized service through caregiver support training, adaptive and rehabilitative sports events, recovering airman mentorship training, and employment and career readiness guidance, along with music and art therapy. For more information about the Air Force Wounded Warrior program, or to complete a CARE event application, go to the <u>AFW2 website</u>. Applications are available under the "event calendars" header. For more information about Air Force personnel programs, go to the <u>myPers website</u>.

VA Proposes List of Presumptive Conditions

The VA has published proposed regulations to establish presumptions for the service connection of eight diseases affecting military members exposed to contaminants in the water supply at Camp Lejeune, N.C.

The presumptive illnesses apply to active duty, reserve and National Guard members who served for no less than 30 days at Camp Lejeune between Aug. 1, 1953 and Dec. 31, 1987, and are diagnosed with the following conditions:

- adult leukemia
- aplastic anemia and other myelodysplastic syndromes
- bladder cancer
- kidney cancer
- liver cancer
- multiple myeloma
- non-Hodgkin's lymphoma
- Parkinson's disease

Environmental health experts on VA's Technical Workgroup conducted comprehensive reviews of scientific evidence, which included analysis and research done by the Department of Health and Human Service's Agency for Toxic Substances and Disease Registry (ATSDR), Environmental Protection Agency, the International Agency for Research on Cancer, the National Toxicology Program, and the National Academies of Science.

Military members with records of service showing no less than 30 days of service, either concurrent or cumulative, at Camp Lejeune during the contamination period can already be granted Veteran status for medical benefits, following passage of the Honoring America's Veterans and Caring for Camp Lejeune Families Act of 2012.

In the early 1980s, volatile organic compounds, trichloroethylene (TCE), a metal degreaser, and perchloroethylene, a dry cleaning agent (PCE), as well as benzene, and vinyl chloride were discovered in two on-base water supply systems at Camp Lejeune. These systems served the housing, administrative, and recreational facilities, as well as the base hospital. The contaminated wells supplying the water systems were shut down in February 1985.

VA acknowledges that current science establishes a link between exposure to certain chemicals found in the water supply at Camp Lejeune and later development of one of the proposed presumptive conditions. However, VA experts agree that there is no scientific underpinning to support a specific minimum exposure level for any of the conditions.

Therefore, VA welcomes comments on the 30-day minimum exposure requirement and will consider other practical alternatives when drafting the final rule. VA also notes that the proposed 30-day requirement serves to establish eligibility for service connection on a presumptive basis; nothing in this proposed regulation prohibits consideration of service connection on a non-presumptive basis.

The 30-day public comment period on the proposed rule is open until Oct.10, 2016.

Source: NAUS

House VA Committee Chair Editorial

In an expletive-laden rant delivered earlier this year, a belligerent American Federation of Government Employees President J. David Cox threatened Department of Veterans Affairs Secretary Bob McDonald with physical violence. Representative Jeff Miller says "the exchange perfectly encapsulates the corrosive influence government union bosses are having on efforts to reform a broken VA... The problem with VA leaders like McDonald is that, in their perpetual quest to placate big labor's powers that be, the taxpayers and veterans they are charged with serving are paying the price." <u>Read Rep. Miller's editorial on Military.com</u>.

Operation Mail Call



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, visit: http://veterans-for-change.org/5439-operation-mail-call-2

Government Accountability Reports

Air Force Training: Further Analysis and Planning Needed to Improve Effectiveness. http://www.gao.gov/products/GAO-16-864

Community Relations: DOD's Approach for Using Resources Reflects Sound Management Principles. <u>http://www.gao.gov/products/GAO-16-794</u>

Veterans' Health Care: Improved Oversight of Community Care Physicians' Credentials Needed. <u>http://www.gao.gov/products/GAO-16-795</u>

International Cash-Based Food Assistance: USAID Has Established Processes to Monitor Cash and Voucher Projects, but Data Limitations Impede Evaluation. http://www.gao.gov/products/GAO-16-819

Equal Employment Opportunity: Strengthening Oversight Could Improve Federal Contractor Nondiscrimination Compliance. <u>http://www.gao.gov/products/GAO-16-750</u>

