

# POLK COUNTY VETERANS FALL NEWSLETTER 2017

Hello to all:

It's hard to believe that I have been in this position for a year now. I have had the privilege to meet many of our Polk County Veterans and families through out the year.



September has been a busy month for our office, which is a good thing. Please don't hesitate to contact us for help with your benefits. During my fall training I was informed that the VA is looking to add three more presumptive to Agent Orange list. The three are bladder cancer, thyroid condition and hypertension. I am hoping that within the next couple months these three will be set in stone as new presumptive to Agent Orange Exposed Veterans. There is more information about this on page 2 and 3 of the newsletter.

October 14, is our Veteran Resource Information Fair at the VFW Post 1902 in Crookston. Take a look at the flyer and hope to see you all there.

We are still looking for more volunteer drivers for the DAV Polk County Van. If you are interested in driving please call our office at 218-281-3066 and if you are a Veteran in need of a ride to a VA approved appointment please call **1-855-277-9787**.



*Stop in the office anytime, even to say a hello!!!*

(I hope you all enjoy the Polk County Veterans Service Office Fall Newsletter)

Laurie and I hope the weather holds out and you have a great fall!

*Laurie  
Kurtis*



## Changes Made To Disabled Veterans' Homestead Market Value Exclusion

Changes have been made to the Disabled Veterans Homestead Market Value Exclusion effective July 1, 2017.

### What changed?

Starting 2017 assessment for taxes payable in 2018, an annual application is no longer required. In addition, the spouse of a veteran who was 100 percent totally and permanently disabled may now qualify for the homestead exclusion even if the veteran did not apply or receive the exclusion before their death, as long as the veteran died after Dec. 31, 2011. The spouse must apply within two years of the veterans death or by June 1, 2019, whichever is later.

### How do surviving spouses of veterans who were totally and permanently disabled qualify?

A surviving spouse qualifies if they meet all the following requirements:

1. The veteran died after December 31, 2011.
2. The spouse holds the legal or beneficial title to the homestead and permanently resides there.
3. The veteran had an honorable discharge.
4. The U.S. Department of Veterans Affairs certifies the veteran had a 100 percent total and permanent disability.
5. The spouse applied within two years of the veterans death or by June 1, 2019, whichever is later.

### Can a surviving spouse qualify if the veteran was not totally and permanently disabled?

Yes. Surviving spouse may qualify if they were awarded Dependency and Indemnity Compensation by the U.S. Department of Veterans Affairs. The veterans disability rating does not affect the spouse eligibility.

### When is the application due?

- A. Spouses of veterans who were totally and permanently disabled must apply by August 1, 2017, for taxes payable in 2018. In future years, the due date is July 1.
- B. Veterans or primary family caregivers who are applying for the first time must do so by July 1, 2017.

(The July 1, 2017 date has passed , apply anytime after but prior to July 1, 2018)



"I whistle while I work. Beats screaming."

I couldn't figure out why the baseball kept getting larger? Then it hit me.

What's the difference between in-laws and outlaws? Outlaws are wanted.

"A NEW STUDY from Harvard says you can reduce the risk of a potentially fatal heart condition by eating six bars of chocolate a week. Yeah. It reduces the chance of a heart attack because once you give up being in shape, you have way less stress." – James Corden

# *Veteran Resource Information Fair*

*When: October 14, 2017*

*Time: 10:00 a.m. - 3:00 p.m.*

*Where: Crookston VFW Post 1902  
121 N Main Street, Crookston*

*Sponsored by Polk County Veterans Service Office  
and  
Crookston VFW Post 1902*

*Vendors attending are as listed:*

DUSTY HILLEBRAND  
VETERAN EMPLOYMENT TEAM

BILL CASSAVANT  
BEYOND THE YELLOW RIBBON-  
CROOKSTON

UNIVERSITY OF MINNESOTA  
CROOKSTON-OFFICE OF ADMISSIONS

KRISTEN SCHWARZ  
WALK BY FAITH THERAPEUTIC RIDING

DEANNA MOUNTS  
MINNESOTA VETERANS HOME

JEFFERY BURTH  
MDVA/AMERICAN LEGION

TONY SCHNELLBACH  
NW REGIONAL COORDINATOR  
HIGHER EDUCATION VETERANS  
PROGRAM

DARIUS SIMON  
MINNESOTA ASSISTANCE  
COUNCIL FOR VETERANS

NATHAN MODEEN, LCSW  
MENTAL HEALTH SOCIAL WORK-  
ER WITH GRAND FORKS CBOC

VET CENTER  
GRAND FORKS, ND

RUSS SPARBY  
HUMANA, SALES REPRESENTA-  
TIVE (NW MINNESOTA)

WAYNE KILEN  
MIDDLE RIVER VETERANS OUT-  
DOOR

VFW POST 1902-CROOKSTON

DAV CHAPTER 14-CROOKSTON

TIM DENNEY  
LEVEL 5 SERVICES

POLK COUNTY PUBLIC HEALTH

RUSSEL FOSTER  
VFW REGIONAL OFFICE-FARGO

TRUDY HOFER  
STENSHOEL-HOUSKE FUNERAL  
HOME

PAM SCHORSCH  
NORTHLAND COMMUNITY &  
TECHNICAL COLLEGE-EAST  
GRAND FORKS



# Fargo VA HCS

## Women Veterans Event

Space is limited. Registration required by noon Oct. 5, 2017

**Women Veterans—Honoring those Who Served**

**When: Saturday, October 14, 2017, 9:30 a.m.—3:00 p.m.**

**\* Free Event —Lunch provided**

**Where: Crookston VFW Post 1902  
121 N. Main Street, Crookston, MN**

**- Connect - Learn - Have Fun - Relax -**

**Meet and share with other Women Veterans**

**Learn about Women's Health and Wellness Issues**

**Enjoy Self-Care Activities and Discussions**

**To Register contact: Jessica Melvin 701-232-3241 ext. 9-4311**

**Additional Event at VFW this date:**

**Veteran Resource Information Fair**

**Sponsored by Polk County VSO and Crookston VFW Post 1902**

**Main Level Meeting room 10 am—3 pm**

**Military Update:** VA Secretary David J. Shulkin will decide “on or before” Nov. 1 whether to add to the list of medical conditions the Department of Veteran Affairs presumes are associated to Agent Orange or other herbicides sprayed during the Vietnam War, a department spokesman said Tuesday in response to our enquiry.

Any ailments Shulkin might add to VA’s current list of 14 “presumptive diseases” linked to herbicide exposure would make many more thousands of Vietnam War veterans eligible for VA disability compensation and health care.

