

Office of Veterans Advocacy BULLETIN October 2021

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To be connected with a VA suicide prevention and mental health professional, call the toll-free National Suicide Prevention hotline and indicate you are a veteran. (800) 273-8255

ALL EMPLOYMENT ACTIVITIES AND SERVICES ARE ADMINISTERED IN A NONDISCRIMINATORY MANNER IN CONFORMANCE WITH FEDERAL AND STATE EEO AND CIVIL RIGHTS LAWS



TABLE OF CONTENTS

From Bill's Desk
VA Stands Ready to Provide Covid-19 Booster Vaccines5
The Veterans Health Administration Has Resumed Copayment Billing as of October 1st 5-6
Caregiver Support Program to Provide an Additional Year for Eligibility & Reassessment
VA VetSmile Pilot Program to Improve Affordable Dental Care Access for Veterans
VA to Start Processing Claims for Certain Conditions Related to Particulate Matter7
VA Expands Rental Support, Increasing Housing Options for Veterans7
VA Enhances Geriatric Emergency Care for Older Veterans
VA, National Support Network Teach Veterans to Fight Cybercrime9
Go Green and Get the Bulletin Via Email9
Dates to Remember
Convention Dates
The History of Election Day10
DAV Van Contacts To and From VA Medical Centers11
Flag Rules and Regulations - How to Display the Flag12

If you've not already done so, please volunteer to receive the bulletin via email by emailing listserv.admin@veterans.idaho.gov



FROM BILL'S DESK

Hard to believe we are already in the Fall Season of the year. This year is really flying by, but at least we have college football happening again so all is well in the world! Here are some of the issues ongoing within the Idaho Division of Veterans Services and the VA. I want to thank the Veterans of Foreign Wars' National Veterans Service for many of these updates.

Last month, State Service Officer, Mike Salazar out of our Pocatello Office, moved on to new opportunities and we wish him the best. We just hired Mike's replacement, Dan Arzola, who will begin work during the first week of October. Dan just retired from the Idaho Army National Guard (the Active Guard Program) and retired as a Sergeant First Class with multiple combat tours in Iraq. We welcome Dan to our team and cannot wait to begin his training in order to assist veterans and family members in Eastern Idaho.

The Boise VA Regional Office remains open to the public despite the ongoing construction on the second floor. As a reminder, once complete, the second floor of the VA Regional Office will house the VA Medical Center Telehealth providers, which cover the entire northwest of the country. Due to Covid-19, visitors to the Boise VA Regional Office are reminded that masks are mandatory and if you are experiencing cold/flu-like symptoms to remain home and not enter the building.

Since the last Quarterly Bulletin, the VA has approved additional presumptive service-connected conditions relating to airborne particulate environmental exposures (to include Burn Pits) for veterans who served in the Southwest Asia Theater of Operations (Iraq, Kuwait, Saudi Arabia, the neutral zone between Iraq and Saudi Arabia, Bahrain, Qatar, the United Arab Emirates, Oman, the Gulf of Aden, the Gulf of Oman, the Persian Gulf, the Arabian Sea, the Red Sea, and the airspace above these locations) from August 2, 1990, to the present; OR Afghanistan, Djibouti, Syria, and Uzbekistan during the Persian Gulf War from September 19, 2001, to the present. The new conditions added are Asthma, rhinitis, and sinusitis. To be eligible for these new presumptive conditions, the veteran must show a current diagnosis of one or more of these conditions which manifested within 10 years of a qualifying period of military service.

The VA Medical Centers continues to offer Covid-19 Vaccinations to all age groups of veterans and to the spouses and caregivers of enrolled veterans. Call your local VA Medical Center for information or to setup an appointment for the vaccine, although appointments are not required.

Due to the rise of Covid patients at the Boise VA Medical Center, they will not be conducting their drive-thru Flu Shot Clinics this year. Flu shots can still be obtained by veterans enrolled in VA Health Care within the veteran's assigned Care Team Clinics or by visiting a Walgreens Pharmacy and showing your VA Medical Card.

As a reminder, the VA's Debt Management Center will resume recouping debts owed to the VA on October 1, 2021. The Veteran's Health Administration is also resuming collecting co-pays for VA Medical Care to include pharmacy co-pays if applicable. Remember, if you receive a VA Debt Letter, you have 30 days from the date of the first letter to request a waiver of the debt due to extreme financial hardship. If done within the 30 days, the VA will suspend actions on collections while considering the request for the waiver of the debt. The VA will still consider the request for the waiver after the 30 days, but recoupment will take place.