Federal Disaster Assistance: Federal Departments and Agencies Obligated at Least \$277.6 Billion during Fiscal Years 2005 through 2014. <u>http://www.gao.gov/products/GAO-16-797</u>

Nuclear Weapons: DOD Assessed the Need for Each Leg of the Strategic Triad and Considered Other Reductions to Nuclear Forces. <u>http://www.gao.gov/products/GAO-16-740</u>

High-Containment Laboratories: Actions Needed to Mitigate Risk of Potential Exposure and Release of Dangerous Pathogens. <u>http://www.gao.gov/products/GAO-16-871T</u>

GAO Makes Appointments to PCORI Governing Board. http://www.gao.gov/press/pcori 2016sep.htm

Defense Health Care Reform: DOD Needs Further Analysis of the Size, Readiness, and Efficiency of the Medical Force. <u>http://www.gao.gov/products/GAO-16-820</u>

High-Containment Laboratories: Improved Oversight of Dangerous Pathogens Needed to Mitigate Risk. http://www.gao.gov/products/GAO-16-642

Federal Information Security: Actions Needed to Address Challenges. http://www.gao.gov/products/GAO-16-885T

Veterans Affairs Contracting: Improvements in Policies and Processes Could Yield Cost Savings and Efficiency. <u>http://www.gao.gov/products/GAO-16-867T</u>

Petition to Hold Corrupt Government Officials Accountable

No person should be above the law. Period. But powerful politicians like Hillary Clinton routinely escape the punishment for crimes despite all evidence leading to a trial and conviction, as prescribed by law.

But Clinton isn't the first, and she's certainly not the last. Here is a brief list of figures in the public eye who've committed crimes without consequence:

Hillary Clinton – Mishandled classified material, and then committed perjury to escape punishment regarding her involvement in the 2012 Benghazi attacks.

Barack Obama – By enforcing DAPA Obama illegally took away Congress' authority to regulate immigration, violating his duty to "take care that the laws be faithfully executed."

John Edwards – Embezzled \$1 million in campaign contributions to hide an extramarital affair.

Lois Lerner – Discriminated against conservative organizations applying for tax exempt status.

Despite these evident perversions of justice, low ranking public officials like Brian Nishimura and Kristian Saucier — names that may never get the attention of the media — are locked up for committing crimes that are petty in comparison.

If this perversion of justice continues, we could say goodbye to what little justice remains in our judicial system. That is why a push for a judicial system that holds government officials is so crucial to preserving our democracy.

Sign the **<u>petition</u>** to hold high ranking corrupt government officials accountable for their crimes.



Care Access for Rural Vets

In an effort to increase rural Veterans' access to care and services, VA's Office of Rural Health (ORH) launched a redesigned <u>website</u> with all new content. The website offers centralized information on rural Veterans, and the programs and services VA offers in coordination with strategic national partners. The mobile-friendly site features resource libraries and a news feed. Suggestions of additional content can be emailed to <u>ORHcomms@va.gov</u>.



TRICARE Doesn't Cover All Costs: Get Covered

Doctor and hospital bills are expensive even when you're covered by TRICARE. Help minimize or even eliminate out-of-pocket expenses with the **TRICARE Insurance Supplement Plan**.

Military Hospitals Start Drug Take-Back Program

Military families, troops and retirees now can return unused medication to pharmacies at military treatment facilities as part of a new drug take-back effort. In the past, prescription drugs could not be returned to those pharmacies, although some hospitals did run periodic take-back programs in partnership with other federal agencies, Defense Department officials said. The program, announced this month by the Defense Health Agency, requires pharmacies to have drug disposal bins or mail-in envelopes available to customers.

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

VA and Walgreens Team Up to Provide Flu Vaccinations to Veterans!

The cold and flu season is upon us and the Department of Veterans Affairs has once again teamed up with Walgreens Pharmacies nationwide to allow all veterans who are currently enrolled in the VA healthcare system to be able walk into any of the over 8000 Walgreens nationally (and the Duane Reade pharmacies in the New York metropolitan area) to receive a vaccination at no cost. Vaccinations will be available through March 31, 2017.

Veterans wishing to receive the no cost vaccination simply need to present a Veterans Identification Card and a photo ID, at any participating Walgreens to receive the vaccination.

