BULLETIN
January
2020
STATE OF IDAHO

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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

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If you've not already done so, please volunteer to receive the bulletin via email by emailing Jennel Binsky at jennel.binsky@veterans.idaho.gov

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**FROM BILL’S DESK**

I hope everyone had an outstanding Christmas/Hanukkah/New Year/Holiday Season and is ready to take on the year 2020! We’ve had a recent change in personnel in our Post Falls office, as Darryl Heisey moved on to new adventures. Darryl worked for the Idaho Division of Veterans Services for the past eight years and worked as the Kootenai County Service Officer prior to that. Darryl is being replaced by Matt Ranstrom who is a 23-year Air Force Retiree (Retired in 2014) and I am sure he will be a great asset to our team. We wish Darryl and his family the best with their new opportunities and welcome Matt as he begins learning all aspects of VA benefits. Here are some of the things going on within the VA (thanks in large part to the Veterans of Foreign Wars National Veteran Services for passing to me).

Claim processing for herbicide presumptive conditions under The Blue Water Vietnam Veterans Act of 2019 will begin on January 1, 2020. These claims will be worked by one of eight different VA Regional Offices: Cleveland, Phoenix, Roanoke, St. Louis, St. Paul, St. Petersburg, Salt Lake City, and Waco. With these claims, the veteran or survivor must file a supplemental claim (20-0995) in order for the VA to re-look at a claim that was previously denied and assign an effective date as of the original claim under the Blue Water Navy Act. The VA will not be reviewing previously denied claims unless a claim was filed that has been stayed, or a supplemental claim is filed. If a veteran was denied compensation or a survivor was denied Dependency Indemnity Compensation (DIC) between September 25, 1985, and January 1, 2020, at least in part due to lack of qualifying herbicide exposure, and the veteran’s service now qualifies under the Blue Water Navy Act, retroactive benefits can be awarded to the original claim date. The only reasons the VA will deny benefits to an earlier date is if the condition was not claimed, or if the veteran did not have a diagnosis or symptoms of the condition at the time of the denial. Complications (such as complications of diabetes mellitus) and residuals (such as residuals of cancers) will be considered to have been claimed if the veteran claimed service connection for the primary condition. As a reminder, this law now grants presumption of service connection for conditions related to Agent Orange exposure to veterans who were onboard vessels operating not more than 12 nautical miles seaward from the demarcation line of the waters of Vietnam and Cambodia as defined in Public Law 116-23, between January 9, 1962, and May 7, 1975, to veterans who served on or near the DMZ in Korea between September 1, 1967, and August 31, 1971, and grants spina bifida as a birth for children of certain Thailand service veterans.

In previous bulletins, I discussed the ongoing effort to repeal the "Widow's Tax"/SBP-DIC offset. In other words, under Federal Law, if a surviving spouse was eligible for Survivor Benefit Plan (SBP) through DFAS, and Dependency Indemnity Compensation (DIC) through the VA for a service-connected cause of death, a surviving spouse could not receive both benefits. That is no longer the case. With the National Defense Authorization Act for Fiscal Year 2020, the "widow's tax" has come to an end. According to multiple articles, the Defense Finance and Accounting Services (DFAS) will now begin to determine who the eligible beneficiaries are and implement a three year phase in period; beginning in 2021.

- Beginning January 1, 2021, DFAS will pay 1/3 of owed SBP along with full DIC (from VA).
- Beginning January 1, 2022, DFAS will pay 2/3 of owed SBP along with full DIC.
- Beginning January 1, 2023, full SBP and DIC will be paid.

There was a 1.6% cost of living allowance that will be factored into all Federal Benefit payments beginning on January 1, 2020. According to the Department of Defense, starting January 1, 2020, all service-connected veterans, Purple Heart recipients, former prisoners of war (POW), and individuals approved and designated as the primary family caregivers of eligible veterans under the Department of Veterans Affairs Program of Comprehensive Assistance for Family Caregivers (PCAFC) can use commissaries, exchanges, and morale, welfare and recreation (MWR) retail facilities, in-person and online. For more information regarding these privileges and access to military installations, visit www.militaryonesource.mil/expanding-access. Those eligible are veterans, Purple Heart recipients, former prisoners of war, and veterans with 0-90% service-connected disability ratings who are enrolled in VA medical care and possess a VA Medical Center identification card. For former service members who have not yet sought disability compensation from the VA, visit www.va.gov/disability/eligibility/. Medal of Honor recipients and veterans with 100% service-connected disability ratings are already eligible under existing DoD policy as long as they have a DoD Disabled Veteran ID card or DoD Retiree Identification card. On January 1st, individuals approved and designated as the primary family caregiver of an eligible veteran under the PCAFC will be eligible for these privileges as well. For information about primary family caregivers in the PCAFC, visit www.caregiver.va.gov/. On January 1st, veterans eligible solely under this act who are eligible to obtain a Veteran Health Identification Card must use this credential for in-person installation and privilege access. The card must display the veteran’s eligibility status (i.e., PURPLE HEART, FORMER POW or SERVICE CONNECTED). To apply, go to www.va.gov/healthbenefits/vhic/index.asp. Veterans eligible solely under this act who are not enrolled in or are not eligible to enroll in VA health care, or who are enrolled in VA health care, but do not possess a Veteran Health Identification card will not have access to DoD and Coast Guard installations for in-person commissary, exchange, and MWR retail privileges, but will have full access to online exchanges and American Forces Travel. Medal of Honor recipients and veterans with 100% service-connected disability ratings are eligible for DoD credentials under
DoD policy. Eligible caregivers will receive an eligibility letter from the VA’s Office of Community Care. If you are a primary family caregiver under the PCAFC and lose your eligibility letter, please call (877) 733-7927 to request a replacement.