Ailments under review as possible adds to the presumptive diseases list include bladder cancer, hypothyroidism and Parkinson-like symptoms without diagnosis of that particular disease. But hypertension (high blood pressure) and stroke also might be embraced, or ignored, as part of the current review.

The process was sparked by the Institute of Medicine’s 10th and final review of medical literature on health effects of herbicide exposure in Vietnam. The 1100-page report concluded in March 2016 that recent scientific research strengthened the association between herbicide exposure and bladder cancer, hypothyroidism and Parkinson-like symptoms. Specifically, the institute, or IOM, found “limited or suggestive” evidence of an association to herbicide versus its previous finding of “inadequate or insufficient” evidence of an association.

The IOM report also reaffirmed from earlier reviews “limited or suggestive evidence” of an association between herbicide sprayed in Vietnam and hypertension and also strokes. That same level of evidence was used in 2010 by then-VA Secretary Eric Shinseki to add ischemic heart disease and Parkinson’s disease to the Agent Orange presumptive list. Shinseki had stronger evidence, an IOM finding of “positive association” to herbicide for chronic lymphocytic leukemia, which he also added to the list that year.

Shulkin, the current secretary, has authority to use IOM findings to add all five diseases to the presumptive list, or he can choose to look at other studies and scientific evidence to support adding fewer ailments or none at all.

The IOM, renamed the National Academy of Medicine last summer, delivered its Veterans and Agent Orange: Update 2014, to then-VA Secretary Bob McDonald 15 months ago. He immediately ordered a technical work group formed to review IOM findings and original studies it relied on, as well as any new science relevant to Agent Orange ailments. The workgroup’s findings then were reviewed by a smaller strategic workgroup, followed by an internal task force of senior VA leaders.

“The entire VA response packet (with specific recommendations for action) from the IOM Task Force was delivered to the Office of the Secretary for consideration” on February 17, a senior official told us at the time.

Shulkin that month was confirmed as VA secretary. The previous 18 months he was VA undersecretary for health and would have been familiar with the Agent Orange packet. So, what has happened since then?

VA officials are lean on those details. A spokesman said VA continues to work “diligently to review the National Academy of Medicine report on potential new presumptions for Agent Orange and prepare the Secretary to make an informed decision. This includes everything from what the science is indicating, necessary regulations and a complete regulatory impact analysis. There is no delay in the decision process. Rather VA is taking appropriate time to ensure we are prepared to provide any benefits and services based on the Secretary’s decision.”

Past VA secretaries had rigid timetables for accepting or rejecting IOM findings. They also had to adhere to certain standards and procedures in determining if more diseases should be presumed service connected, and to explain in writing if they declined to add IOM-identified conditions to the presumptive list.

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But Congress allowed those provisions of the Agent Orange law to “sunset” Oct. 1, 2015, six months before IOM delivered its last report. Shulkin therefore is under no “statutory deadline nor required to do anything” with the IOM report, except whatever he promised veterans and Congress, said Bart Stichman, co-director of the National Veterans Legal Services Program, a non-profit that advocates for veterans and had lobbied to the Agent Orange provisions.

Many veterans know what’s at stake and have been pressing VA to add more diseases to the presumptive list. Also, thousands of sailors and Marines who served on ships in the territorial waters off Vietnam continue to press VA and the Congress to make Blue Water Navy veterans eligible for Agent Orange benefits.

“I’ve been doing everything I can to bug the hell out of Secretary Shulkin” on the latest IOM study, said Rick Weidman, executive director for policy and government affairs for Vietnam Veterans of America. Shulkin responds, Weidman said, that “he’s trying and it’s a process.”

Weidman said he suspects one big hurdle is the White House’s Office of Management and Budget which likely resists saddling VA with sharply higher disability pay obligations for high blood pressure, bladder cancer or stroke contracted by any veteran who stepped foot in Vietnam during the war.

OMB tried to block Shinseki in 2010 from adding three ailments, including heart disease, to the presumptive list. Shinseki went around OMB and appealed directly to then-President Barack Obama who sided with veterans, Weidman said. The Congressional Budget Office calculated that within three years of that decision, ischemic heart disease, Parkinson’s and leukemia accounted for 280,000 additional compensation claims and \$4.5 billion in retroactive disability payments.

Beside resistance from OMB, Weidman said Shulkin is counseled by senior staff who run post-deployment health services and study environmental hazards for VA and yet are skeptical of the science associating herbicide dioxins with higher incidence of various ailments. The Agent Orange “experts” they rely on, Weidman charged, haven’t published “one scientific paper in a reputable peer review journal. The whole crew should be fired and I’ve told the Secretary that.”

But is VA studying more than whether to add Agent Orange ailments? Anthony Principi, VA secretary in President George W. Bush’s first term, argues for more sweeping changes. Like Weidman, Principi served in combat in Vietnam but believes the Agent Orange law went too far, forcing VA secretaries to build out lists of presumptive illnesses based only on suggestive links to their wartime service, and ignoring the impact of unhealthy lifestyles, heredity and aging.

Interviewed Tuesday, Principi said it doesn’t seem fair that an elderly Vietnam veteran can begin receiving more disability compensation for heart disease at 75 or 80 than a young Marine receives who loses a leg fighting in Afghanistan.

Principi said he wants “common sense” changes to the Agent Orange law so that, for example, diseases on the presumptive list are deemed service connected only if diagnosed within 30 years of a veteran exiting Vietnam.

There’s legal precedent if Shulkin were to propose such a rule, perhaps while adding hypertension to the presumptive list, said lawyer Stichman. In 1994, he recalled, Congress allowed such a “manifestation rule” for Agent Orange-related respiratory cancers. By 2001, however, it rescinded it on complaints by veteran groups that there was no science to support limiting benefits in that way.

*In our spring newsletter our office had a preview of Little Minnesota in World War II with the book due for release for September, 2017. September is here and the book is out!!!!*



### **Preview of Little Minnesota in World War II**

In 2007, we began researching our first book, Little Minnesota: 100 Towns Around 100, and were astounded at the number of men who died in World War II from our state's tiniest towns. One hundred sixty-three men died in WWII from Little Minnesota in a heroic effort to break the tyranny of Adolph Hitler, Benito Mussolini and Emperor Hirohito. Several women from Little Minnesota served in the military but none died in war.