The VA Debt Management Center (DMC) can also provide financial relief for veterans unable to make payments towards their VA benefit debt because of natural disasters. The relief window for each disaster may vary, but the DMC is currently offering temporary financial relief from collection on VA benefit debt due to hardships related to Hurricane Ida and the California Wildfires. The relief window is from September 1, 2021, through November 30, 2021, upon request. If veterans impacted by a natural disaster have a VA benefit debt and need temporary financial relief from collection, they can contact VA Debt Management Center online at iris.custhelp.va.gov/app/ask/ or call 800-827-0648 to request assistance.

The VA has been sending letters over the past month to veterans represented by the Military Order of the Purple Heart (MOPH) informing them MOPH no longer assists veterans during the VA Claim or Appeals process. If anyone receives one of these letters, please contact our office and we'll gladly accept representation through one of the other Veteran Service Organizations we are accredited with, such as the Veterans of Foreign Wars, The American Legion, Fleet Reserve Association, AMVETs, Marine Corps League, etc...

Due to the resurgence of COVID-19 infection in the local communities, the National Personnel Records Center (NPRC) is operating at a reduced capacity. As of August 2, 2021, the NPRC has reduced its on-site staffing to 10% of the workforce. While they remain in this state, they will continue to service emergency requests associated with medical treatments, burials, and homeless veterans trying to gain admittance to a homeless shelter. Please refrain from submitting non-emergency requests such as replacement medals, administrative corrections, or records research until we return to pre-COVID staffing levels.

Please remember, with the increased number of veterans being treated for Covid-related conditions, if a veteran passes away from Covid, please ask the hospital, medical center, or hospice care professionals assisting in the creation of the Death Certificate to list one or more of the veteran's service-connected conditions as contributing causes of death along with Covid, such as Coronary Artery Disease, Lung Cancer, Diabetes Mellitus Type II, Parkinson's Disease. The veteran's service-connected conditions must be listed on the Death Certificate in order for the Surviving Spouse to receive Dependency Indemnity Compensation (DIC) and Service-connected Burial Benefits (1-time payment of \$2,000). With regard to the Death Certificates, if the veteran has Vietnam service – Boots on Ground, on a ship within 12 nautical miles, C-123 air/ground crew,

etc... – DO NOT LIST the veteran passed from AGENT ORANGE! The veteran did not pass from Agent Orange and the VA will not accept that for service connected or presumptive cause of death. The Death Certificate must list a medical condition linked to Agent Orange/herbicide exposure such as Prostate Cancer, Bladder Cancer, Type II Diabetes, Coronary Artery Disease, Lung Cancer, Hypothyroidism, Parkinson's Disease, Multiple Myeloma, etc...

Due to the American Rescue Plan Act and other COVID-19-related legislation recently passed into law, FEMA will be able to provide financial assistance for COVID-19-related funeral expenses acquired after January 20, 2020. People who have incurred COVID-19-related funeral expenses are being advised to keep and gather documents, like an official death certificate showing the death is COVID-19 related, and funeral expense documents. FEMA will also need proof of funds received from other sources such as the VA, to determine the amount of your benefit. BEWARE of scammers – FEMA will not contact people prior to them registering for assistance. To file a claim, you must call the official FEMA COVID-19 Funeral Assistance Helpline at 844-684-6333/TTY: 800-462-7585. Their hours of operation are Monday – Friday from 9:00 a.m. to 9:00 p.m. Eastern Time. You can find more information at www.fema.gov/disasters/coronavirus/economic/funeral-assistance/faq.

Effective October 1, 2021, the new VA Plot Allowance Rate is \$828.00. If a veteran is interred in a private cemetery and eligible for the Non-Service-Connected Burial Rate of \$300, the VA will also pay the Plot Allowance Rate. If the veteran is interred at one of the two Idaho State Veteran's Cemeteries or the Snake River National Cemetery in Buhl, or is eligible for the Service-Connected Burial Allowance of \$2,000, the VA will not pay the Plot Allowance to the claimant, as there is no cost of internment at the State or National Cemeteries. Spouses can be interred with the veteran at the State Veteran's Cemeteries and the family will be charged the current plot allowance rate (The VA will not pay the Plot Allowance for spouse's). A quick reminder that the Idaho State Veterans Cemetery in Blackfoot is open and operational. If you have any questions for the Blackfoot Cemetery, please call them at (208) 701-7161.

