

114th CONGRESS



**VIETNAM VETERANS OF AMERICA
LEGISLATIVE AGENDA & POLICY INITIATIVES**



The willingness with which our young people are likely to serve in any war, no matter how justified, shall be directly proportional as to how they perceive the veterans of earlier wars were treated and appreciated by their nation.

— GEORGE WASHINGTON, 1789

Contents

Top Priorities	2
PTSD and Substance Abuse	9
Veterans Health Care	9
Minority Veterans	10
Agent Orange/Dioxin and Other Toxic Substances	10
Women Veterans	11
Homeless Veterans	11
Incarcerated Veterans	12
Compensation/Pension	12
Economic Opportunity	12
The New Generation of Veterans	13
Veterans Health Council	13



Vietnam Veterans of America

8719 Colesville Road, Suite 100 • Silver Spring, MD 20910 • Telephone (301) 585-4000

Faxes: Main (301) 585-0519 • Advocacy (301) 585-3180 • Communications (301) 585-5245

Finance (301) 585-5542 • Veterans Benefits (301) 585-2614

A Not-For-Profit Veterans Service Organization Chartered by the United States Congress

January 2015

The year 2014 was not a banner one for the Department of Veterans Affairs. On the heels of some relatively minor situations that drew media attention and political fire, the first Really Big scandal engulfed the department and claimed General Eric K. Shinseki, a thoroughly decent and forward-thinking leader, then in his sixth year as VA Secretary.

Could this scandal have been avoided? We believe so, considering that VVA and other VSOs had known for years that there were major problems in the scheduling and wait times for appointments with primary-care clinicians and specialists at VA medical centers and community-based outpatient clinics. When the chairman of the House Veterans' Affairs Committee seized on this after damning charges by whistleblowers from the Phoenix VAMC, the floodgates opened and scandals poured in from around the country.

It was revealed that the practice of keeping two sets of schedules – essentially to fool the powers that be at the VA Central Office in the Nation's Capital – was common practice across the healthcare system. Deniability was not an option for these senior officials. We had informed them of this on several occasions and they remained mute. That the VA's public information staff did not give their leader good advice was itself scandalous; the VA's lack of transparency in acknowledging the long-standing problem and placing it to the top of the list of issues that demanded action, not silence, only compounded the situation.

We believe there are lessons to be learned from this fiasco. First, the underlying problem is basic: too many VAMCs have a critical shortage of competent clinicians and nurses, despite record increases in the VA's budget requested by the President and granted by Congress, funds which often went to increase bloated bureaucracies. This misuse of resources requires real oversight by Congress. Second, the VA's brain trust must live up to the President's nod toward real transparency and send competent staffers who are high enough up on the food chain to answer questions from Congress rather than avoid them. And third, although the vast majority of VA employees from bottom to top care about the veterans they serve, VA leadership has a very real obligation to crack the whip on those who fabricate their own reality, who lie to veterans, who lie to their superiors, and who lie to Members of Congress.

VVA will continue to fight to get the VA the resources it needs to do right by the veterans it serves. And we will continue to monitor, and criticize when necessary, this vitally needed institution when it doesn't stay true to President Lincoln's promise: *To care for him who shall have borne the battle, and for his widow, and his orphan.*

John Rowan
National President

TOP PRIORITIES:

Gaining the Fullest Possible Accounting; Addressing the Legacy of Toxic Exposures; Fixing the VA; & Organizational Reform of the VA

The Fullest Possible Accounting of America's POW/MIAs has long been VVA's top priority.

At the end of “our” war, May 7, 1975, the Department of Defense listed 2,636 Americans as missing in Southeast Asia; by the beginning of January 2015, the remains of more than 1,000 had been repatriated, leaving more than 1,600 “unaccounted for.” VVA’s Veterans Initiative, which reaches out to our former enemies in Vietnam—Vietnamese veterans—has encouraged continued cooperation with Department of Defense search teams.