Our office was contacted by the Boise VA Medical Center Enrollment and Eligibility Office who informed us they can no longer perform "in-person" enrollments for the VA Medical Care. Veterans can "live enroll" by calling (877) 222-8387, Monday through Saturday from 7:00 a.m. to 7:00 p.m. central time or visit the va.gov website and enroll under the veteran's healthcare section of the website.

Veterans can continue their VA health care in a different location while traveling, even if they are only temporarily relocated. In order to ensure seamless care, veterans need to inform their local VA Patient Aligned Care Team (PACT) of their travel destinations, temporary address, updates to phone numbers, arrival and departure dates, and any specific care concerns they may have during travel. A VA Traveling Veteran Coordinator and VA PACT team will work together to ensure that care is coordinated per the veteran’s provider’s request, appointments are scheduled, and eligibility is transferred to the alternate VA Medical Center for the duration of travel. The VA Traveling Veteran Coordinators are there to ensure veterans receive the best possible planned care while traveling away from their home VA Medical Center. The preferred notification recommended for seamless care or upcoming travel is 4-6 weeks in advance of travel plans. Prescriptions during travel should also be discussed with the veteran’s care team prior to travel. For overseas travel (foreign), veterans are encouraged to contact the VA's Foreign Medical Program.

As a reminder, if a veteran is rated 100% service connected as of January 1, 2020, owns and lives in a home in Idaho that was the primary residence before April 15, 2020, and has a current homeowner's exemption, the veteran can apply for the property tax reduction of up to $1,320 that will come off of the December 2020 bill. This program is different than the "Circuit Breaker" Property Tax Reduction Program and some veterans may qualify for both. This program does not automatically renew so even if you qualified for 2019, you must re-apply for this benefit between January 1, 2020, and April 15, 2020. Applicants will need the VA Benefit letter showing they are 100% service connected on or after 1 January 2020. The VA benefit letters can be obtained in the eBenefits.va.gov website, at the Boise VA Regional Office Public Contact Team Office, by calling the VA's phone number (800) 827-1000, or by contacting your assigned Veteran Service Officer. Please note, this benefit does not currently apply to veterans who are approved for Individual Unemployability (I.U.) through the VA. Arguing with Veteran Service Officers or employees of the County Assessor's Office concerning Individual Unemployability being the same as being rated 100% (which it is not) will not change the current State Law that is in place.

I hope to see many of you at the VFW and American Legion Mid-Winter conferences! Please let me know if you have any questions or concerns.

100% SERVICE-CONNECTED DISABLED VETERANS BENEFIT FOR IDAHO VETERANS

The Veterans Property Tax Reduction benefit reduces property taxes for qualified 100% service-connected disabled veterans. If you qualify, the property taxes on your home and up to one acre of land may be reduced by as much as $1,320. The program doesn't have an income limit. Once granted, a surviving spouse can use this benefit, but it isn't transferable to a new property after the death of the qualifying veteran. Please note, the benefits won't reduce solid waste, irrigation, or other fees charged by government entities.

You may qualify for Veterans Property Tax Reduction in 2020 if you were both recognized as 100% service-connected disabled by the U.S. Department of Veterans Affairs as of January 1, 2020, and you owned and lived in a home in Idaho that was your primary residence before April 15, 2020. The property must have a current homeowner's exemption. The home can also be a mobile home. You may qualify if you lived in a care facility or nursing home. Contact your county assessor's office for information.

To apply, contact your county assessor for an application, obtain a current letter from the U.S. Department of Veterans Affairs confirming your 100% service-connected disability rating as of January 1, 2020, and complete the application. The assessor's office will help you if needed. You must file the application with your assessor's office between January 1, and April 15, 2020. Please remember, this benefit isn't automatically renewed. You must apply and qualify each year and, if approved, your benefit will appear on your December 2020 property tax bill.