After the bombing of Pearl Harbor on December 7, 1941, thousands of young men and women answered President Franklin Delano Roosevelt's call to service. Little Minnesotans, the sons and daughters of farmers, loggers, shopkeepers, pastors and teachers, joined the Army, Navy, Air Force, Marines, National Guard and Merchant Marine. Two men joined the Royal Canadian Air Force after they were denied admittance to the United States Air Force due to their height. Little Minnesotans were pilots, crewmembers on bombers, paratroopers, glidermen, sailors, medics, infantrymen, mariners and truck drivers. Most had never traveled outside their small towns and now fought in unknown places: Kasserine Pass, Monte Cassino, Utah Beach, Omaha Beach and Sainte-Mere Eglise; the Hurtgen Forest and the Ardennes; and on the other side of the world, Bataan, Guadalcanal, Saipan, Peleliu, Iwo Jima, Tarawa and Okinawa. One man died on the Alaskan island of Attu, the only World War II battle fought on American soil. Four men were awarded the Bronze Medal, nine men were awarded the Silver Star and two men received the Distinguished Service Cross. All received the award no one wanted – the Purple Heart.

Little Minnesota in World War II tells the stories of 141 men who died in the war that changed the world forever. **Five of the men are from Polk County:** Captain Oscar Hanson and Pfc. Archie Olson who have roots in Trail, Pfc. Sigwald Anderson from Beltrami, and Tech.5 Palmer Ringstad and Pvt. Henry Kroll who grew up in Gully. Another 22 men who died in accidents or illness stateside are also listed in the book.

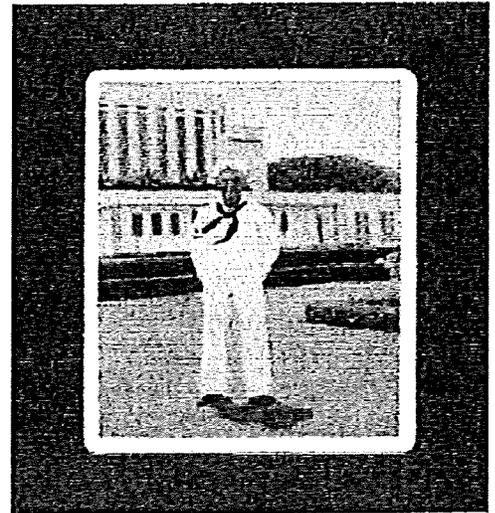
The families of the men made Little Minnesota in World War II possible. They researched family history, dug through old trunks in attics, and reconnected with relatives and family historians. Along the way, they rediscovered a treasured family member who gave his life over seventy years ago in a war that changed the world. Their stories and photos are heartbreakingly beautiful, and our thanks is unending.

Little Minnesota in World War II will be available at area bookstores, and currently is on Amazon for pre-order with a release date in September 2017.

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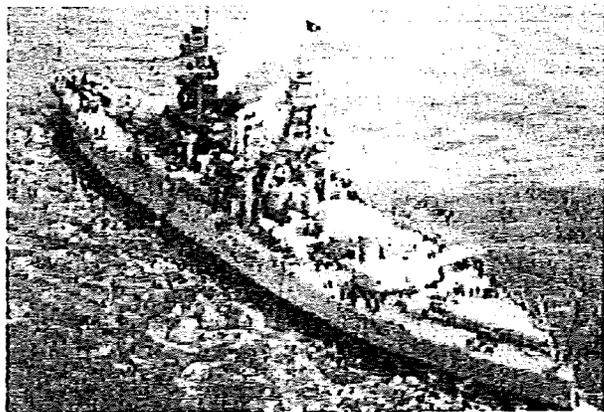
In their forthcoming book, *Little Minnesota in World War II*, historians Jill Johnson and Deane Johnson share the heroism and history of Little Minnesota's lost sons by recounting their service through their letters home, sharing family photos, and even by interviewing surviving relatives. This exhaustively researched book tells the story of 140 men who gave their lives for their country in some of the most famed battles of the war—including Pearl Harbor, Guadalcanal, D-Day, the Battle of the Bulge, and the Rhineland Campaign.

During the course of World War II, 17,867,000 men and women served in the U.S. Armed Forces; according to the National World War II Museum, 407,316 didn't survive the war. No state was left unscathed. Even the tiniest towns in Minnesota, with populations in the hundreds, suffered casualties. Get to know your hometown heroes through this firsthand history of World War II. Along the way, you'll meet members of the Greatest Generation who never made it home.



Gunner's Mate, Third Class John "Jack" Emery, U.S. Navy  
 April 26, 1919–December 7, 1941  
 Battle: The Bombing of Pearl Harbor

On December 8, 1941, Carl Emery answered the farmhouse telephone in Perley, Minnesota, population 246, to hear what the family feared most: His 23-year-old son John Emery, known as Jack, was missing and presumed dead following the Japanese attack on Pearl Harbor the day before.



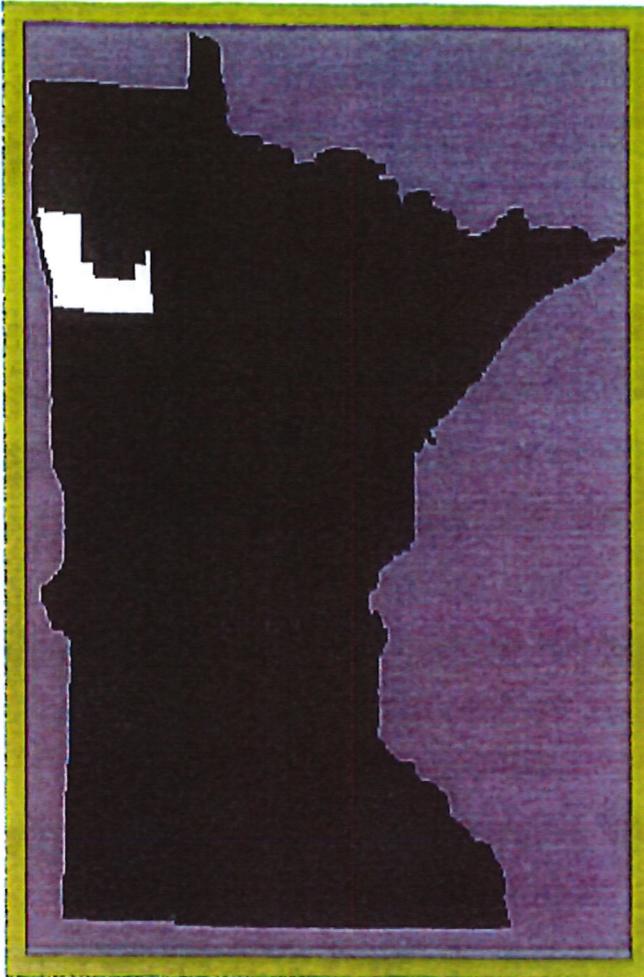
At 7:55 a.m., on a beautiful Sunday morning, December 7, 1941, 350 Japanese planes attacked Pearl Harbor and decimated the Pacific fleet. Gunner's Mate, Third Class John "Jack" Emery was on board the *USS Arizona* when a bomb penetrated the deck, detonating aircraft fuel and powder magazines. An excerpt from the "Battle Report" by Commander Walter Karig and Lieutenant Welbourn Kelley described the sinking of the *Arizona*:

*One bomb struck the forecastle. Another exploded on a faceplate on No. 4 turret aft. Still another ripped through the bridge and detonated on the boat deck. And then it was that*

*one of the attacking Japanese pilots realized the dive-bomber's dream. His bomb dropped exactly into the Arizona's stack, exploding in the boilers and setting off the vast amount of powder stored in the forward magazine.*

*The ship's bow seemed to leap out of the water, and her weather decks cracked open as fire and debris shot skyward. Plumes of oil and water showered topside, and fires enveloped the forward part of the ship. The fate of the Arizona, a 32,600-ton battleship within less than nine months of being declared over-age, was sealed in the first five minutes of the attack. The magazine blast broke the ship's back and she rapidly settled in the water. All told, the Arizona lost 47 officers and 1,057 men. Some hundred of the bodies were never removed from the sunken hulk of the ship.*

Only 335 men survived the attack; some were lucky enough to be on shore for duty or liberty, while others escaped the burning inferno. Among the 1177 crewmen killed were all 21 members of the *Arizona* band.



# Polk County Veterans Transportation Program

**TO SCHEDULE A RIDE:  
1-855-277-9787**

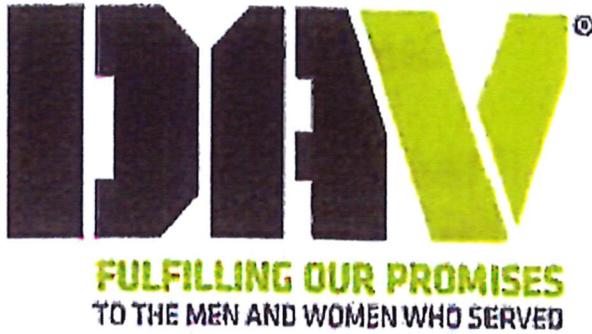


**FULFILLING OUR PROMISES  
TO THE MEN AND WOMEN WHO SERVED**

*DAV of Minnesota's mission is to "better the life of Minnesota's disabled Veterans and their families."*

*The DAV Polk County Transportation program is to further that mission. DAV Polk County Transportation is here to assist Veterans needing transportation to and from their VA appointments at the Fargo VA, Hibbing and Grand Forks CBOCs and also VA paid appointments at no expense to the Veteran.*

# Polk County Veterans Transportation Program



Consider being a volunteer driver or driving assistant!

We are always looking for people who are interested in volunteering as a driver or as a driving assistant. No need to be a Veteran! If you are interested in volunteering please contact

Polk CVSO:  
(218) 281-3066  
or  
Fargo VA Voluntary  
Services  
(701) 239-3700 ext 9-3395

# Thank You For Riding With Us!

- Schedule your transportation a minimum of a week in advance.  
(The earlier the better)
- Inform the dispatcher about special accommodations you may require or if anyone will be riding along with you
- Call if your appointment time/dates change or you no longer need a ride.

**Please call the NW DAV  
Transportation to make  
your transportation  
arrangements at:**

**855-277-9787**

## U.S. Wars, a Perspective

On page 8 of its January 27, 2016 issue, the Philadelphia Inquirer published a tabulation (a staff graphic) of the twelve wars that the United States has been involved in during its history. The tabulation included the name of the war, the calendar years during which it was fought, its duration (years and months), and the number of military fatalities sustained. The sources cited by the Inquirer for its data are the U.S. Department of Defense and the U.S. Department of Veterans Affairs. That data is included; the following is added: (1) national population (rounded) at the time of each war (2) fatalities per one-million population (3) fatalities per month (4) a quotient for each war representing the current U.S. population (est: 325-million) divided by the population at the time of the individual war. Fatalities per Million furnishes an approximation of the impact on the country. The Quotient can be used to quantify the national impact. For example, at the time of the Civil War, the national population was 31-million (rounded) according to the nearest (1860) U.S. Census. The present national population is 10.48 times what it was at the time of the Civil War. Fatalities suffered during the Civil War totaled 524,511. For our nation of 325-million (est.) population to suffer the same casualty impact as our nation endured during the Civil War, we would sustain 5,496,875 fatalities in four years (524,511 X 10.48).

<u>War</u>	<u>Years</u>	<u>Duration</u>	<u>Popul.</u>	<u>Fatalities</u>	<u>Per Mill.</u>	<u>Per Month</u>	<u>Quotient</u>
Revolution	1775-83	8-yrs, 5-mths	4-mill.	4,435	1,109	44	81.25
War of 1812	1812-15	2-yrs, 8-mths	7-mill.	2,260	322	71	46.43
Mex/Amer	1846-48	1-yr, 9-mths	23-mill.	13,283	577	632	14.13
Civil War	1861-65	4-years	31-mill.	524,511	16,920	10,927	10.48
Span/Amer	1898	8-months	76-mill.	2,446	32	305	4.28
WW-I	1917-18	1-yr, 7-mths	106-mill.	116,516	1,099	6,132	3.07
WW-II	1941-45	3-yrs, 9-mths	132-mill.	405,399	3,071	9,008	2.46
Korean	1950-53	3-yrs, 1-mth	151-mill.	36,574	242	988	2.15
Vietnam	1964-75	10-yrs, 9-mths	203-mill.	58,220	287	444	1.60
Persian Gulf	1990-91	7-months	249-mill.	383	1.54	55	1.31
Iraq	2003-11	8-yrs, 10-mth	309-mill.	4,484	14.52	42	1.05
Afghanistan	2001-	14-yrs, 4-mth	309-mill.	2,235	7.23	13	1.05

Leaving aside the carnage wreaked upon civilian populations, battles and wars inflict a spectrum of death and brutality upon the participants. On September 17, 1862, the Civil War battle of Antietam Creek (known by some as the Battle of Sharpsburg), named for a nearby creek in Pennsylvania, commenced about 5:30 a.m. and ended about 5:30 p.m. During those twelve hours, the bloodiest in our history, casualties totaled a tragic 26,134. According to Wikipoedia, 7,650 were killed or died from their wounds. That is more than the combined fatalities of our Persian Gulf, Iraq, and Afghanistan wars. It was absorbed by a population of 31-million.