VVA will continue to press for answers regarding Americans listed as killed in action, body not recovered, in Laos and Cambodia, and those who went missing in the skies over Vietnam and in the waters of the Gulf of Tonkin and the South China Sea. The Secretary of Defense has ordered a consolidation and reorganization to maximize resources of what, until now, was at least two organizations into a single, productive entity. VVA looks forward to working with the new unified command the Defense POW/MIA Accounting Agency (DPAA).

The POW/MIA flag has become a universal symbol for troops taken prisoner in all wars in which Americans were deployed into harm’s way. Although Section 1082 of the 1998 Defense Authorization Act requires that the flag fly on certain government buildings and installations six days each year—Armed Forces Day, Memorial Day, Flag Day, Independence Day, National POW/MIA Recognition Day, and Veterans Day—and VVA members have been instrumental in enacting legislation that provides for the flag to be displayed at state, county, and municipal buildings, as well as other facilities, VVA urges continued efforts to display this symbol of American service and sacrifice

from every war in which we have taken up arms in defense of the freedoms we hold dear.

VVA also will press the appropriate authorities to authorize a new POW/MIA “Forever Stamp.” Such a stamp would add awareness about an issue that resonates in the community of veterans.

In addition to the **Fullest Possible Accounting** of the missing and killed in Southeast Asia and from all of our conflicts, VVA has identified three achievable **Top Priorities: 1. Addressing the Legacy of Toxic Exposures**, not limited to Agent Orange and other defoliants employed in South Vietnam; **2. Fixing the VA**, so shaken by the predictable waiting list scandal of 2014 that perhaps some real and lasting change will evolve; and as a critical element in the **3. Organizational Reform of the VA, the Creation of a Veterans Economic Opportunities Administration.**

These can be accomplished if there is the political and/or managerial will. They are achievable if we can marshal our military and veterans communities to work in concert to convince Members of Congress that these are of great importance, not only for Vietnam veterans and our families and survivors, but for families and survivors of veterans from all of our foreign wars. There may other structural changes that will help VA get on track to do their job in a consistently correct and effective manner.

Make no mistake: Vietnam veterans still have unmet needs. We refuse to be passed by and dismissed or forgotten. Enactment of our **Top Priorities**, especially **Addressing the Legacy of Toxic Exposures** and **Fixing the VA**, can go a long way towards ameliorating some of these needs—not just for Vietnam veterans but for veterans of all eras.

Addressing the Legacy of Toxic Exposures

When we reference “toxic exposures,” we are addressing much more than the defoliants sprayed so liberally in the former South Vietnam. These include the intense plume from the explosion in 1990 of the ammunition dump at Khamisiyah during the Persian Gulf War; the effects on those who worked in and lived near the burn pits that were a part of the landscape during Operation Enduring Freedom in Afghanistan and Operations Iraqi Freedom and New Dawn in Iraq; and a litany of exposures to toxic materials at bases throughout CONUS.

As our understanding of the effects of exposures increases, we strongly urge the Department of Defense to anticipate these as part of the true cost of war—and the lifelong, intergenerational legacies they may generate.

All materials documenting this must be declassified, despite any embarrassment to the DoD, the VA, or other entities. Declassification of such documents will not violate “national security.” Many are classified to shroud the failures and extreme or unnecessary actions and policies which have hurt the troops in the trenches. This restricted access to documents continues to harm them when they file a claim for disability compensation. This is particularly true in the realm of toxic exposures.

Not all wounds of war are immediately obvious. Symptoms of debilitating diseases can present a decade or more after exposure and a troop’s separation from service. By “long-term effects,” we refer not only to veterans but to their progeny a generation or more into the future. There has been a paucity of research in this area. You would think—you would hope—that the VA, with its multi-million dollar research budget, would initiate at least some studies on such exposures. You would be wrong.

To help right this wrong, VVA developed a bill which, with acceptable modifications, was introduced in both the Senate and House of Representatives during the 113th Congress. We will again work with Congress and get a version of the **Toxic Exposure Research Act of 2015**. We will seek co-sponsors from both sides of the aisle for this legislation.