The Department of Veterans Affairs (VA) has determined approximately 115,000 veterans may be eligible for a refund of their unused Post-Vietnam Era Veterans' Educational Assistance Program (VEAP) contributions totaling up to \$2,700, but VA only has contact information for 25% of them. They want to reach the other 75% and they need your help. While they search other VA databases for contact information, you can notify those members who might be eligible so they can reach out to the VA and request a refund of their VEAP contribution. In general, veterans have ten years from their date of discharge to use their education benefits. Some ineligible veterans still have unused contributions and are entitled to a refund. Veterans potentially eligible for a refund would have entered active duty between January 1, 1977, to June 30, 1985; contributed to VEAP while on active duty and before April 1, 1987; not used all their contributions; not have been dishonorably discharged (for VA purposes); completed 24 months of continuous service or have been discharged early due to Convenience of the Government within three months of the end of their enlistment (an "early out" under Title 10, Section 1171), Hardship (under Title 10, Section 1173), Service-connected disability (this includes those rated for a compensable service-connected disability even if they were not discharged for that disability). If you have unused VEAP funds, they should submit VA Form 22-5281 after completing sections 1-6, 14, 15, and 18. It will take 3-4 weeks to receive a response and/or refund via U.S Treasury check. If you are unsure whether you are eligible for a refund or whether you participated in VEAP, you can call the Education Call Center at 888-GIBILL-1 (888-442 4551) domestically or 001-918-781-5678 overseas, Monday through Friday from 7:00 a.m. - 6:00 p.m. CT.

The Horseshoe Bend Chamber of Commerce is creating a Veterans Memorial to honor the military service of those men and women from the Horseshoe Bend area. To date, they have developed a database of over 350 names of local veterans, representing participation in every U.S. conflict since the Mexican War. In support of the planned dedication on May 30, 2022, they are seeking additional names for inclusion on the memorial's Wall of Heroes. If you know of a servicemember, past or present, with ties to the Horseshoe Bend/Jerusalem Valley area (83629 zip code), contact Steve Jacobsmeyer at HSBVetMemorial@gmail.com. In your email, please include the servicemember's name, branch of service, dates of service, primary unit, and any personal awards of the Purple Heart or higher. For additional information on, or to donate to, the Woods Veterans Memorial Park, visit www.hsbvalleychamber.org/veterans-memorial.

I want to wish the Navy a Happy Birthday on October 13th, Happy Birthday to the Marine Corps on November 10th, and Happy Veterans Day to all veterans - we appreciate your service to our Country! If you have any questions, please feel free to contact our offices and have a fun and safe Fall!

VA STANDS READY TO PROVIDE COVID-19 BOOSTER VACCINES

Press Release, September 24, 2021

The Department of Veterans Affairs has started administering Pfizer-BioNTech COVID-19 vaccine boosters under Emergency Use Authorization. This decision follows the Food and Drug Administration's authorization and Centers for Disease Control and Prevention recommendation for a booster dose of Pfizer-BioNTech vaccine to:

- People 65 years and older and residents in long-term care settings should receive a booster shot of Pfizer-BioNTech's COVID-19 vaccine at least 6 months after their Pfizer-BioNTech primary series.
- People aged 50–64 years with underlying medical conditions should receive a booster shot of Pfizer-BioNTech's COVID-19 vaccine at least 6 months after their Pfizer-BioNTech primary series.
- People aged 18–49 years with underlying medical conditions may receive a booster shot of Pfizer-BioNTech's COVID-19 vaccine at least 6 months after their Pfizer-BioNTech primary series, based on their individual benefits and risk.

People aged 18-64 years who are at increased risk for COVID-19 exposure and transmission because of occupational or institutional setting may receive a booster shot of Pfizer-BioNTech's COVID-19 vaccine at least 6 months after their Pfizer-BioNTech primary series, based on their individual benefits and risks. "These booster doses are an important step forward in the fight against COVID-19," said VA Secretary Denis McDonough. "With the authorization of the Pfizer-BioNTech booster for eligible individuals, VA can provide Veterans an opportunity to maximize their protection, continuing our work to keep people safe and save lives during the COVID-19 pandemic."

The safety and care of Veterans is THE VA's top priority, as well as ensuring the health and welfare of its workforce. The VAs doors are open for walk-ins today during hours when vaccine clinics are operational, with full opening on Monday where Pfizer-BioNTech booster vaccines are available. Vaccines will be offered to veterans receiving care at the VA and employees, prioritizing those persons who are 65 and older, residents of long-term care facilities, and people 50-64 years with underlying conditions. As supply and capacity permits, the VA will offer booster doses to all other veterans, spouses, caregivers, and CHAMPVA recipients under the authority of the SAVE LIVES Act (SLA), which was signed into law in March 2021. The law expanded the VA's authority to offer vaccine to include veterans not traditionally eligible for VHA care, and others including spouses and caregivers of veterans.