In addition, after the Walgreens pharmacist administers the vaccine Walgreens will transmit that information securely to VA where it becomes part of the patient's electronic medical record.

VA is committed to keeping Veteran patients healthy, and during this flu season, vaccination is the best way to prevent the spread of flu. No matter where you live, visit your local VA clinic or Walgreens to get a free flu shot.

- To find your local VA, visit <u>www.va.gov/directory/guide/home.asp</u>.
- To locate a Walgreens store near you, call 800-WALGREENs (800-925-4733), or go to com/findastore.
- To learn more about the partnership, call 1-877-771-8537 or visit www.ehealth.va.gov/Immunization.asp.
- To get more information on flu and flu vaccine, visit publichealth.va.gov/flu or <u>www.cdc.gov/flu</u>.

Source: Doc Hill

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 1,400 per day with a total 3,000,597 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 15,616 documents on-line (Updated: 08/02/16)
- FAQ's with more than 1,600 FAQ's and answers (Updated: 02/20/16)
- Multiple Forums
- Job Postings (Updated: 09/15/16)

- Memorial Pages (Updated: 01/02/16)
- News (Articles On-Line: 6,008)
- Polls
- Web Links, more than 3,444, Added 1 New Links (Updated: 09/19/16)

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

Making the Most of the GI Bill

In many ways, veterans are just like other students: hard working, goal-oriented, optimistic and fun-loving. However, the research conducted by Student Veterans of America highlights that veterans are also very unique. They are older (80% are 25 or older), possess more real world experience, and are more likely to have families (60% report being or have been married) and dependents (almost 50% report being parents). Understanding these differences and how they impact your college experience is key to making the most of your benefits. For six tips to follow, see <u>this Military.com article</u>.



https://twitter.com/Veterans4Change

LGBT Dispute Called Major Snag for NDAA Authorizers

John M. Donnelly, **CQ Roll Call**

Partisan sparring over discrimination in federal contracting is one of two major sticking points holding up a fiscal 2017 defense authorization bill, said Rep. Adam Smith (D-WA), ranking minority member of the House Armed Services Committee

Smith said in a brief interview that the spat is over an amendment in the House-passed bill (HR 4909) by Oklahoma Republican Steve Russell.

Critics say Russell's provision would effectively overturn an executive order barring federal contractors from discriminating against people based on sexual orientation or gender identity. Russell, by comparison, has said his amendment, which the committee adopted before sending the bill to the House floor, is meant to protect religious liberty.

The thorniest dispute in the authorization conference, Smith says, is a disagreement on whether to require that a species of bird called the greater sage grouse be removed by law from the endangered species list on the grounds that protecting it is impairing the military from full use of training ranges in the Western United States.

It was disclosed last week that the conference had ground to a halt over the sage grouse debate. But, prior to Smith's comments Thursday, no member had previously disclosed that the discrimination dispute was a second big stumbling block in the conference.

Smith told an audience at the Stimson Center think tank on Thursday that the sage grouse issue is "the biggest problem remaining" in the conference and then said, "There is one other." Asked afterwards what the second issue is, he said: "The Russell language on the executive order on LGBT discrimination."

On the sage grouse issue, Smith suggested to his audience that the dispute was unnecessary, because the Environmental Protection Agency plans to remove the bird from the endangered list anyway.

"But promises have been made at a very high level in the Republican caucus, and I don't know how we get around that," he said.

The White House Office of Management and Budget, in a 17-page Statement of Administration Policy on the House bill, threatened to veto the conference report over a bevy of issues. But the May statement highlighted a handful of provisions as particularly concerning, including those on endangered species and discrimination.

Referring to the Russell amendment, the White House statement said: "The Administration strongly objects to section 1094, which would undermine important protections put in place by the President to ensure that Federal contractors and subcontractors do not engage in discriminatory employment practices."

Given that conference talks are not likely to conclude before the lame-duck session, there will be little time for Congress to send the president a second version of the bill, if he vetoes the first one over one of these issues.

Still, Smith is confident that lawmakers and the president will get the measure done before New Year's Day.