When these bills are introduced, we will reach out to our members, to other veterans service organizations, and to environmental support groups to press for adoption of this legislation.

Extending the Relationship with the IOM

As mandated by the Agent Orange Act of 1991, the Institute of Medicine (IOM) of the National Academy of Sciences has been producing biennial editions of *Veterans and Agent Orange*. Unless Congress renews its mandate to the VA to continue its relationship with the IOM to empanel experts every two years to review the scientific literature and conduct hearings across the country, there will be only one final *Veterans and Agent Orange* Update.

Although the Update does not make recommendations, its findings of degrees of association are crucial in helping the VA evaluate research regarding health conditions to determine if these should be considered presumptive for a service-connected disability rating. Congress must pass legislation to continue the Update by IOM and enhance this legislation to review other possible toxic wounds of all cohorts of veterans who have been exposed to toxic substances. All generations of veterans and their families need enactment of the **Toxic Wounds Act of 2015**.

Fixing the VA

We are dealing with veterans, not procedures; with their problems, not ours.

— GENERAL OMAR N. BRADLEY, ADMINISTRATOR OF VETERANS AFFAIRS, 1946

Oversight and Accountability

The formula for estimating how much money will be needed in future years by the VA health-care system has been wrong since it was first implemented in 2003. It is a civilian formula that did not take into account that veterans have more things wrong with them as they age; it did not account for future wars; it did not account for the greater medical needs of the average VA patient vs. private HMOs; and it did not account for dramatically increased enrollment. Even with the large increases in the medical budget for FY 07 through FY 11, the Veterans Health Administration simply does not have enough physicians and other clinicians to properly meet the needs of our nation's veterans.

It is clear that the VA needs at least 22,000 more physicians and other clinicians. We need significantly more registered nurses on the wards, as well as practical nurses and other allied healthcare staff members. We need further funds for improving and modernizing the physical plants for VA medical centers, as well as a significant increase in funding for IT and automation systems and hardware.

VVA has been pushing for a much greater degree of accountability for more than 15 years. We need a much greater “bang for the taxpayers’ buck” at VA. And we also need a greater level of funding to meet the current and future needs of our veterans.

Funding is important, but it is only half the issue in shrinking the remaining backlog of claims and moving the appeals encountered by the long-abused troops in an overburdened Veterans

Benefits Administration. We will continue to work with the VBA to introduce and integrate IT pilot projects that have shown exceptional promise in streamlining the operations of the compensation and pension system, which includes the bloat of claims before the Board of Veterans Appeals. There must also be competency-based testing of service representatives as well as VA adjudicators and the still-evolving array of necessary reforms.

Because VA “challenge training” for new raters has shown promising gains in efficiency and quality, the VA needs to deploy this model to all staff. This should ensure that all are up to date on current rules and initiatives. Also, although the “lane” model has shown efficiency gains, it has yet to be deployed for all claims. Why not? This model needs to be expanded to include non-rating claims, such as adding and removing dependents, to reduce the scandalous number of overpayment cases.

VVA does believe that part of the answer will be automation, and we favor this and other measures that will enhance the effectiveness of the compensation system in reaching a complete and accurate answer to a veteran's claim. However, we will fight against measures that hurt the veteran, no matter how much it speeds up the system. Questionable initiatives such as the “Fully Developed Appeals” process, which features a form that will abridge the rights of veterans, will be fought by VVA with all means at our disposal.

For reforms to truly succeed, far better oversight must be a priority of and by managers who are handsomely paid to administer the claims system. Management audits and assessments

must be a component of annual performance reviews. There must also be continued, focused, and hard-hitting oversight by the Veterans' Affairs Committees in both the House and Senate, as well as in the Budget and Appropriations Committees. Despite the progress over the past few years, the greatest challenge for the new Secretary and his Under Secretary for Benefits is to upend an entrenched corporate culture long resistant to change.