Veterans who receive care in the VA and are due for booster shots will be contacted and advised of the recommended booster shots, which may be offered by appointment or on a walk-in basis. Veterans who received a Pfizer-BioNTech COVID-19 vaccine outside the VA, and persons who received a Pfizer-BioNTech vaccine in the VA for whom we don't have records of their high-risk condition, will need to contact their local VA facility for information about how they can receive their booster shot.

CDC advises that people can get both the COVID-19 vaccine and flu vaccine at the same time. Veterans receiving care at VA who wish to get a booster shot can get both shots together during the same visit.

Currently, only the Pfizer-BioNTech vaccine has been authorized as a booster shot. FDA and CDC continue to review data to determine whether and when a booster might be recommended for recipients of the Moderna and Johnson & Johnson (J&J)/Janssen) COVID-19 vaccine(s). VA will plan to offer boosters of these vaccines if authorized and recommended. The VA is also continuing to reach out to veterans who have not yet been vaccinated. Even without a booster, COVID-19 vaccination offers excellent protection and makes it 10 times less likely to be hospitalized or die from COVID-19.

THE VETERANS HEALTH ADMINISTRATION HAS RESUMED COPAYMENT BILLING AS OF OCTOBER 1ST

Due to Public Law 117-2, American Rescue Plan (ARP) Act, Section 8007 signed March 11, 2021, all Veteran copayments for medical care and pharmacy services provided April 6, 2020, through September 30, 2021, were canceled. Payments you made for care during that time have been, or will be, refunded.

You may settle your balance by mailing the coupon attached to your statement with payment, pay online at www.pay.gov, or by telephone at 888-827-4817 between 7:00 am and 7:00 pm Central Time. To view your most recent statement online, please visit Access VA at eauth.va.gov/accessva/?cspSelectFor=vbs. To ensure you receive your information in a timely manner, please keep the VA informed of any address changes by contacting the Health Resource Center at 866-400-1238.

Due to Public Law 104-113, Debt Collection Improvement Act, copayments for medical care and pharmacy services delinquent 90 days or more are subject to a reduction of VA benefits to satisfy the balance. Copayments delinquent 120 days or more are subject to referral to the U.S. Department of the Treasury for collection action. To avoid delinquent debt and VA benefit reduction and/or referral to the Treasury, veterans experiencing financial hardship are encouraged to explore VHA's expansive debt relief programs including repayment plans, copayment exemption, or waiver or compromise of copayment debt. For information, please visit www.va.gov/communitycare/revenue_ops/financial_hardship.

CAREGIVER SUPPORT PROGRAM TO PROVIDE AN ADDITIONAL YEAR FOR ELIGIBILITY & REASSESSMENT Press Release, September 22, 2021

The Department of Veterans Affairs Caregiver Support Program is extending eligibility through September 30, 2022, for veterans who are legacy participants, legacy applicants, and their family caregivers, participating in the Program of Comprehensive Assistance for Family Caregivers (PCAFC). This extension applies to veterans who were participating in PCAFC before October 1, 2020, individuals who applied for PCAFC before October 1, 2020, and those who were accepted into the program after October 1, 2020. The extension will provide the VA an additional year to conduct required reassessments of this cohort.

PCAFC offers enhanced clinical support for family caregivers of eligible veterans who incurred or aggravated a serious injury in the line of duty and meet other eligibility criteria. Benefits under PCAFC include education and training, enhanced respite care, counseling, a monthly stipend, CHAMPVA (if eligible), and certain travel expenses, among others. All legacy participants, legacy applicants, and their family caregivers will be reassessed based upon the new eligibility criteria resulting from the Final Rule which became effective October 1, 2020. "During this one-year period, approximately 19,800 legacy participants, legacy applicants and their family caregivers will be reassessed.," said VA Caregiver Support Program Executive Director Colleen M. Richardson, Psy.D. The department will initiate a large-scale effort to complete reassessments for this cohort. This effort will begin within the next several weeks.

The earlier VA conducts reassessments, the sooner it will be able to assist with discharge planning for PCAFC participants who do not qualify under the new eligibility criteria. Discharge planning may include engaging the veteran and family caregiver in other services to include participation in the Program of General Caregiver Support Services, which provides caregivers with education, training, peer support mentoring, coaching, and self-care courses.

Questions about PCAFC should be directed to local VA facility Caregiver Support Program staff or the Caregiver Support Line, toll free at 855-260-3274. Find your Caregiver Support team or Caregiver Support coordinator by visiting www.caregiver.va.gov/support/New_CSC_Page.asp.