## Care and Benefits for Veterans Strengthened by \$186.5 Billion VA Budget

**WASHINGTON** — In his fiscal year (FY) 2018 budget, President Trump is proposing \$186.5 billion for the Department of Veterans Affairs (VA). The budget request will ensure the nation's Veterans receive high-quality health care and timely access to benefits and services. The budget also supports the continued transformation of VA to rebuild the full trust of Veterans as a premier provider of choice for their services and benefits.

"The 2018 budget request reflects the strong commitment of the president to provide the services and benefits that our nation's Veterans have earned," said VA Secretary Dr. David J. Shulkin. "VA has made significant progress in improving its service to Veterans and their family members. We are fully committed to continuing the transformation across the department, so we can deliver the standards of performance our Veterans expect and deserve."

This year's budget request includes 82 legislative proposals that will help enable the department to better serve Veterans.

### Highlights From the President's 2018 Budget Request for VA

The FY 2018 budget includes \$82.1 billion in discretionary funding, largely for health care, and \$104.3 billion in mandatory funding for benefit programs, such as disability compensation and pensions, and for continuation of the Veterans Choice Program (Choice Program). The discretionary budget request is \$4.3 billion (5.5 percent) above the 2017 enacted level, including nearly \$3.3 billion in medical care collections from health insurers and Veteran copayments. The budget also requests \$74 billion, including collections, for the 2019 advance appropriations for medical care, an increase of \$1.7 billion and 2.4 percent above the 2018 medical care budget request. The request includes \$107.7 billion in 2019 mandatory advance appropriations for Compensation and Pensions; Readjustment Benefits; and Veterans Insurance and Indemnities benefits programs in the Veterans Benefits Administration (VBA).

### Health Care

With a total medical care budget of \$75.2 billion, including collections and new mandatory funding for the Choice Program, VA is positioned to continue expanding health-care services to over 7 million patients. Health care is being provided to more than 858,000 Veterans who served in Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn/Operation Inherent Resolve and Operation Freedom's Sentinel. Major categories funded within the health care budget are:

- \$13.2 billion for community care;
- \$8.8 billion for long-term care;
- \$8.4 billion for mental health care;
- \$1.7 billion for programs for homeless and at-risk Veterans;
- \$751 million for Hepatitis-C treatment;
- \$604 million for Caregivers' benefits; and
- \$316 million for treatment of traumatic brain injuries.

### Expanding Access

The president's budget ensures that care and other benefits are available to Veterans when and where they need them. Among the programs that will expand access under the proposed budget are:

- \$13.2 billion for community care, compared with \$11.2 billion in 2017, a 13 percent increase;
- \$505 million for gender-specific health-care services for women, an increase of 7 percent over the 2017 level;

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- \$862 million for the activation of new and enhanced health-care facilities;
- \$855 million for major and minor construction projects, including a new outpatient clinic at Livermore, California, and expansion of cemeteries at Calverton, New York; Sacramento, California; Bushnell, Florida; Phoenix, Arizona; Bridgeville, Pennsylvania; and Elwood, Illinois.
- it provides.

## **Disability Compensation Claims Backlog and Appeals Reform**

VBA has continued aggressive efforts aimed at bringing down the disability compensation claims backlog, completing a record-breaking 1.3 million claims in 2016 and reducing the claims backlog by 88 percent, cumulatively, from a peak of 611,000 claims in March 2013 to 71,690 on Sept. 30, 2016. In 2016, Veterans waited, on average, 203 fewer days for a decision than four years ago. In 2018, VBA is projected to complete 1.4 million claims, and the number of claims pending longer than 125 days is anticipated to remain at about 70 thousand claims. This pending claims status may change as the volume of claims receipts increases or decreases, and as claims processing becomes more efficient. VBA's success in reducing the rating claims backlog has also resulted in a growing appeals inventory. From 2010 through 2016, VBA completed more than 1 million disability compensation rating claims annually. Approximately 11 percent to 12 percent of VBA decisions are appealed, with nearly half of those being formally appealed to the Board of Veterans' Appeals (the Board). While the appeal rate has remained steady over the past two decades, the appeals volume has increased proportionately to the increase in claims decisions. The average processing time for resolving appeals in 2016 was three years. For those appeals that reached the board, average processing time was six years, with thousands of Veterans waiting much longer.

VA has worked with Congress, Veterans Service Organizations (VSOs) and other stakeholders to develop a legislative proposal to reform the appeals process. The appeals process under current law is ineffective and confusing, and Veterans wait much too long for a decision on appeal. The new process will: 1) establish options for Veterans, 2) provide early resolution and improved notifications as to best options, 3) eliminate the perpetual churn of appeals inherent to the existing process, 4) provide Veterans feedback loops to VBA, and 5) improve transparency of the process by clearly defining the roles of VBA and the board throughout the appeals process.

Appeals reform is one of VA's top legislative priorities, and the department will continue to work with Congress and the VSOs to ensure Veterans receive the best possible service.

## **Improving the Veteran Experience**

National Call Centers (NCCs): In 2018, VA expects the NCCs to sustain the average speed of answering in 30 seconds or less, while maintaining exceptional customer satisfaction.

National Work Queue (NWQ): In 2017, disability compensation claims are moving through the process faster than before implementation of the NWQ process — on average, claims are ready for decision 14 days faster. In 2018, NWQ will be expanded to other key VBA priorities such as the nonrating and appeals workload distribution.

Veterans Claim Intake Program (VCIP)/Centralized Mail: By the end of 2018, VCIP will relocate the entire file banks of remaining Regional Offices and convert the documents electronically, an integral element of VBA's comprehensive transformation and modernization strategy.

In 2018, Centralized Mail will build upon sustained progress in disability compensation and expand to additional stakeholders, to include the Board of Veteran Appeals, Vocational Rehabilitation and Employment, Fiduciary Service, Support Services Division, Debt Management Center (DMC) and Loan Guaranty.

## Veterans Homelessness

The budget requests \$1.7 billion for programs to prevent or reduce Veteran homelessness, including:

- \$320 million for Supportive Services for Veteran Families (SSVF) to promote housing stability;
- \$543 million for the HUD-VASH program, wherein VA provides case management services for at-risk Veterans and their families and the Department of Housing and Urban Development (HUD) provides permanent housing through its Housing Choice Voucher program; and
- \$257 million in grant and per diem payments that support transitional housing provided by community-based organizations.