On a parallel track, there needs to be real accountability in the management of the Veterans Health Administration. With Advance Appropriations now law for all VA accounts, there can be no excuses why a VA medical center fails to hire the staff it needs as it enters a new fiscal year, or why it can't purchase a new MRI machine that its radiologists insist they must have, or why it can't pursue minor yet necessary construction projects.

VVA maintains that measures for ensuring accountability must be essential elements in funding the VA. Key to achieving this is to significantly overhaul the system of bonuses for Senior Executive Staff. Bonuses should reward only those who have performed stellar work over and above their normal responsibilities, and those who innovate and improve the systems and projects under their auspices. Bonuses should be withheld from those who just do their job. Those who perform poorly need to be removed or reassigned, and any manager or supervisor who gets caught lying to a veteran, to their supervisor, or to a Member of Congress ought to be dismissed. Bonuses should be given with this caveat: If you accept the bonus, you agree to stay with the VA for a given period of time.

Outreach

There are some twenty-one-and-a-half million veterans in the United States, of which almost two-thirds never interact with the VA. Most are ignorant of the array of benefits which they have earned by virtue of their military service. Even the one-third of vets who do interact with the VA's healthcare system and/or its benefits administration are not familiar with much of what is available to them, to their families, and to their survivors.

VA has historically done a poor job at best in reaching out to those who have worn the uniform. That attitude has now changed a great deal, but there is still much to do to make up for the years of inaction on outreach. And even if a veteran goes to a VA medical center or community-based outpatient clinic to be treated for a combat-related wound or injury, often the veteran will not be given information concerning health risks based on time and place of service or information on how to apply for disability compensation benefits through the Veterans Benefits Administration, whose computer system does not sync with that of the Veterans Health Administration.

The VA has an ethical obligation and a legal responsibility to inform all veterans and their families of the benefits to which they are entitled and information about any potential long-term health problems they may experience that might derive from when and where they served.

Only recently has the VA begun to take seriously its responsibility for outreach. Benefits handbooks are being customized for every veteran. Paid advertising is being placed in select markets to reach targeted populations of veterans, and social media is being used to reach our younger veterans. The VA is attempting, at

long last, to get out helpful messages, e.g., “If you served, you deserve.” However, we have yet to see a unified strategic communications plan that integrates TV, radio, and print ads, billboards, feature stories, and electronic media. Used strategically, these can have an effective impact on informing veterans and their families about issues and benefits as well as reassuring the community of veterans that the VA really is living up to its founding principle, taken from Lincoln: “To care for him who shall have borne the battle, and for his widow, and his orphan.”

Extending the Caregivers Act

VVA supported legislation to assist family caregivers of catastrophically wounded or injured warriors after 9/11. Thanks to the bravery and the tenacity of our medevac crews and military medical personnel at evacuation hospitals, catastrophically wounded warriors, who would surely have died in Vietnam, are being saved. Heart-rending testimony before congressional committees by surviving veterans, and by their wives and mothers, moved Congress to pass the Caregivers and Veterans Omnibus Health Services Act of 2010 to assist family caregivers of catastrophically wounded or injured warriors after 9/11.

There was a caveat in this legislation: The VA Secretary was to report to Congress on how the caregiver program has been working, and what, in his judgment, might be the efficacy of extending the program to family caregivers of veterans of Vietnam, Africa, and the Persian Gulf War. That report was two years late. Needless to say, these caregivers did not receive some of the benefits of this legislation. Why not? Because of the Budget Deficit. How many caregivers of Vietnam veterans will potentially be eligible to become part of the caregivers program? We don't

know. But we will seek a champion in Congress to step to the plate to correct what is very clearly a gross inequity.