You may also qualify and apply for the following tax relief programs in addition to or instead of the Veterans Property Tax Reduction benefit. The Property Tax Reduction is a program that reduces the amount of taxes qualified individuals pay on their home and up to one acre of land. Benefits range from $150 to $1,320. There's an income limit for this program. The Property Tax Deferral is a program that defers the taxes on the home and up to one acre of land for qualified individuals. The deferred taxes become a lien on the property and must be repaid to the state of Idaho. There's an income limit for this program as well. Contact your county assessor for more program information and an application.
The Defense Department recently announced expanded commissary, military service exchange, and MWR access January 1, 2020, and established a standard for physical access to military installations. Below are the top 10 questions veterans have asked the Defense Department about the expanded access. For more information on expanded access, call Military One Source at (800) 342-9647.

How do I get access if I have a 0% service-connected condition, but my income is too high to get a Veteran Health Identification Card? Veterans who have received a Health Eligibility Center Form H623A stating they have been placed in VA health care priority group 8E may bring this form paired with an acceptable credential like a REAL ID-compliant driver’s license or a U.S. passport for installation and privilege access.

If I’ve got a DoD-issued identification card because I’m retired, a Medal of Honor recipient, or have a 100% VA-documented disability or unemployability rating, do I also need to have a Veteran Health Identification Card (VHIC) to get access to DoD privileges? No. If you are eligible for a DoD-issued retiree, Medal of Honor, or 100% disabled identification card, you should obtain and use the DoD-issued card to access DoD installations and privileges. While you could use a VHIC if you had one, you would be subject to the commissary credit/debit card user fee if you paid for your commissary purchases with a commercial credit or debit card. The commissary credit/debit card user fee is not charged to DoD-issued identification card holders. Your DoD-issued identification card will also allow you broader morale, welfare, and recreation activity access.

How does the installation access process work for me and my guests; and if I have old felony activity on my record, will I be denied access to the installation? All newly eligible veterans and caregivers and any guests traveling with them who are age 18 or older must stop at the visitor control center before entering an installation for the first time to verify identify, establish purpose for the visit, and undergo a basic on-the-spot background check.

Newly eligible veterans must show a Veteran Health Identification Card that displays “PURPLE HEART,” “FORMER POW,” or “SERVICE CONNECTED” below the photo on the front of the card; or a Health Eligibility Center Form H623A stating the veteran has been placed in VA health care priority group 8E, paired with an acceptable credential like a REAL ID-compliant driver’s license or a U.S. passport. (DoD installations cannot accept a driver’s license that is not REAL ID-compliant as proof of identity.)

- Newly eligible caregivers must show an eligibility letter from the VA’s Office of Community Care listing them as the Primary Family Caregiver for an eligible veteran under the Program of Comprehensive Assistance for Family Caregivers, paired with an acceptable credential like a REAL ID-compliant driver’s license or a U.S. passport. (DoD installations cannot accept a driver’s license that is not REAL ID-compliant as proof of identity.)
- Guests of newly eligible veterans or caregivers who are age 18 or older must show an acceptable credential like a REAL ID-compliant driver’s license or a U.S. passport. (DoD installations cannot accept a driver’s license that is not REAL ID-compliant as proof of identity.)

If the installation has credential enrollment capability and the acceptable credential(s) used are enrollable, they can be enrolled for recurring access so that the individual(s) don’t have to stop at visitor control every time they want to visit the installation. Even a guest’s acceptable credential can be enrolled. It will not allow them to enter the installation without someone who is eligible to enter the installation, but it will allow them to have their credential scanned from the car when entering with an authorized individual. This is the same process used for anyone who desires entry to an installation.

An individual may be denied access if derogatory information shows up on the background check reflecting on the integrity or character of an individual that indicates such an individual may pose a risk to the good order, discipline, morale, or safety of a DoD installation or the resources or personnel on that installation. Examples include, but are not limited to, aspects of an individual’s criminal history or current status as wanted or as a known or appropriately suspected terrorist. There is a process for an individual with accurately identified derogatory information that prevents individuals from establishing either historic or current fitness to seek an exception due to their specific circumstances, allowing them to be granted unescorted access. DoD Components may grant unescorted access to a convicted felon, in accordance with applicable Federal, State, and local laws, after considering appropriate mitigating factors such as the nature and seriousness of the offense, the circumstances surrounding the offense, recency and frequency of the offense, the individual’s age and maturity at the time of the offense, the individual’s effort toward rehabilitation, and other factors. Under these conditions, an individual should apply directly to the installation commander requesting an exception to all allow access to the installation.

Are dependents of newly eligible veterans and caregivers also eligible for DoD privileges? No. The Purple Heart and Disabled Veterans Equal Access Act of 2018, only gave these privileges to specific veterans and caregivers, not to their dependents. Dependents may accompany eligible veterans and caregivers as their guests, but they may not make purchases.