"We've done it in December before, and we'll do it in December again," Smith said. "Once the appropriators make their decision— whether it's a CR or some form of appropriations bill — and we get a (funding) number, it'll be a lot easier to get it done."

Source: NAUS

Links to Other Stories

- 1) An inquiry has found 'gross mismanagement' in a costly VA hospital
- 2) Caring for Veterans at Work and at Home
- 3) IG: Mystery VA Employee Goof Costs Taxpayers \$2 Million
- 4) Lawmakers formally request perjury probe over VA hospital
- 5) Loebsack pens suicide prevention bill for Veterans

- 6) Long Island Veterans Hospital is an Example of VA Failure
- 7) Minn. Lawmaker Asks VA to Address Problems with Veterans' Benefits System
- 8) Nurse Advice Line serves as important tool for suicide prevention
- 9) San Antonio Veteran helps fellow Veterans get VA benefits and find housing
- 10) Soldier overcomes physical, invisible wounds: From contemplating suicide to advocating others' wellness
- 11) VA Awards \$6.8 Billion for Medical Disability Examinations
- 12) VA not doing enough to stop suicides

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



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.

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

If you're an employer and have a job to post, send and E-Mail to: <u>Jim.Davis@veterans-for-change.org</u>

Military Divorce: Rules for Dividing the Pension

A service member's military retired pay can be a valuable asset in a divorce, legal separation or dissolution of marriage. In 1982 Congress passed the Uniformed Services Former Spouse Protection Act, which allows state courts to treat disposable retired pay either as property solely of the member, or as property of the member and his spouse in accordance with the laws of the state court. Contrary to popular belief, there is no "magic formula" contained in the act to determine the appropriate division of retired pay. A state court can divide retired pay in any way it chooses (subject to the laws of that state). All 50 states treat military pension as marital or community property.

U.S. Senator Johnny Isakson, R-Ga., chairman of the Senate Committee on Veterans' Affairs, recently called on the Department of Veterans Affairs (VA) to adopt health care best practices throughout the Veterans Health Administration to improve health care delivery to veterans and help the VA overcome the many problems it has faced since the department's wait-time scandal in 2014. Isakson noted at a committee hearing that best practices are crucial to ensuring consistency at VA health care facilities across the country. A video of the hearing is available on the U.S. Senate Committee on Veterans Affairs website. Read excerpts of Senator Isakson's statements on the U.S. Senate Committee on Veterans Affairs website.

TRICARE and Assisted Living

Skilled nursing care is covered by TRICARE in the U.S. and U.S. Territories within skilled nursing facilities (SNF) if you have a hospital stay of three or more days. Skilled nursing facility care is different from nursing home care, which is not covered by TRICARE. TRICARE covers durable medical equipment (DME) when prescribed by a physician to increase your quality of life. If you can stay home, but still need assistance, you may decide home health care is best for you. Coverage is the same as Medicare for these services. TRICARE and Medicare do not cover assisted living facilities or long term care, which is needed if you can no longer perform everyday tasks by yourself. Information about the Federal Long Term Care insurance program is available <u>here</u>.

Women Veterans and Their Stories

Capturing and sharing the tales of women who have served our nation ensures that they are not erased from history. The <u>Veterans History Project</u> at the Library of Congress, where women's stories are also underrepresented, offers a wonderful opportunity for us to partner to tackle this problem. Women Veterans and their supporters can learn how to <u>participate</u> and contribute an oral history and/or other items for their collection. Anyone interested in hearing our stories — students, scholars, family members, history buffs, advocates and more — can <u>search the archives</u> or browse through the project's <u>Experiencing War</u> web features, which include themed collections of digitized stories, such as <u>Women at War</u>, <u>Women of Four</u> <u>Wars</u> and <u>WASP: First in Flight</u>.



September is Suicide Prevention Month. Navy Installations Command provides programs that can help Navy personnel in their struggles with suicidal thoughts or actions. The programs available include Applied Suicide Intervention Skills Training (ASIST) and Suicide Alertness for Everyone: Tell Ask Listen and Keep Safe (SafeTALK) which is run by the NIC force chaplain's office. ASIST is a two-day suicide prevention training which focuses on the quality of the intervention and in moving someone at risk towards safety. SafeTALK is part of the ASIST program and is a three-hour training that teaches participants to recognize and engage persons who might be having thoughts of suicide and to connect them with community resources trained in suicide intervention. For more information, read the Navy LIVE Blog and visit the Navy Personnel Command website.