## Veterans Choice Program—Community Care

VA is requesting a total of \$13.2 billion in 2018 for Veterans Community Care. This consists of a request for \$9.7 billion in discretionary funding for the Medical Community Care account, plus an additional \$2.9 billion in new mandatory budget authority for the Choice Program. When combined with \$626 million in estimated start-of-year unobligated balances from the original Choice Program appropriation, the total Community Care funding level is \$13.2 billion in 2018. The budget also requests \$3.5 billion in mandatory budget authority in 2019 for the Choice Program. This additional funding will allow VA to continue increasing Veterans' access to health-care services by allowing them to choose VA direct care or community care.

## Other Key Services for Veterans

- \$306 million to administer VA's system of 136 national cemeteries, including funding for the activation of three new cemeteries that will open in 2018 and 2019. Funds are also included to raise, realign, and clean headstones to ensure VA national cemeteries are maintained as shrines.
- \$4.1 billion for information technology (IT), including investments to strengthen cybersecurity, modernize Veterans' electronic health records, improve Veterans' access to benefits, and enhance the IT infrastructure; and
- \$135 million for state cemetery grants and state extended-care grants.

## Enhanced Oversight of VA's Programs

The 2018 budget requests \$159.6 million for the Office of Inspector General (OIG) to enhance oversight and assist the OIG in fulfilling its statutory mission of making recommendations that will help VA improve the care and services

### IMPORTANT MILITARY DATES

October 13-Navy Birthday (Laurie's Birthdate also)

October 26-National Day of the Deployed. A day set aside to honor all of the brave men and woman who have been deployed and are sacrificing or have sacrificed, their lives to fight for our country and acknowledges their families that they are separated from.

November 10-Marine Corps Birthday

November 11-Veterans Day

December 1-Civil Air Patrol Birthday

December 7-Pearl Harbor Day

December 13-National Guard Birthday

December 16-National Wreaths Across America



## THE NEW FOREVER GI BILL—WHAT IT MEANS FOR YOU

The GI Bill for you will be undergoing major changes beginning next year, but for the most part only new service-members will see any of those changes.

The Harry W. Colmery Veterans Educational Assistance Act of 2017, named for the American Legion member who wrote the initial World War II-era GI Bill is also known as the “Forever GI Bill” because one thing it does is remove the time limit veterans have to use their GI Bill in. Recent veterans and new military members will be able to use their GI Bill forever.

Let’s look at the details of everything that the new GI Bill does.

### LIFTS 15-YEAR TIME LIMIT TO USE GI BILL

The legislation eliminates the current 15-year time limit on use of the Post-9/11 GI Bill for those who were discharged on or after Jan. 1, 2013. This means that if you are a recent veteran you have forever to use up all your GI Bill benefit!

This removal of the 15 year time limit also applies to surviving dependents using the Fry Scholarship. Surviving spouses and children who first became eligible after Jan. 1, 2013 will have no time limit to use their Fry Scholarship benefits.

### MORE GUARD, RESERVE MEMBERS NOW ELIGIBLE

Reservists called to active duty under sections 12304(a) (when a governor requests federal assistance in responding to a major disaster or emergency), or 12304 (b) (when the DoD mobilizes reservists in support of combatant command) are now eligible. Previously, only reservists called to active duty by presidential order as a result of a national emergency were eligible. This applies to all reservists mobilized after Aug. 1, 2009, but reservists can receive payment only for classes that start after Aug. 1, 2018. Reservists who were receiving **REAP** payments may now be eligible for the Post-9/11 GI Bill. Currently, there are less than 4,000 people eligible for this benefit.

### EXPANDS BENEFIT TO ALL PURPLE HEART RECIPIENTS

Anyone who received a Purple Heart will get the full GI Bill amount no matter how long they served on active duty.

### MAKES CHANGES TO DEPENDENTS’ BENEFITS

Fry Scholarship/ All Fry Scholarship recipients are now eligible for the **Yellow Ribbon Program**.

**Dependents’ Education Assistance (DEA)** monthly payments will increase by about 50 percent, but the maximum number of months that a dependent can get DEA decreases from 45 to 36. This is effective August 1, 2018.

### TRANSFERRED BENEFITS CHANGES

Some changes will be made to the rules about transferring the Post-9/11 GI Bill to make it easier to reallocate transferred benefits if the sponsor or dependent passes away.

### RESTORES BENEFITS IF COLLEGE CLOSSES

If you are attending a school that closes or loses accreditation and you don’t get credit for the classes you took, your GI Bill that you used for those classes will be given back to you. This is effective for any school closings after January 1, 2015.

### SOME MINOR PAYMENT DIFFERENCES

Reimbursement for Testing Fees: Under the new law, you will normally be charged less GI Bill entitlement for taking standardized tests such as CLEP, GMAT, etc.

Benefit Tiers: Currently, your GI Bill benefits are based on the amount of active-duty time you have. If you have less than 36 months active duty, you may get less than the full amount of GI Bill benefits.

(Continued on Page 16)

The new law makes some minor changes to this-specifically people that serve at least 90 days but less than 6 months on active duty will see their benefits increase from 40 % to 50 % of the maximum amount payable, people who serve at least 6 months but less than 12 months will see their benefits increase from 50% to 60% of the maximum amount payable. This should result in at least \$2,000 more annually in tuition for most people in those benefit tiers.

### STEM CLASSES

*STEM Scholarship*-There is a big push these days to get veterans enrolled in STEM (Science, Technology, Engineering and Mathematics) programs. This new GI Bill creates the "Edith Nourse Rogers Scholarship".

This program will pay veterans up to \$30,000 if they are enrolled in a STEM program, have used up all their GI Bill benefits and have at least 60 semester/90 quarter hours credit toward a STEM degree. It also will pay those who already have a STEM degree and are working on a teaching certification. This is effective Aug. 1, 2018.

### HIGH TECHNOLOGY PILOT PROGRAM

The new law also creates a High technology Pilot Program that covers the full cost of high technology training not necessarily offered by a school. The details are sketchy, but the law says it is for people otherwise eligible under the GI Bill. Trainees will get the normal monthly housing allowance payments and the VA has to monitor the companies giving the training to ensure the training results in gainful employment. This isn't scheduled to start until spring 2019.

### MINOR HOUSING ALLOWANCE CHANGES

Housing allowance will be based on the campus location where you attend classes, not necessarily the main campus. Reservists who are mobilized in the middle of a month will have their GI Bill housing allowance prorated. The previous law would stop the GI Bill housing allowance for the entire month if you were called up for at least one day during any month of school attendance and no matter what day of the month you were mobilized on.