Why can’t all veterans have these DoD privileges? The scope of operations on military installations is sized to take care of the needs of military members and their families. Military operations are not funded or sized to accommodate all
veterans. Expanding access to the 4.1 million veterans and caregivers directed by the Purple Heart and Disabled Veterans Equal Access Act of 2018 (and that number continues to grow daily), will already be a test of DoD’s capacity. Inserting another 15 million veterans into the mix would overwhelm the system and our military members and their families would suffer for it.

Will veterans who choose to live overseas be able to access military installations and privileges in overseas foreign countries? It depends. U.S. law doesn’t apply outside of the United States and outside of the U.S. territories and possessions. Access in overseas foreign countries is subject to applicable host-nation laws and applicable international agreements, like status of forces agreements. The function of the installation also sometimes restricts access. It is best to check with the installation you desire to visit to find out if, as a veteran or caregiver in one of the new veteran or caregiver categories, you will be authorized access. Chances are that if you are a retired military member living abroad and didn’t already have access as a retiree, you will not get access under any of the new categories.

Can newly eligible veterans and caregivers bring guests to the installations and facilities? Yes. Guests will be subject to installation access procedures described in #8 above and must remain with the eligible veteran or caregiver at all times when they are on the installation. Also, guests cannot make any purchases in commissary or exchange stores.

Which of the following MWR activities can be used? (This is not an exhaustive list, only the most frequently asked about activities.)

- AmericanForcesTravel.com: Yes.
- Bowling: Yes.
- Camping: Yes. Tent sites and RV parks.
- Child Care: No.
- Clubs: Yes.
- Fishing: It depends. If lakes are operated as part of the installation park and picnic areas, no. If lakes are operated as part of the installation outdoor recreation activity, then it is at the discretion of the Military Department, subject to capacity and funding conditions.
- Golf: Yes.
- Gyms: No.
- Libraries: No.
- Lodging: Yes. Cabins, cottages, recreation centers, resorts, and official temporary duty and permanent change of station lodging (on a space-available basis).
- Movies: Yes, if there is an admission fee. (No, if the movies are shown at no charge.)
- Pools: Yes, if designated as a recreational swimming pool. (No if designated as an aquatic training facility.)
- Rentals: Yes.
- Tickets: At the discretion of the Military Department, subject to capacity and funding conditions.
- MAC flights: This is NOT an MWR, exchange, or commissary activity and access is NOT authorized.
- Pharmacy: This is NOT an MWR, exchange, or commissary activity and access is NOT authorized.
- USO: This is NOT a military organization. USO is a non-Federal entity.

What conditions are required to get access to the DoD privileges? Newly eligible veterans must meet at least one of the following conditions:

- Purple Heart recipient
- Former prisoner of war
- Service-connected disability rating (between 0-90%)
- Veterans with a 100% disability or unemployability rating and veterans who are Medal of Honor recipients already have DoD privileges, so they are not newly eligible. Veterans include former members of any of the uniformed services (Army, Navy, Air Force, Marine Corps, Coast Guard, U.S. Public Health Service, and National Oceanic and Atmospheric Administration).

Newly eligible caregivers must be the individual assessed, approved, and designated as the Primary Family Caregiver for an eligible veteran under the Program of Comprehensive Assistance for Family Caregivers.

In addition to meeting one of the above conditions, newly eligible veterans and caregivers must possess the specific documentation that DoD will accept as proof of identity and eligibility for access:

- Veterans must possess a Veteran Health Identification Card (VHIC) that displays “PURPLE HEART,” “FORMER POW,” or “SERVICE CONNECTED” below the photo on the front of the card. If an eligible veteran is not eligible to obtain a VHIC, the VA Health Eligibility Center Form H623A indicating placement in VA health care priority group 8E, paired with an acceptable credential, like a REAL ID-compliant driver’s license or U.S. passport, will be accepted. For information on enrolling in VA health care, visit www.va.gov/healthbenefits/enroll or call (877) 222-VETS (8387) Monday through Friday 8 a.m. until 8 p.m. Eastern time.
• Caregivers must possess an eligibility letter from the VA Office of Community Care listing them as the Primary Family Caregiver for an eligible veteran under the Program of Comprehensive Assistance for Family Caregivers, paired with an acceptable credential like a REAL ID-compliant driver’s license or a U.S. passport.

**Can anyone with a Veteran Health Identification Card (VHIC) get these privileges?** No. Only veterans with a VHIC that displays “PURPLE HEART,” “FORMER POW,” or “SERVICE CONNECTED” will be authorized the new privileges. Veterans may be able to use a VHIC that doesn’t contain one of these markings to access an installation with a medical facility if they have an appointment there, but if the VHIC does not display “PURPLE HEART,” “FORMER POW,” or “SERVICE CONNECTED,” they will not have access to commissaries, exchanges, or morale, welfare, and recreation facilities.