VA VETSMILE PILOT PROGRAM TO IMPROVE AFFORDABLE DENTAL CARE ACCESS FOR VETERANS Press Release, September 16, 2021

The Department of Veterans Affairs launched a new initiative with community dental care providers to help improve dental care access for Veterans enrolled in VA health care who are currently ineligible for VA dental services. VETSmile: Connecting Veterans with Dentists in their Communities started early July to help eligible veterans access free or discounted dental services at pilot sites in New York City and New Jersey through dental care providers at New York University College of Dentistry, Zufall Health Center, and Rutgers School of Dental Medicine.

VETSmile is a Community Provider Collaborations for veterans pilot program authorized under Section 152 of the VA MISSION Act of 2018. It is the pilot program with a waiver request submitted to Congress under this authority. "VETSmile is an opportunity for us to bridge the gap in veterans' access to continuous, accessible and affordable oral care, which is crucial for their overall wellbeing," said Center for Care and Payment Innovation Acting Executive Director Roshni Ghosh, M.D. "VHA's Center for Care and Payment Innovation plans to rapidly accelerate efforts to broaden VETSmile dental care partnerships in additional states after implementation at initial sites."

For eligible veterans who do not have regular dentists, partnering dental care sites will provide dental care and services. Depending on the community provider, the services offered to eligible veterans will include:

- Acute emergency dental care.
- Preventive oral care.
- Treatment of oral disease.
- Dental restoration, endodontics and periodontics.

Additionally, dental care partners provide veterans with oral health education to encourage adoption of routine oral hygiene practices. VETSmile expects to serve 3,900 veterans through 9,000 veteran patient visits in the first year. The numbers are expected to increase as the pilot reaches other geographic locations. The program will carry on for the next five years and will be assessed for scaling or an extension. Sustained partnerships with the American Dental Association, the National Association of Community Health Centers, and VA Dentistry support the development and success of this pilot.

VA TO START PROCESSING CLAIMS FOR CERTAIN CONDITIONS RELATED TO PARTICULATE MATTER Press Release, August 2, 2021

The Department of Veterans Affairs began processing disability claims August 2nd for asthma, rhinitis, and sinusitis on a presumptive basis based on presumed particulate matter exposures during military service in Southwest Asia and certain other areas — if these conditions manifested within 10 years of a qualifying period of military service. The VA conducted the first iteration of a newly formed internal VA process to review scientific evidence to support rulemaking, resulting in the recommendation to consider creation of new presumptions of service connection for respiratory conditions based on the VA's evaluation of a National Academies of Science, Engineering and Medicine report, and other evidence.

The process concluded that particulate matter pollution is associated with chronic asthma, rhinitis, and sinusitis for veterans who served in the Southwest Asia theater of operations beginning Aug. 2, 1990 to the present, or Afghanistan, Uzbekistan, Syria, or Djibouti beginning September 19, 2001 to the present. The VA's review also concluded that there was sufficient evidence to presume that these veterans have been exposed to particulate matter. "I announced my intent to initiate rulemaking on May 27 to consider adding respiratory conditions to the list of chronic disabilities," said Denis McDonough, Secretary of Veterans Affairs. "Through this process I determined that the evidence provided was sufficient to establish presumptions of service connection for these three respiratory conditions. This is the right decision, and VA will continue to use a holistic approach in determining toxic exposure presumptives moving forward."

The Southwest Asia theater of operations refers to Iraq, Kuwait, Saudi Arabia, the neutral zone between Iraq and Saudi Arabia, Bahrain, Qatar, the United Arab Emirates, Oman, the Gulf of Aden, the Gulf of Oman, the Persian Gulf, the Arabian Sea, the Red Sea, and the airspace above these locations. The VA will conduct outreach to impacted veterans and survivors to inform them about their eligibility and will provide information on how to apply. Veterans and survivors who believe they may be eligible for the newly established presumptive conditions are encouraged to apply.

VA EXPANDS RENTAL SUPPORT, INCREASING HOUSING OPTIONS FOR VETERANS Press Release, August 25, 2021

The Department of Veterans Affairs has expanded the Shallow Subsidy initiative and will grant \$200 million to 238 nonprofit organizations across the country and territories to provide housing rental assistance to extremely and very low-income veteran households eligible under the VA's Supportive Services for Veteran Families program. The initiative funded by The American Rescue Plan, is now available in every state, the District of Columbia, Puerto Rico, U.S. Virgin Islands, and Guam, and promotes long-term housing stability by providing rental assistance payments directly to landlords on behalf of eligible veteran households for up to two years. "VA's Shallow Subsidy initiative is a vital tool in addressing the widening gap between incomes and rising housing costs," said VA Secretary Denis McDonough. "The recent expansion enables VA to provide relief to many more veterans burdened by high housing rental costs while they attempt to increase their incomes by pursuing training or better employment opportunities."