### NEW GI BILL RECIPIENTS WILL GET A SMALLER HOUSING ALLOWANCE

There was a little-noticed provision in the 2015 military budget that slows the rate of increase in Basic Allowance for Housing (BAH) so that active-duty BAH no longer pays the full amount of the housing cost. As a result of that law, active-duty BAH is being reduced 1 % every year from 2015 to 2019 so that by 2020 BAH will only cover 95% of a military member's housing cost. The VA's Monthly Housing Allowance, which is paid to GI Bill recipients, wasn't affected by the earlier legislation. This new law changes that. Effective January 1, 2018, the GI Bill housing allowance will also decrease. This will mean that anyone eligible for the GI Bill after January 2018 will receive an average of \$100 a month less housing allowance. This affects only those who begin getting GI Bill benefits after January 1, 2018. If you are currently getting GI Bill benefits, you will see no changes. As you can see the proposed changes will impact not only veterans but their families as well. *For a detailed explanation on how these changes would affect military and veteran's dependents check out Military.com's Spousebuzz website.*

### WHAT THIS MEANS FOR YOU

- 1) If you are a veteran who was discharged before January 1, 2013 you will see no changes, you still have 15 years to use your GI Bill and your housing allowance will remain unchanged.
- 2) If you are a veteran who was discharged **AFTER** January 1, 2013, you now have forever to use our GI Bill benefits. Your housing allowance will also remain at the higher rate.
- 3) If you are on active duty, have never used your GI Bill and will be discharged on or after January 1, 2018, you have forever to use your GI Bill, **BUT** your housing allowance will be at the lower rate (approximately \$100 less per month), **UNLESS** you start using your GI Bill before the end of the year.

So, if you are currently on active duty **OR** have been discharged after January 1, 2013 **AND** you haven't used your GI Bill yet, **USE IT!** You are in the small group of people who get the best of both worlds! You will no longer have a time limit to use your GI Bill, and you will get at least \$1,000 more a year than if you wait until after January 1, 2018, to begin using your GI Bill.

You should see a larger retired or VA disability increase than last year thanks to the all the hurricanes. But what do hurricanes have to do with COLA? Here's the connection.

## Military Retired Pay and COLA

Most government payments see a [Cost of Living Allowance](#) (COLA) every year. The COLA makes sure that your payments keep up with inflation. These payments include:

### [Military retirement](#)

- Civil service retirement
- Social security

### [VA disability compensation](#)

The COLA is based on another government measurement, the Consumer Price Index (CPI).

## The CPI

The CPI is based on what is known as a "market basket" of goods that all households purchase. Every month, the good folks at the Department of Labor measure the price of about 80,000 items at various locations nationwide. This month's prices are compared to last month's prices, averaged together and voila, the CPI is created.

## Hurricanes?

Well, along with salad dressing, scotch, Subarus and slippers, the price of gasoline is included in this monthly measurement. If you've been paying attention, you know that after [Hurricane Harvey](#) hit Texas the price of gasoline shot up by about 15 percent at the pump. According to the government, gasoline makes up about 4 percent of the average household's monthly spending. Since most people spent more per gallon for gasoline in September than they did in August the CPI will probably increase for that time period.

## How Does All This Affect Your Payments?

Each year, the government takes the CPI average for the third quarter (July to September) and compares it to the same period for previous year. If prices increase then the COLA will match that increase.

Last year there was a 0.3 percent increase in retired pay based on this formula, largely because the price of gasoline went down during the third quarter. In 2015, there was no increase in [retired pay](#) at all due to big drops in gasoline prices back then.

But the experts are saying that this year's COLA may be much better. As of August, the CPI was 1.9 percent higher than last year. The effects of Hurricanes Harvey and Irma driving up gasoline and food prices may further drive up the CPI.

The result? Some experts estimate that the COLA may be 1.8 – 2.3 percent. Of course, we won't know until the government makes their official announcement on October 13.

## What This Means To Your Monthly Payment

An increase sounds good, right? Well don't spend it all at once, a 1.8 percent COLA on a \$2,000 monthly check would be \$36, while a 2.3 percent increase would be \$46.

That's just about enough to fill your tank with gas.

# VA Expands Transparency Efforts, Detailing Secretary's Travel

## *Becomes First Agency to Post Information on Secretary's Official Travel, Use of Private and Government Aircraft*

**WASHINGTON** — Today, U.S. Secretary of Veterans Affairs Dr. David J. Shulkin announced that the Department of Veterans Affairs (VA) is taking yet another step on transparency on its official actions, this time in the area of disclosing official travel by the Secretary.

Beginning today, the department is making public a list of Secretary Shulkin's official travel taken since Jan. 20. This information is posted at [www.va.gov/opa/secvatravel](http://www.va.gov/opa/secvatravel), and will be updated within five business days after the conclusion of an official trip.

The website lists:

- Use of private aircraft by the Secretary (none to date)
- Use of government aircraft by the Secretary
- Itineraries (key events) of official international trips by the Secretary
- Itineraries (key events) of official domestic trips by the Secretary (to be added by Oct. 15).

Secretary Shulkin pointed to the move as the fourth major step in long-sought transparency and accountability actions at VA, and noted that VA is once again the first federal agency to make such data public.

Earlier this year, under the Secretary's direction, the VA began listing:

- Wait times and quality/satisfaction data at all VA medical centers (updated weekly)
- Adverse employee actions (updated weekly)
- Employee settlements (updated quarterly).

"Under this Administration, VA is committed to becoming the most transparent organization in government, and I'm pleased to take another step in that direction with this move," Secretary Shulkin said. "Veterans and taxpayers have a right to know about my official travel as Secretary, and posting this information online for all to see will do just that."

The information will also include what VA staff and spouses accompany him on each trip, if any, but for security reasons, members of the Secretary's security detail will not be listed by name or number.



**A LITTLE GIRL** asked her father, "Daddy, do all fairy tales begin with 'Once upon a time'?" He replied, "No, there's a whole series of fairy tales that begin with 'If elected, I promise...'"

**A JUDGE** asked a defendant, "Why did you steal the car?" "I had to get to work," the defendant replied. "Why didn't you take the bus?" "I don't have a driver's license for the bus."

"Dude, I never said I wanted to work. I just said I wanted a job."