~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.

https://gem.godaddy.com/signups/193302/join

Vets Can Get Hearing and Eye Care Without Referral

Veterans receiving care at Department of Veterans Affairs' (VA) Medical Centers will now be able to schedule routine ear and eye appointments at local VA Audiology and Optometry clinics without a primary care referral, a move that gets veterans into appointments quicker. Before now, Veterans seeking appointments with audiologists or optometrists had to first make an appointment with a primary care physician for a referral for a routine clinic consult visit. A clinic representative would contact the patient to set up the consult appointment, which could result in a several weeks'-long lag between the appointment and when the Veteran was actually seen. The new process, the Audiology and Optometry Direct Scheduling Initiative, is expected to be fully operational within all VA Medical Centers by the end of 2016.

Pair Walk for Veterans

Kevin Kinkead, an Army veteran of Afghanistan, and Daniel Taylor, a former Navy sailor, are walking across the country to raise awareness about the issues veterans face. The pair will circle the 48 continental states and end in Kinkead's hometown in Nebraska. The pair is raising money for personal expenses, food, water, lodging, etc. At the end of the walk everything left over will be donated to veterans' charities, primarily Operation Second Chance. For more information, <u>watch the video</u> and follow their journey on <u>Facebook</u>.

VA Awards \$7.8M in Adaptive Sports Grants

The Department of Veterans Affairs (VA) has announced the awarding of up to \$7.8 million in grants for adaptive sports programs for disabled veterans and disabled servicemembers of the Armed Forces. The grant recipients may use these funds for planning, developing, managing and implementing these adaptive sports

programs. The grants will support activities ranging from rowing, cycling, skiing, equestrian sports and Tai Chi. Information about the awardees and details of the program are available on the VA Adaptive Sports Program <u>website</u>.

Rescue 22 Aids Warriors with PTSD

Rescue 22 is a nonprofit organization whose mission is to encourage our veterans suffering the battle of PTSD to seek help through physical health and wellness programs. The organization seeks to be a mentor and provide encouragement in a veteran's journey of rehabilitation and to empower family members who struggle with the unknown wounds of their veterans by providing guidance. Rescue 22 is dedicated to eliminate the statistics of 22 or more veterans who commit suicide each day. The staff is committed to ensure those who reach out are heard and guided to the help they need. For more information, visit the Rescue 22 <u>website</u> and follow Rescue 22 on <u>Facebook</u>.

COLA Prospects

There is a decent chance federal, military and Social Security retirees will see a 2017 cost-of-living adjustment, based on the <u>latest data released on Friday</u>.

The Bureau of Labor Statistics announced the Consumer Price Index for August on Sept. 16, which includes data critical to the COLA calculation. The annual COLA for all retirees is based on the Consumer Price Index for Urban Wage Earners and Clerical Workers (CPI-W), which measures price changes in food, housing, gas and other goods and services. The CPI-W rose 0.1 percent in August, and the index has increased 0.7 percent over the last 12 months to an index level of 234.909.

Why does that matter? Because it's slightly more than the average for the third quarter of 2014 (234.242), which is an important component in the COLA equation. The July, August and September 2016 CPI-W numbers could bring up that current 234.909 average more, but it's too soon to tell. In July, the index level for the last 12 months was at 234.789, so there was a tiny increase over the last two months.

The exact cost-of-living adjustment for next year won't be known until October 18 when BLS releases the September CPI-W number, the final data point in the equation.

Still it's not clear yet if retirees will receive a modest boost, or <u>nothing</u>, as was the case for 2016. But things look better now than they did at the same time last year.

Source: NAUS



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Los Angeles	132,588
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Other Social Media	32,215
San Francisco	76,304
Twitter	34
US House of Reps & Staff	829
US Senators & Staff	99
University of So. California	4,604
US Air Force	13,546
US Army	39,807
US Marines	23,241
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