The SSVF Shallow Subsidy initiative covers 35% of eligible veterans' rent for two years without the risk of the subsidy decreasing if the veteran's income increases during the two-year period. The purpose is to incentivize veterans to increase their income through employment or other means. The initiative also works closely with the Labor Department's Homeless Veterans' Reintegration Program to help veterans secure employment. There are 7.2 million more affordable housing units needed for low-income families according to data published by the National Low Income Housing Coalition, highlighting the need for this VA initiative, particularly in communities with high rental costs and low housing rental vacancy rates.

The Shallow Subsidy initiative aligns with the White House's priority to promote housing stability by supporting vulnerable tenants and preventing foreclosures.

VA ENHANCES GERIATRIC EMERGENCY CARE FOR OLDER VETERANS Press Release, September 2, 2021

The Department of Veterans Affairs launched a Geriatric Emergency Department initiative within all of VA's 18 Veterans Integrated Service Networks through a standardized, comprehensive care model, becoming the nation's largest integrated health network with specialized geriatric emergency care. This initiative equips VA emergency departments with the ability to treat older veterans with complex conditions, catch unmet care needs, and develop teamwork strategies throughout the VA to better coordinate ED and follow-up care.

The VA has partnered with the American College of Emergency Physicians, The John A. Hartford Foundation, and the West Health Institute to ensure elderly veterans continue to be afforded the best possible emergency care and personcentered health services. The evidence-based approach to caring for older adults includes screenings to identify seniors at risk for cognitive impairment, delirium, fall risk, functional decline, and caregiver burden. "Nearly half of the nation's 19.5 million veterans are over 65 years old and account for more than 45% of ED visits at VA hospitals— more than double the rate for seniors nationwide," said VA Acting Under Secretary for Health Steven L. Lieberman, M.D. "Our goal is to lower this number by ensuring VA's elderly population receives age-friendly emergency care, while improving care coordination in communities across the nation."

The VA continues to promote and augment transitions of care through an interdisciplinary team approach from various services throughout facilities. This is achieved through connecting with social work and VA home/community resources, geriatric education for emergency department staff and supporting geriatric veterans in the community to prevent avoidable admissions. The partnership aims to establish 70 VA emergency departments as geriatric EDs eligible for accreditation in alignment with ACEP's GED Accreditation by December 2022. Accreditation includes three levels that each have specific education criteria for clinicians and nurses, creating EDs that are more expertly equipped to treat older veterans with complex conditions and social needs through interdisciplinary service coordination across a hospital. To date, there are 16 VA sites between levels 1 and 3, with level 1 accreditation being the highest achievable and most rigorous level:

- Cleveland, Ohio (1)
- Louisville, Ky. (2)
- Atlanta, Ga. (2)
- Buffalo, NY (2)
- Durham, NC (2)
- Syracuse, NY (2)
- Palo Alto, CA (3)
- Charleston, SC (3)
- New Orleans, LA (3)
- Grand Junction, CO (3)
- Greater Los Angeles, CA (3)
- San Diego, CA (3)
- Madison, WI (3)
- Long Beach, CA (3)
- West Haven, CT (3)
- Salt Lake City, UT (3)

Accredited emergency departments have proven to lower costs, reduce the rate of unnecessary hospital admissions, and prevent the risk of inpatient complications. Best practices and lessons learned from this collaboration will be shared with EDs outside the VA. ACEP has accredited more than 200 emergency departments since the program's inception in 2018.

VA, NATIONAL SUPPORT NETWORK TEACH VETERANS TO FIGHT CYBERCRIME Press Release, September 28, 2021

The Department of Veterans Affairs is partnering with the Cybercrime Support Network to protect veterans who are disproportionately targeted for identity theft and other online scams.

Launching in the fall of 2021, the partnership will provide educational resources that strengthen online security for service members, veterans, and their families and focus on recognizing, reporting and recovering from cybercrime. The educational awareness campaign includes:

- Public service announcements via Comcast broadcast services and an online portal.
- FightCybercrime.org, a resource database for those impacted by cybercrime and online fraud.
- ScamSpotter.org, a website to help veterans identify scams and report fraudsters.