VA (<http://www.va.gov/>) » Health Care (<http://www.va.gov/health>) » VHA Office of Community Care (</COMMUNITYCARE/Index.asp>) » Information for Payers ([/COMMUNITYCARE/revenue\\_ops/payer\\_info.asp](/COMMUNITYCARE/revenue_ops/payer_info.asp)) » Billing

# VHA Office of Community Care

## MENU

### Billing

Veterans enrolled in the Veterans Choice Program (VCP) can work directly with the Department of Veterans Affairs (VA) to resolve debt collection or adverse credit reporting resulting from inappropriate or delayed billing by calling the Community Care Call Center at 877-881-7618 (Monday–Friday, 9 a.m. to 5 p.m., EST). For general VCP billing questions, Veterans can call 866-606-8198 (Monday–Friday, 8 a.m. to 7 p.m., EST). Additional details can be found on

**Fact Sheet 20-08: VA Community Care – Choice Program Billing Issues**  
([/COMMUNITYCARE/docs/pubfiles/factsheets/FactSheet\\_20-08.pdf](/COMMUNITYCARE/docs/pubfiles/factsheets/FactSheet_20-08.pdf))

For regular billing outside the Veterans Choice Program, VA bills eligible Veterans' private health insurance for nonservice-connected conditions which can be used to offset copayments that VA may charge.

The following options are available for Veterans who have a question about their VA bill or VA patient statement:

- **In person:** A Veteran can speak directly with facility revenue staff located in every VA Medical Center (VAMC) or at an off-site location. To find out where the billing or facility revenue office is located, Veterans may inquire at the VAMC information desk, ask the operator, or call their respective VAMC information line. Veterans who wish to make a payment on their VA account in person may do so at their local VAMC agent cashier's office.
- **By phone:** Veterans may call 866-400-1238 (Monday–Friday, 8 a.m. to 8 p.m., EST) for billing assistance. Customer service representatives have full access to Veteran accounts.
- **Online:** Veterans may also pay their VA account balance by credit card or check at <https://www.pay.gov/> (<http://www.pay.gov/>).
- **By mail:** Veterans may pay their bill by sending their payment to the address on their patient statement.

# VA Selects Providers for Dental Insurance Program

**WASHINGTON** — Today, the Department of Veterans Affairs (VA) announced that it has selected Delta Dental of California and MetLife to once again offer private dental insurance plans as part of the VA Dental Insurance Program (VADIP).

The program was extended until Dec. 31, 2021, by the VA Dental Insurance Reauthorization Act of 2016.

“It is important to provide this care to eligible Veterans, especially those who need lower-cost insurance,” said VA Secretary Dr. David J. Shulkin. “VADIP underscores our commitment to support America’s Veterans and their family members.”

Veterans enrolled in the VA health-care system and beneficiaries of the Civilian Health and Medical Program of the VA (CHAMPVA) can enroll in the program beginning Nov. 15, 2017, for coverage to start Dec. 1, 2017.

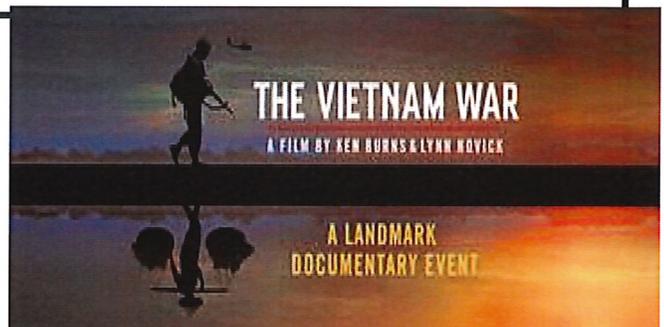
VADIP offers eligible individuals the opportunity to purchase discounted dental insurance coverage, including diagnostic services, preventive services, endodontic and other restorative services, surgical services and emergency services.

Individuals who enroll in one of the dental insurance plans will pay the entire premium in addition to the full cost of any copayments. Enrollment is voluntary and does not affect eligibility for VA outpatient dental services and treatment.

The plans are available to eligible individuals in the United States, the District of Columbia, Puerto Rico, Guam, the U.S. Virgin Islands, American Samoa and the Commonwealth of the Northern Mariana Islands.

Delta Dental and MetLife previously offered insurance plans as part of the three-year VADIP pilot program. Coverage under the VADIP pilot began Jan. 1, 2013, and more than 115,000 Veterans and CHAMPVA beneficiaries enrolled in the program before it expired in January 2017. Individuals who enrolled in a plan during the pilot period must select and enroll in one of the new plans offered by Delta Dental or MetLife. While the insurance providers will remain the same, plan options, fees and other

## The Vietnam War on PBS



MDVA is a proud [local sponsor of the PBS documentary “The Vietnam War”](#) directed by Ken Burns and Lynn Novick.

The Vietnam War is a ten-part, 18-hour documentary film series directed by Ken Burns and Lynn Novick that will air on PBS starting on Sunday September, September 17. In an immersive 360-degree narrative, Burns and Novick tell the epic story of the Vietnam War as it has never before been told on film. Six years in the making, the series brings the war and the chaotic epoch it encompassed viscerally to life.

## DAV SPONSERED TRIPS

### Lake of the Woods Ice Fishing Trip 1

Start Date: Jan 15, 2018 End Date: Jan 17, 2018 09:00 AM to 09:00 AM Baudette MN



### LAKE OF THE WOODS

We try to make our ice fishing trips as enjoyable and relaxing as possible. On our trips we invite you to come sleep out on the ice with us in a nice heated ice house with plenty of room to move about. Once we get out on the ice everything will be taken care of for you. All of your fish will be cleaned and all meals cooked and brought right to you inside your house. Each house has a bathroom attached to it for easy access and less time away from your hole which means more time fishing and relaxing. Make sure to apply and check out our ice fishing trips.

This trip is cost free for Veterans other than transportation to the event and is open for all Veterans.

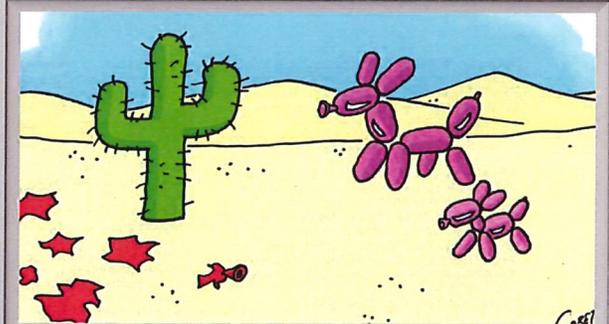
Our lake of the wood trips are usually is held in January near the town of Baudette, MN. This trip is a great experience to get out on the hard water and catch some walleyes. We will have plenty of time to fish and the stories will fly. We all make new friendships that will last a lifetime. These trips are truly fun had by all. Make sure to check out our events page to find out when the trip will take place and to apply. (Application attached-3 pages)

### Lake of the Woods Ice Fishing Trip 2

Start Date: Jan 17, 2018 End Date: Jan 19, 2018 12:00 AM to 11:59 PM Baudette MN



"Well of course you have shortness of breath."



"Son, we must never drink from the forbidden plant."