Cleaning Up the CVE

The VA's Center for Veterans' Entrepreneurship is charged with certifying that a small-business owner who claims to be a veteran, or a disabled veteran, is what s/he claims and is therefore eligible to bid on government contracts. The operation of the CVE has been characterized as a “mess.” Because it has been so inconsistent, it has caused thousands of veteran and service-disabled veteran small-business owners to be deprived of millions of dollars in contracting opportunities, after having been given a bureaucratic runaround and then told (inaccurately) that they are not, in fact, a legitimate veteran- or disabled veteran-owned entity.

The ostensible purpose of the verification is to weed out crooks. However, CVE has yet to catch a crook. VVA seeks a verification process that is reasonable but not intrusive. We value the integrity of this program. We want to ensure that no “wannabe” crooks get verified at the expense of real disabled veterans. If there are crooks already in the program, they need to be identified, apprehended, prosecuted, and, if found guilty, fined; and if a judge determines justice demands, sentenced to time in prison. As it stands, crooks are not being caught and legitimate veteran-owned businesses are being destroyed.

Clearing Up the 'Backlog'

The Veterans Benefits Administration has made significant progress in shrinking the backlog of claims. Still, its leaders need to do more. They must move forward with force and focus. The VBA has implemented its enhanced “lane”

system at its 58 Regional Offices. What is lacking, however, is a segmented lane system put into place at the Pension Management Centers to allow for immediate adjudication of DIC claims that do not require development.

Fix the Work Credit System

The manner in which VBA managers “grade” their raters must be reexamined. The current work-credit system puts a premium on volume and speed, at the cost of doing it right the first time. This has resulted in an unacceptably high number of appeals due to adjudication mistakes resulting from shortcuts and the gaming of the work-credit system. There should be no work credit granted a VA employee for denying a claim without first getting the evidence needed to comply with the duty to assist; this will reduce the number of denials and therefore the number of appeals in the system.

VBA needs to include a quality component in the work-credit system, and track for each rate the number of rating decisions that are successfully appealed. Raters who have a high rate of decisions overturned on appeal need to be retrained, reassigned, or terminated. VBA needs a revised standard for adjudication of claims that does not credit employees for speed and volume but rather on the efficacy and accuracy of the results of their adjudication.

Improve Training

The era of “one size fits all” training must end. Although VBA has made good progress in improving its training for new rating staff, it ought to continue to use and expand quality reviews in the field to identify and track training needs so that rating mistakes can be used to create customized training for each employee. Training should be mandatory for all VBA

employees and managers involved in the benefits side of the administration.

Continue VSO Access to Raters and Coaches

VBA is developing a new workflow system, the “National Work Queue,” to help even the workload across its 58 Regional Offices (ROs). The NWQ will electronically distribute claims to ROs across the country. However, if VBA fails to provide sufficient functionality for Veteran Service Officers (VSOs) to electronically dispute bad rating decisions, and if VSO access to raters and coaches is restricted or removed, the NWQ will result in more appeals. VBA also needs to implement office hours at each Regional Office so that VSOs will have daily access to meet informally with raters and coaches to voice their concerns and resolve their differences with problematic rating decisions.

Expand and Protect DROs

VBA must expand its Decision Review Officer (DRO) program. VSOs meet with success when resolving appeals at the DRO level. Unfortunately, too many DRO personnel are reassigned by Regional Office management to non-appeal functions. The Regional Offices need to be sufficiently staffed with DROs to handle the size of their appeals backlog, and the DROs need to be fenced off from the rest of the RO to prevent them from being reassigned to non-DRO functions.

Organizational Reform

The Department of Veterans Affairs must renew and embrace a corporate culture that measures its vocational rehabilitation and educational programs and initiatives to determine how much they contribute to the ability of veterans to obtain and sustain gainful employment at a living wage.

The VA moved in the right direction by creating the Office of Economic Opportunity. This administrative change, we believe, does not go far enough. Hence, we shall advocate for the creation, by an act of Congress, of a fourth entity within the VA: a Veterans Economic Opportunities Administration, to be headed by an under secretary nominated by the President and confirmed by the Senate. This VEOA would consolidate within the VA various separate yet interrelated programs whose mission, in essence, is to enable veterans achieve to their American Dream.