"According to the Federal Trade Commission, in 2019 our nation's veterans lost 44% more in damages to cyber-criminals compared to non-veteran," said VA Director of IT Strategic Communication, Office of Information and Technology Reginald Humphries. "This nationwide partnership provides needed education and resources to mobilize the veteran community to help protect themselves from the impact of these crimes."

The FTC also stated, between 2017 and 2021, the military and veteran community reported over \$820 million in losses from cybercrime. The results of these financial losses have a devastating impact on families, careers, and veterans' overall wellbeing. "Our goal is to help veterans from becoming victims of cyber fraud," said Interim CEO and Chief Strategy Officer for Cybercrime Support Network Robert Burda. "Together, we are building a support system that will create a space for real change and cybersecurity innovation in the military and veteran community."

The partnership includes 33 nonprofit service organizations. Learn more about Cybercrime Support Network's Military and Veteran Program at fightcybercrime.org/military/.

GO GREEN AND GET THE BULLETIN VIA EMAIL

The bulletin will arrive in your in-box every quarter as a PDF document, which will allow to you forward or print and disseminate as many copies as you like. In addition to receiving the quarterly bulletin, you will also receive our annual Veterans Resource Directory via email.

If you can help us with our goal of reducing costs and the saving paper, please sign up at veterans.idaho.gov/listserv or you can email listserv.admin@veterans.idaho.gov. And don't forget you can always view and print the Bulletin and Resource Directory by visiting our website at www.veterans.idaho.gov.

DATES TO REMEMBER

October 11	Columbus Day
October 13	U.S. Navy established, 1775
	Star Spangled Banner adopted as National Anthem, 1931
October 19	Revolutionary War ends, 1781
November 2	Election Day
	Daylight-saving time ends, set clocks back one hour
	U.Ś. Marine Corps established, 1775
November 11	Veteran's Day
November 19	Lincoln gives Gettysburg Address, 1863
November 25	Thanksgiving Day
December 7	Pearl Harbor bombed, 1941
December 16	Boston Tea Party, 1773
December 25	Christmas Day

CONVENTION SCHEDULES – ALL DATES SUBJECT TO CHANGE

American Legion

Mid-WinterJanuary 6-9, 2022, Boise ID

StateTo be announced

National.....August 26, 2022-September 1, 2022, Milwaukee, WI

AMVETS

National.....August 16-20, 2022, New Orleans, LA

Disabled American Veterans

StateApril 20-23, 2022, Boise, ID

National.....August 6-9, 2022, Orlando, FL

Marine Corps League

National.....August 11-20, 2022, Daytona, FL

Military Order of the Purple Heart

National.....To be announced

Veterans of Foreign Wars

Mid-WinterJanuary 6-9, 2022, Boise, ID StateJune 8-13, 2022, Lewiston, ID

National.....July 16-21, 2022, Kansas City, MO

Vietnam Veterans of America

National.....November 2-6, 2021, Greensborough, NC

THE HISTORY OF ELECTION DAY

By federal law since 1792, the U.S. Congress permitted the states to conduct their presidential elections (or otherwise to choose their Electors) anytime in a 34 day period before the first Wednesday of December, which was the day set for the meeting of the Electors of the U.S. president and vice-president (the Electoral College), in their respective states. An election date in November was seen as useful because the harvest would have been completed (important in an agrarian society) and the winter storms would not yet have begun in earnest (a plus in the days before paved roads and snowplows). However, the problems borne of this arrangement were obvious and were intensified by improved communications via train and telegraph: the states that voted later could swell, diminish, or be influenced by a candidate's victories in the states that voted earlier. In close elections, the states that voted last might well determine the outcome.

A uniform date for choosing presidential Electors was instituted by the Congress in 1845. Many theories have been advanced as to why the Congress settled on the first Tuesday after the first Monday in November. The actual reasons, as shown in records of Congressional debate on the bill in December 1844, were fairly prosaic. The bill initially set the national day for choosing presidential Electors on "the first Tuesday in November," in years divisible by four (1848, 1852, etc.). But it was pointed out that in some years the period between the first Tuesday in November and the first Wednesday in December (when the Electoral College met) would be more than 34 days, in violation of the existing Electoral College law. So, the bill was amended to move the national date for choosing presidential Electors forward to the first Tuesday after the first Monday in November, a date scheme already used in the state of New York.

As for the day of the week chosen, Sunday was ruled out because it was the Sabbath. An election on Monday might require travel on Sunday, and so was also ruled out. Tuesday had no problem.

DAV VAN CONTACTS TO AND FROM VA MEDICAL CENTERS

All appointments for rides must be made 72 hours in advance.