For more information on expanded access, call Military One Source at (800) 342-9647. You can also find facilities or shop online:

• Commissaries: www.commissaries.com
• Army and Air Force Exchange System: www.shopmyexchange.com
• Coast Guard Exchange: shopCGX.com
• Marine Corps Exchange: www.mymex.com
• Navy Exchange: www.mynavyexchange.com

**VETERANS CAN NOW ACCESS INFORMATION THROUGH HEALTH RECORDS ON IPHONE**

**News Release, November 6, 2019**

Veterans can now access information through Health Records on iPhone

In honor of Veterans Month in November, the U.S. Department of Veterans Affairs (VA) rolled out nationwide access for veterans to their VA health data, alongside their health records from other health care providers in one place, in the Health Records section of the Health app for iPhone. Now, patients will be able to see their medical information from various participating institutions, including the VA, organized into one view — covering allergies, conditions, immunizations, lab results, medications, procedures, and vital signs — and will receive notifications when their data is updated. “We have delivered veterans an innovative new way to easily and securely access their health information,” said VA Secretary Robert Wilkie. “Veterans deserve access to their health data at any time and in one place, and with Health Records on the Health app, VA has pushed the veterans experience forward.”

This capability was developed through the VA’s Veterans Health Application Programming Interface (Veterans Health API), first revealed in February, and has topped 2,000 users. The Veterans Health API allows private sector organizations to create and deploy innovative digital applications that help veterans access their health records in new ways. Health Records data is encrypted and protected with the user’s iPhone passcode, Touch ID, or Face ID. Beyond this effort with Apple, the VA plans to partner with other organizations to bring similar capabilities to other mobile platforms.

**VA REPORTS SIGNIFICANT INCREASE IN VETERAN USE OF TELEHEALTH SERVICES**

**News Release, November 22, 2019**

The U.S. Department of Veterans Affairs (VA) found more than 900,000 veterans used VA telehealth services in fiscal year 2019 (FY) as revealed in a mid-October report. The 17% increase over the prior fiscal year contributed to VA’s delivery of more than 2.6 million episodes of telehealth care in FY 2019. “VA is committed to offering veterans the health care they deserve, whenever and wherever they need it,” said VA Secretary Robert Wilkie. “We want every veteran to have a choice to schedule an in-person, telephone, or video visit with their providers depending on their preferences for health care delivery.”

This comes as the VA improves its efforts to inform veterans about telehealth service options, and with completion of the first full fiscal year of VA’s Anywhere to Anywhere initiative. The telehealth program allows VA health care teams to treat veterans regardless of their location, including across state lines. By the end of FY 2020, all primary care and mental health providers will be able to deliver care to patients, both in-person and via a mobile or web-based device.

Use of the VA Video Connect app, which connects veterans to their care teams through a secure video session, increased by 235% in FY 2019. More than 99,000 veterans used the app at home, eliminating a trip to the nearest VA facility. More than 200,000 or approximately two-thirds of the 294,000 VA Video Connect appointments in FY 2019 were for tele-mental health visits. Also this October, VA launched ATLAS (Accessing Telehealth through Local Areas Stations) in Eureka, Montana to provide timely care for veterans who live long distances from VA medical centers or have poor internet connectivity at home. Additional locations are scheduled to open as pilot sites in select American Legion posts, Veterans of Foreign Wars posts and Walmart stores.
VA FINALIZES PLAN TO RESOLVE LEGACY APPEALS BY THE END OF 2022
News Release, October 29, 2019

The U.S. Department of Veterans Affairs (VA) announced it has finalized its plan for resolving legacy appeals across the department and expects to complete the remaining legacy appeals by the end of calendar year (CY) 2022. Legacy appeals are claims for which the VA provided notice of decision prior to implementation of the Veterans Appeals Improvement and Modernization Act of 2017 (AMA) and the claimant has not elected to participate in the AMA process. In response to the growing number of legacy appeals, the VA implemented the AMA as of February 19th, giving veterans more choice and control over the process of their appeals. “AMA has been in place for almost a year and we are finally starting to see the light at the end of the tunnel for the resolution of legacy appeals,” said VA Secretary Robert Wilkie. “I am proud of the work being done here at VA to make sure those veterans waiting the longest for a decision get their results.”

This past year, the VA decreased the number of pending legacy appeals despite receiving thousands of new appeals. The VA is successfully reducing legacy appeals while also working AMA appeals to ensure veterans receive their decisions in a timely manner. The VA’s three administrations –Veterans Benefits Administration, Veterans Health Administration, and National Cemetery Administration – plan to resolve their non-remand legacy appeals by the end of CY 2020. The Board of Veterans’ Appeals will continue to work appeals from the administrations and plans to resolve its legacy appeals inventory by the end of December 2022. Resolving legacy appeals aligns with the VA’s strategic plan to modernize IT systems and processes and supports the VA’s mission to provide exceptional customer service to veterans and their families.