The VEOA would consolidate the Vocational Rehabilitation Service, the Veterans Education Service, and an enhanced and expanded Center for Veterans Enterprise. It would grant functional control, if not the outright transfer, of the Veterans Employment and Training Service (VETS) from the Department of Labor, as well as newly federalized DVOP (Disabled Veteran Outreach Program) and LVER (Local Veterans Employment Representative) positions, which currently reside in state departments of labor.



The VEOA goes beyond an administrative action, and we will work with leadership in the VA and with Members of Congress to achieve the introduction and passage of a bill in both houses which, when enacted, would transform this “one-stop shopping” concept into reality.

Other Priorities & Initiatives

VVA will work to address other specific issues of concern to veterans and our families that warrant the attention of Congress and the American people. What follows are our most significant and, we believe, potentially achievable legislative priorities and policy initiatives in these areas.

PTSD and Substance Abuse

- VVA shall work with Congress to ensure that DoD corrects all wrongful diagnoses of “personality disorder,” “adjustment disorder,” and “readjustment disorder” discharges of its men and women, so that all veterans found to have been inappropriately diagnosed and discharged are correctly diagnosed and accorded access to the benefits and care that they deserve and to which they should be entitled.
- VVA shall work with Congress to take whatever measures are deemed necessary to ensure accountability for the organizational capacity and funding for the accurate diagnoses and evidence-based treatments of the neuro-psychiatric wounds of war, particularly for Post-traumatic Stress Disorder (PTSD), substance abuse, Traumatic Brain Injury (TBI), and suicide risk.
- VVA shall work with Congress to ensure that the Departments of Defense and Veterans Affairs develop, fund, and implement evidence-based, integrated psychosocial mental health programs, substance-abuse recovery treatment programs, and suicide-risk assessment programs for all veterans and their families, for active-duty troops and their families, for Reservists and members of the National Guard who have seen service in a combat zone.

Veterans Health Care

- VVA shall insist that VA researchers focus on studies that delve into the wounds, maladies, injuries, and traumas of military service and war, with specific research into the health issues unique to all U.S. military operations and troop deployments.
- VVA shall encourage Congress to mandate the VA to change that department’s overly restrictive and secretive process for adding, or not adding, pharmaceutical treatments and drugs to its prescription drug formulary and to bring it into line with the more transparent and expansive formulary process used by the Department of Defense.
- VVA shall continue to press the VA to research and implement long-term care and wellness options for our country’s aging veteran cohort, a need that is obviously going to increase over the next decade.