For the schedule or an appointment, call Jim Rossette at the Boise VA Medical Center (208) 422-1000 ext. 7555.

LEWISTON & SURROUNDING AREA TO SPOKANE VAMC

All appointments for rides must be made 72 hours in advance.

For the schedule or an appointment, call the DAV Transportation Office at the Spokane VA Medical Center (800) 325-7940.

LIBBY & SURROUNDING AREA TO SPOKANE VAMC

All appointments for rides must be made 72 hours in advance.

For the schedule or an appointment, Call the DAV Transportation Office at the Spokane VA Medical Center (800) 325-7940.

COEUR D'ALENE & SURROUNDING AREA TO SPOKANE VAMC

All appointments for rides must be made 72 hours in advance. For the schedule or an appointment, Call the DAV Transportation Office at the Spokane VA Medical Center (800) 325-7940.

SANDPOINT & SURROUNDING AREA TO SPOKANE VAMC

All appointments for rides must be made 72 hours in advance. For the schedule or an appointment, call the DAV Transportation Office at the Spokane VA Medical Center (800) 325-7940.

LEWISTON TO WALLA WALLA VAMC

Thursdays: Walla Walla VA Medical Center Van. 8:00 a.m. departure from the CBOC at 1630 23rd Avenue, Building 2. Arrives at Walla Walla at 10:00 a.m. Departs Walla Walla at 1:30 p.m. Arrives Lewiston at 3:30 p.m. If your appointment runs past the departure time of 1:30, there is no alternative for returning to Lewiston.

POCATELLO, IDAHO FALLS, & SURROUNDING ARE TO SALT LAKE CITY VAMC

All appointments for rides should be made 72 hours in advance. For the schedule or an appointment, call the VTS/DAV Transportation Office at (800) 613-4012 ext. 2003 or 1027.



Flag Rules and Regulations - How to Display the Flag

1. When the flag is displayed over the middle of the street, it should be suspended vertically with the union to the north in an east and west street or to the east in a north and south street.

2. The flag of the United States of America, when it is displayed with another flag against a wall from crossed staffs, should be on the right, the flag's own right [that means the viewer's left --Webmaster], and its staff should be in front of the staff of the other flag.



3. The flag, when flown at half-staff, should be first hoisted to the peak for an instant and then lowered to the half-staff position. The flag should be again raised to the peak before it is lowered for the day. By "half-staff" is meant lowering the flag to one-half the distance between the top and bottom of the staff. Crepe streamers may be affixed to spear heads or flagstaffs in a parade only by order of the President of the United States.

4. When flags of States, cities, or localities, or pennants of societies are flown on the same halyard with the flag of the United States, the latter should always be at the peak. When the flags are flown from adjacent staffs, the flag of the United States should be hoisted first and lowered last. No such flag or pennant may be placed above the flag of the United States or to the right of the flag of the United States.



5. When the flag is suspended over a sidewalk from a rope extending from a house to a pole at the edge of the sidewalk, the flag should be hoisted out, union first, from the building.

6. When the flag of the United States is displayed from a staff projecting horizontally or at an angle from the window sill, balcony, or front of a building, the union of the flag should be placed at the peak of the staff unless the flag is at half-staff.



7. When the flag is used to cover a casket, it should be so placed that the union is at the head and over the left shoulder. The flag should not be lowered into the grave or allowed to touch the ground.

8. When the flag is displayed in a manner other than by being flown from a staff, it should be displayed flat, whether indoors or out. When displayed either horizontally or vertically against a wall, the union should be uppermost and to the flag's own right, that is, to the observer's left. When displayed in a window it should be displayed in the same way, that is with the union or blue field to

the left of the observer in the street. When festoons, rosettes or drapings are desired, bunting of blue, white and red should be used, but never the flag.



9. That the flag, when carried in a procession with another flag, or flags, should be either on the marching right; that is, the flag's own right, or, if there is a line of other flags, in front of the center of that line.

10. The flag of the United States of America should be at the center and at the highest point of the group when a number of flags of States or localities or pennants of societies are grouped and displayed from staffs.



11. When flags of two or more nations are displayed, they are to be flown from separate staffs of the same height. The flags should be of approximately equal size. International usage forbids the display of the flag of one nation above that of another nation in time of peace.

12. When displayed from a staff in a church or public auditorium, the flag of the United States of America should hold the position of superior prominence, in advance of the audience, and in the position of honor at the clergyman's or speaker's right as he faces the audience. Any other flag so displayed should be placed on the left of the clergyman or speaker or to the right of the audience.