VA ANNOUNCES PROPOSAL TO INCREASE ACCESS TO DENTAL CARE
News Release, December 13, 2019

The Department of Veterans Affairs (VA) announced it submitted to Congress a waiver request and pilot program under Section 152 of the VA Maintaining Internal Systems and Strengthening Integrated Outside Networks Act of 2018 (MISSION Act) to improve access to dental care for veterans. The MISSION Act authorizes the VA to submit statutory waivers to Congress for the purpose of testing innovative service delivery models to improve the quality of care for America’s veterans. Under existing statute, the VA has limited authority to provide dental services for veterans. With this waiver request, the VA is submitting a proposal to increase access to dental services for enrolled veterans ineligible for dental services through the VA by connecting them with community-based, pro bono, or discounted dental service providers. “The MISSION Act gave veterans real choice over their healthcare decisions,” said Secretary of Veterans Affairs Robert L. Wilkie. “Through this pilot proposal, we want to ensure veterans have access to quality dental care through a network of providers who are proud to serve America’s heroes.”

Poor oral health can have a significant negative effect on overall health. Clinical research has found possible connections between gum problems and heart disease, bacterial pneumonia, and stroke. Upon approval of this pilot, the VA will work with groups such as the American Dental Association and Federally Qualified Health Centers across the U.S. to offer pro bono and discounted dental services to veterans. “This waiver submission opens the door to years of groundbreaking innovation under the MISSION Act to improve care for our veterans, who are top of mind for this President and this Administration every single day,” said Director Joe Grogan of the White House Domestic Policy Council.

Section 152 of the MISSION Act led the VA to establish a Center for Care and Payment Innovation to test payment and service delivery models, with the goal of reducing expenditures while preserving or enhancing the quality of care for veterans. In implementing this section, the Secretary was granted authority to waive statutory requirements that may impede innovative approaches upon notification of and approval from Congress. The dental care proposal, titled the Care Coordination for Dental Benefits demonstration project under the Community Provider Collaborations for Veterans Pilot Program, is the first waiver request and pilot program submitted to Congress under this authority. The VA Innovation Center, led by Michael Akinyele, is implementing Section 152 of the VA MISSION Act under the Office of Enterprise Integration. The VA published a proposed rule (RIN 2900-AQ56) establishing the Center for Innovation for Care and Payment on July 29, 2019 (84 FR 36507). The VA published a final rule implementing its authority on October 25, 2019; this rule became effective on November 25, 2019. “This pilot program enables us to explore leading practices across the U.S. health care system to meet veterans needs today and into the future,” said Dr. Melissa S. Glyn, Assistant Secretary for Enterprise Integration. The VA will publish details of the Community Provider Collaborations for Veterans pilot program for public comment in the Federal Register.
VA INTRODUCES NEW DIRECT DEPOSIT OPTIONS FOR VETERANS, BENEFICIARIES  
News Release, December 17, 2019

The U.S. Department of Veterans Affairs (VA), in partnership with the Association of Military Banks of America (AMBA), launched the Veterans Benefits Banking Program (VBBP), that became available starting December 20, 2019. The program will provide veterans and their beneficiaries the chance to safely, reliably, and inexpensively receive and manage their VA monetary benefits through financial services at participating banks. “VBBP offers another way to simplify banking choices to help eligible veterans select the right bank for themselves and their families,” said VA Secretary Robert Wilkie. “The VA and AMBA are proud to provide this opportunity to connect veterans with banks that understand their needs.”

The VA’s collaboration with AMBA will leverage its consortium of military-friendly financial institutions that cater to service members. AMBA is the only trade association representing banking institutions specializing in providing services for military personnel, veterans, and their families around the world. VBBP leverages participating AMBA institutions and banks operating within the gates of installations of all branches of service and National Guard and Reserve components. “AMBA and its member banks welcome the opportunity to provide our nation’s veterans additional financial services options to help them achieve greater financial independence, resiliency, and literacy,” said AMBA president and Air Force veteran Steve Lepper. “We hope that as veterans recognize the benefits of working with the banks to achieve financial stability, more veterans, banks, and credit unions will join this effort.”

The current available banking options include direct deposit into an existing bank account, electronic funds transfer into a Direct Express pre-paid debit card, and mailing of a paper check for pre-approved beneficiaries. VBBP introduces new financial resources to veterans and their beneficiaries. The program is an effort to address the problems some veterans experience using these payment methods. VBBP offers these VA beneficiaries – including many who have been unable to open bank accounts in the past – the opportunity to deposit their benefit funds directly into existing or new bank accounts offered by participating AMBA member banks. Neither the VA nor AMBA is endorsing any particular bank or requiring veterans and other beneficiaries to use them. It does not require veterans who are satisfied with their current financial situation to change how they receive their VA monetary benefits. All veterans and other beneficiaries – who currently receive more than $118 billion in financial benefits through the VA – are eligible to access this program. There are approximately 250,000 veterans and beneficiaries who receive their VA benefits through a pre-paid debit card or paper check who may not have a bank account.