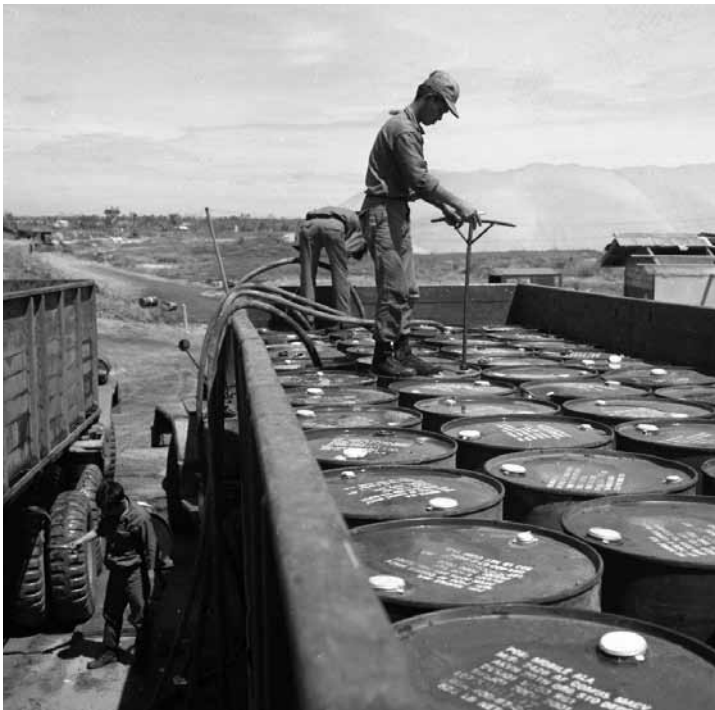
Minority Veterans

- VVA urges Congress to investigate if our nation's minority veterans are given lesser treatment for health conditions at any VA medical centers and community-based outpatient clinics (CBOCs).
- VVA urges Congress to enforce its mandate that the VA provide brochures and other information for Spanish-speaking veterans, specifically those residing in Puerto Rico, inasmuch as many veterans and their families may speak Spanish exclusively.



Agent Orange/Dioxin & Other Toxic Substances

- VVA calls on Congress and the President to take steps to declassify all documents pertaining to herbicides and other defoliants and toxins from the years of the Vietnam War, including memos between agencies, and make them public—now, some 50 years since our government sprayed some 20 million gallons of extraordinarily toxic compounds over 2½ million acres of the former South Vietnam.
- VVA shall continue to support legislative efforts and other initiatives to achieve justice for naval personnel who serve aboard ships plying the waters of Yankee and Dixie Stations in the South China Sea and the Gulf of Tonkin by getting the VA to recognize that they are deserving of the same health care and other benefits as “boots-on-the-ground” veterans.
- VVA shall request that Congress investigate why the VA has ceased providing custodial care and/or non-medical case management services for Agent Orange children afflicted with spina bifida and then push the VA to provide these vitally needed services to these now adult children, the innocent victims of a parent's military service.



Women Veterans

- VVA shall seek congressional oversight and accountability on all VA medical center and VISN directors' compliance of measures defined in the VA's 2010 Handbook 1330.01, *Health Care Services for Women Veterans*, as it relates to the position of Women Veteran Program Managers (WVPM); and compliance must be made a performance measure at all VISNs and VAMCs.
- VVA calls on the Under Secretary for Health to review and re-examine the existing VHA policy pertaining to the authorization of travel for veterans seeking MST-related specialized inpatient and/or residential treatment programs outside the facilities where they are enrolled, and provide travel funding for these veterans, irrespective of whether their status is inpatient or outpatient, and that all facility staff be advised to fully understand and implement this policy.
- VVA shall pursue legislation that reassigns complaints of MST by a service member to be addressed outside her or his immediate chain of command.



Homeless Veterans

- VVA shall request legislation revising the VA's Homeless Grant and Per Diem funding from a reimbursement for expenses based on the previous year's audited expenses to a prospective payment system based on a proposed budget for the annual program expenses, a change that is vitally needed if community-based organizations that deliver the majority of these services are to operate effectively.
- VVA shall request legislation establishing Supportive Services Assistance Grants for VA Homeless Grant and Per Diem Service Center Grant awardees and permanent authorization of the VA Homeless Grant and Per Diem Special Needs Grants Program.
- VVA shall seek legislation to amend the eligibility criteria for veterans enrolled in the Department of Labor's Homeless Veterans Reintegration Program (HVRP) so those veterans entering into "housing first" will be able to access this training for a period of up to 12 months after placement into housing.

Incarcerated Veterans

- VVA shall continue working with Congress to ensure that veterans encountering the justice system are, in fact, identified as veterans, assessed for symptoms of PTSD and/or TBI, and, where appropriate, are provided with alternative diversionary treatment options such as entry into a Veterans Treatment Court.
- VVA shall continue to encourage Congress to ensure that the VA provides benefits to veterans who are temporarily confined in jail or are incarcerated in prison.
- VVA shall also continue to work with Congress to address re-entry strategies and support transitional services for incarcerated veterans.