To have your federal benefits electronically transferred to a veteran’s designated financial institution (e.g. bank), VA beneficiaries interested in changing direct deposit options can also call (800) 827-1000 with their relevant banking information.

VA, DOD TO FUND UP TO $50 MILLION IN NEW RESEARCH ON TRAUMATIC BRAIN INJURY  
News Release, October 22, 2019

The U.S. Department of Veterans Affairs (VA) and the Department of Defense (DOD) launched the Long-Term Impact of Military-related Brain Injury Consortium (LIMBIC) on October 1st, for which the two organizations pledged to fund up to $50 million, to research mild traumatic brain injuries (TBI) or concussions. The five-year effort will receive $25 million in funding from the DOD and up to $25 million from the VA, depending on availability of funds. “VA and DOD share an urgent, ongoing commitment to better understand the long-term impact of TBI,” said VA Secretary Robert Wilkie. “Through this overarching effort, we are harnessing the best work of our nation’s scientists and will lay the groundwork for meaningful progress in diagnosis and treatment.”

LIMBIC is composed of researchers and resources from more than 20 organizations, spanning the VA, the DOD, the National Institutes of Health, universities, and nonprofit organizations. The VA and DOD’s funding will support a consortium led by a team at Virginia Commonwealth University (VCU) and the Hunter Holmes McGuire VA Medical Center in Richmond, Virginia. The lead investigator, Dr. David X. Cifu, is a senior TBI specialist for the VA and a professor at VCU. The consortium extends the work of a previous collaborative effort known as the Chronic Effects of Neurotrauma Consortium, or CENC, also led by Dr. Cifu. The existing CENC cohort, consisting of more than 2 million veterans and service members, started in 2012 and has become the world’s largest and best-characterized research cohort dedicated to the study of military TBI. It will expand the cohort; integrate with other government, academic and nonprofit research; and spur new public-private partnerships. Researchers associated with CENC, and now with LIMBIC, have already documented links between combat concussions and dementia, Parkinson’s disease, chronic pain, opioid usage, and suicide risk. They have also developed specialized diagnostic tests using questionnaires, physical exams, brain imaging, fluid biomarkers, and electrophysiology to probe how the brain recovers from injury.
VA & PET PARTNERS COMBINE EFFORTS TO BRING THERAPY ANIMAL SERVICES TO MORE VETERANS
News Release, November 7, 2019

The U.S. Department of Veterans Affairs (VA) partnered with non-profit organization Pet Partners last October to help improve quality of life, social engagement, and health of veterans, by increasing access to animal-assisted activities (AAA) and animal-assisted therapy (AAT) services throughout the VA health care system. Pet Partners and the VA will train therapy animal teams, encourage VA medical facilities to establish and expand trained therapy animal visitation, and provide AAA and AAT programs to give patients connection, comfort, and joy that comes from spending time with animals. “Emerging research recognizes the positive effects interactions with animals can have on patients,” said VA Secretary Robert Wilkie. “VA’s work with Pet Partners provides unique resources to our veterans, through animal-assisted activities and therapy.”

The partnership also provides veteran communities with volunteer opportunities and helps integrate veterans and their families into Pet Partners’ activities and events. A wide range of research and studies suggest the human-animal bond can lead to lower blood pressure, reduced risk for cardiovascular disease, and lessened anxiety, pain, and loneliness. Time with therapy animals not only promotes physical and mental health but also supports wellness across variables such as social interaction, rate of recovery and personal motivation. For more information, visit www.va.gov/healthpartnerships.

VA'S BOARD OF VETERANS' APPEALS PLAN VIRTUAL HEARINGS IN 2020
News Release, December 9, 2019

The U.S. Department of Veterans Affairs (VA), Board of Veterans’ Appeals (Board) and Office of Information and Technology (OIT) are working towards nationwide availability of virtual hearings for veterans next year, allowing access using their mobile phone or laptop via the VA Video Connect app. The virtual hearings are based on the Veterans Health Administration’s tele-health platform and lets veterans participate in their appeals hearings from the comfort of their homes. “VA strives to provide integrated solutions that leverages 21st century technology to significantly increase the number of hearings completed annually,” said VA Secretary Robert Wilkie. “Giving veterans the ability to participate in secure, confidential virtual hearings is another aspect of VA’s modernization to provide veterans with the ultimate customer experience.”

The testing of virtual hearings began July 2019. The collaboration with OIT, Veteran Service Organizations, and other veteran representatives has been positive. To date, the Board has held 155 successful virtual hearings. Veterans who otherwise would have had to cancel their hearings were able to participate in virtual hearings and receive decisions. The Board of Veterans’ Appeals (Board) makes final decisions for the VA regarding appeals for veterans’ benefits and services. The Board’s mission is to conduct hearings and issue timely decisions for veterans and other appellants in compliance with the law.