Compensation & Pension

- VVA will seek legislation to secure a pension for Gold Star parents and continue to seek the permanent prohibition of offsets of Survivors' Benefit Plan (SBP) and Dependency and Indemnity Compensation (DIC) for the survivors of service members who die while still in military service.
- Absent the permanent prohibition of these offsets, VVA urges Congress to press the VA to develop guidelines that will allow these claims to be processed within 30 days of a veteran's death, while ancillary benefits due a claimant can be deferred and processed at a later date.
- To promote uniformity in claims decisions, VVA shall seek a change in current policy which would mandate that VA staff, VSO and county veterans service representatives, and other stakeholders collaborate in developing uniform training materials, programs, and competency-based re-certification exams every three years for service officers.

- VVA shall continue to “encourage” the VBA to direct raters to follow the “best practices” manual in determining the degree of disability and percentage of compensation for veterans afflicted with PTSD and other mental health issues.

Economic Opportunity

- VVA shall work to ensure that veterans returning from deployments overseas are accorded Veterans' Preference when applying for government jobs and are given every advantage when seeking employment in private industry or in attempting to set up their own business. In fact, the VA and the Office of Personnel Management should be required to recruit veterans before they separate from service, especially from in-demand occupations such as IT and the healing arts.
- VVA will work to achieve real due process for veterans under the Vietnam Veterans Readjustment Act (VEVRA).
- In a related matter, VEVRA and the Office of Federal Contract Compliance (OFCCP), which are charged with helping veterans get good jobs with federal contractors, must either be reformed wholesale or eliminated, inasmuch as OFCCP is not helping any group secure jobs with contractors and is so far askew from its original purpose that it is doing far more damage than good, as it angers employers by imposing arbitrary and capricious “assessments” on them that are nothing more than unwarranted fines.

The Newest Veterans

- VVA shall continue to press the VA to ensure that they have adequate mental health personnel and services to meet the demands of this newest generation of veterans, including Reservists and members of the National Guard. VVA cannot emphasize too strongly the urgent as well as ongoing need for adequate PTSD care for every generation, whether one lives in a rural or remote part of the nation or in an urban area.
- VVA shall continue to promulgate and support new public and private initiatives to create jobs for returning veterans, especially for members of the National Guard and for Reservists, and to ensure that supportive services, such as mentoring programs, are integral elements in these initiatives.
- VVA applauds the work of the Senate Health, Education, Labor, & Pensions (HELP) Committee, as well as work by the House and Senate Veterans' Affairs Committees, to expose the egregious excesses of those predatory for-profit as well as not-for-profit institutions of higher learning that have filled their own coffers at the expense of student veterans; hence VVA shall continue to work with members of Congress, the Administration, the Consumer Financial Protection Bureau, and any other entity that will help expose the excesses, greed, and shame of institutions guilty of fraudulent practices in order to help right these wrongs.

FEBRUARY 2015

CREDITS

Photography: U. S. Department of Defense except for

cover, right: U.S. Army photo by Capt. Jarrod Morris

page 8: photo by Diane Cordell, Creative Commons

Design: Jennifer Paul Design

VETERANS HEALTH COUNCIL

The mission of the VHC is three-fold:

- 1) To inform veterans and their families about health issues related to their military service, as well as VA health care and benefits available to them;
- 2) To educate clinicians and other professionals in the healthcare community about health issues associated with military service; and
- 3) In concert with other healthcare organizations, to develop educational materials for medical colleges, nursing schools, teaching hospitals, and related entities that emphasize the healthcare needs of veterans.

To these ends, the VHC shall continue its education, information, and advocacy program initiatives to improve the quality of healthcare for all of America's veterans, and shall continue as well to press the VA to develop and implement a unified strategic outreach plan.

Additional information can be found online at www.veteranshealth.org.

Never again will one generation of veterans abandon another.



Vietnam Veterans of America

8719 Colesville Road, Suite 100

Silver Spring, Maryland 20910

301-585-4000

www.vva.org

[youtube.com/user/VietnamVetsAmerica](https://www.youtube.com/user/VietnamVetsAmerica)