VA FINALIZES PLAN TO RESOLVE LEGACY APPEALS BY THE END OF 2022
News Release, October 29, 2019

The U.S. Department of Veterans Affairs (VA) announced it has finalized its plan for resolving legacy appeals across the department and expects to complete the remaining legacy appeals by the end of calendar year (CY) 2022. Legacy appeals are claims for which the VA provided notice of decision prior to implementation of the Veterans Appeals Improvement and Modernization Act of 2017 (AMA) and the claimant has not elected to participate in the AMA process. In response to the growing number of legacy appeals, the VA implemented the AMA as of February 19th, giving veterans more choice and control over the process of their appeals. “AMA has been in place for almost a year and we are finally starting to see the light at the end of the tunnel for the resolution of legacy appeals,” said VA Secretary Robert Wilkie. “I am proud of the work being done here at VA to make sure those veterans waiting the longest for a decision get their results.”

This past year, the VA decreased the number of pending legacy appeals despite receiving thousands of new appeals. The VA is successfully reducing legacy appeals while also working AMA appeals to ensure veterans receive their decisions in a timely manner. The VA’s three administrations –Veterans Benefits Administration, Veterans Health Administration, and National Cemetery Administration – plan to resolve their non-remand legacy appeals by the end of CY 2020. The Board of Veterans’ Appeals will continue to work appeals from the administrations and plans to resolve its legacy appeals inventory by the end of December 2022. Resolving legacy appeals aligns with the VA’s strategic plan to modernize IT systems and processes and supports the VA’s mission to provide exceptional customer service to veterans and their families.
DATES TO REMEMBER

January 1........................ New Year’s Day
January 20........................ Martin Luther King Jr. Day
February 2........................ Groundhog Day
February 8........................ Boy Scouts of America founded, 1910
February 14........................ Valentine’s Day
February 17........................ President’s Day – See the history of President’s Day at the bottom of this page
March 3............................. Star Spangled Banner made the U.S. National Anthem, 1931
March 12........................... Girl Scouts of America founded, 1912
March 16........................... U.S. Military Academy, West Point, NY founded, 1802
March 17........................... St. Patrick’s Day

CONVENTION SCHEDULES

American Legion
Mid-Winter................. January 16-19, 2020, Meridian, ID
State............................ July 16-19, 2020, Idaho Falls, ID
National......................... August 28-September 3, 2020, Louisville, KY

AMVETS
National......................... August 18-22, 2020, Springfield, IL, KY

Disabled American Veterans
State............................ April 22-25, 2020, Coeur d’Alene, ID
National......................... July 31-August 4, 2020, Dallas, TX

Marine Corps League
National......................... August 8-15, 2020, Daytona Beach, FL

Military Order of the Purple Heart
National......................... July 27-31, 2020, Charleston, WV

Veterans of Foreign Wars
Mid Winter................. January 9-12, 2020, Boise, ID
State............................ June 16-19, 2020, Boise, ID
National......................... July 18-23, 2020, Reno, NV

Vietnam Veterans of America
National......................... None announced for 2020

THE HISTORY OF PRESIDENT’S DAY

The original version of the holiday was in commemoration of George Washington’s birthday in 1796 (the last full year of his presidency). Washington, according to the calendar that has been used since at least the mid-18th century, was born on February 22, 1732. According to the old-style calendar in use back then, however, he was born on February 11th. At least in 1796, many Americans celebrated his birthday on the 22nd, while others marked the occasion on the 11th instead.

By the early 19th century, Washington’s Birthday had taken firm root in the American experience as a bona fide national holiday. Its traditions included Birthnight Balls in various regions, speeches and receptions given by prominent public figures, and a lot of revelry in taverns throughout the land. Then along came Abraham Lincoln, another revered president and fellow February baby, born on the 12th of the month. The first formal observance of his birthday took place in 1865, the year after his assassination, when both houses of Congress gathered for a memorial address. While Lincoln’s Birthday did not become a federal holiday like George Washington’s, it did become a legal holiday in several states.

In 1968, legislation (HR 15951) was enacted that affected several federal holidays. One of these was Washington’s Birthday, the observation of which was shifted to the third Monday in February each year, whether or not it fell on the 22nd. This act, which took effect in 1971, was designed to simplify the yearly calendar of holidays and give federal employees some standard three-day weekends in the process.

Apparently, while the holiday in February is still officially known as Washington’s Birthday (at least according to the Office of Personnel Management), it has become popularly (and, perhaps in some cases at the state level, legally) known as “President’s Day.” This has made the third Monday in February a day for honoring both Washington and Lincoln, as well as all the other men who have served as president.
DAV VAN CONTACTS TO AND FROM VA MEDICAL CENTERS

BOISE & SURROUNDING AREA TO BOISE VAMC
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 AREAS 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.