



Idaho Division of
**VETERANS
SERVICES**

*Caring for
America's
Heroes*

BULLETIN

**July
2016**

STATE OF IDAHO

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GOVERNOR

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

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



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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**



FROM BILL'S DESK

I hope everyone is having a safe and enjoyable summer so far! Without further delay, here are some of things going on in the VA that will be affecting our veteran benefits.

The Boise VA Regional Office is now working within the National Work Queue. Over half of Boise VA Regional Office's completed claims are Idaho-submitted claims, and everything seems to be working well in the system.

Nationally, there are currently 450,000 appeals pending within the VA, with nearly 60,000 needing a hearing with a Board of Veterans Appeals judge. Approximately 29% of all appeals are granted by the Board of Veterans Appeals. Much of the backlog of appeals was created as the VA focused on reducing the backlog of claims and if nothing is changed, it is estimated that within the next 10 years, pending appeals could increase to upwards of two million pending. All the major Veteran Service Organizations have been working with the VA with ways to reduce the number of pending appeals and to reduce the amount of time for appeal adjudication. There is currently a proposal in front of Congress to approve a new "3-Lane Appeals System" to include a better Notification Letter from the VA that discusses why they approved claimed contentions and why they may have denied contentions. If approved, the new system would allow the claimant the option of a "Difference of Opinion Review" using the same evidence of record, the "New Evidence" option which would allow the claimant to submit new evidence to support the claim, or a "Board Review" option which would allow the claimant to send the appeal to the Board of Veterans Appeals.

The VA Central Office has determined that nearly 25,000 claims for Traumatic Brain Injury (TBI) were improperly examined between 2007 and 2015. The VA has determined that initial exams for TBI must be conducted by one of the following if a diagnosis is not already of record in a claim for service connection: psychiatrist, physiatrist, neurosurgeon, or a neurologist. The VA intends on notifying all of veterans affected by this. At that time, those notified can request a new TBI exam with the proper specialist and submit additional evidence if they think it will assist the claim. Notification letters from the VA should begin to go out shortly.

Through a data use agreement between the Department of Defense and the VA, National Guard and Reserve units now have the ability to see if a Drilling Reservist/Guardsman has a VA disability rating and are permitted to ask the servicemember what the service connected disability is.

The VA has improved the process of reinstating VA benefits following mobilization to active duty, which used to take months to reinstate. If a Guardsmen/Reservist provides their DD-214 following a demobilization and requests their previous VA benefits be reinstated, the process will now be completed within days. If a previously rated condition has worsened due to the mobilization or a new condition exists, a new claim will have to be submitted after demobilization, but it will not impede the reinstatement of the previous VA benefits.

The VA is working with DFAS to improve the timeliness in processing Concurrent Receipt of Retired Pay (CRDP). Currently, if a 20+ year military retiree is awarded disability compensation of 50% or higher, they notify DFAS who proceeds to process the award for concurrent receipt purposes. The VA then withholds the retroactive amount owed to the veteran until the process works its way through the system, which can take 13 months or longer. Once the new system comes online, CRDP payments will be begin at the same time the veteran is notified of the new rating decision. This will not affect Combat Related Special Compensation (CRSC), as it is awarded by the branch of service the veteran belonged to when they incurred injuries that were related to combat or training for combat.

As mentioned last quarter, VA drill pay recoupment for traditional Guard/Reserve pay will now create a debt with the VA's Debt Management Center in St Paul, MN and the veteran will have the ability to work out a repayment arrangements to the VA.

On March 2, 2016, the VA released a final regulation which expanded the persons eligible to apply for a headstone or marker for a veteran's grave. As of April 1, 2016, representatives of Congressionally Chartered Veteran Service Organizations and State and County Veteran Service Officers may apply for headstones or markers for veteran's graves. Also, the "next of kin" designation was removed and additional family members of veterans, including domestic partners and lineal and collateral descendants now qualify as applicants. Fore veterans who served before 1917, any individual may now apply for a headstone or marker for the veteran's grave.

This year's County and Post Veteran Service Officer Training will take place at the Riverside Hotel in Boise August 3-5, 2016. This year's Women's Veterans Conference will take place on Saturday, October 22, 2016, at the Riverside Hotel in Boise.

I look forward to seeing many of you at the different department conventions and at the County and Post Service Officer Training Conference. Stay safe and stay cool!

VETERANS SERVICE OFFICER TRAINING CONFERENCE INVITATIONS WENT OUT

The Idaho Division of Veterans Services 2016 Veterans Service Officer Training Conference is scheduled at the Riverside Hotel in Boise on August 3, 4, and 5, 2016. Invitations and a tentative agenda went out in early May, so if you didn't receive one and would like to attend, please contact Jennel Binsky at jennel.binsky@veterans.idaho.gov or (208) 780-1380.

Women Veterans Past and Present
Healthy Living, Healing, and Informing

Women Veterans Conference

October 22, 2016
Riverside Hotel
2900 W Chinden Blvd
Boise ID 83714

Conference is free and lunch will be provided

Register:

www.eventbrite.com/e/idaho-women-veterans-conference-tickets-25437035859

Or visit our Facebook Page

www.facebook.com/IdahoWomenVeteransConference/

***There will be a Wine Tasting Event from 7-9 the night before
At the Telaya Winery which is next door to the Riverside***



VA ANNOUNCES TELEMENTAL HEALTH CLINICAL RESOURCE CENTERS

News Release May 16, 2016

As the Department of Veterans Affairs (VA) works to improve veterans' access to health care, its telehealth services play an integral role in that process, said Dr. David J. Shulkin, the VA's Under Secretary for Health. Dr. Shulkin spoke to members of the American Telemedicine Association attending the group's 2016 conference in Minneapolis, where he also announced the establishment of five VA Mental Health Telehealth Clinical Resource Centers to provide enhanced mental health access and services to veterans in remote locations. The VA is recognized as a world leader in the development of telehealth services that are now mission critical to the future direction of VA care to veterans. The VA uses health informatics, disease management, care and case management, and telehealth technologies to facilitate access to care and improve the health of veterans. The VA currently services more than 677,000 veterans through telehealth; that amounts to approximately 12% of the 5.6 million veterans who receive healthcare from the VA.

The VA's Mental Health Telemedicine Clinical Resource Centers will provide veterans, particularly those living in rural areas, with rapid access to mental health services where local barriers exist. This expanded effort will help close the gap in access to mental health care, in particular, in those traditionally underserved communities. "We are in the midst of the largest transformation in the history of VA with MyVA, which means we are reorienting what we do around the needs of our veterans and providing care when, how, and where they want to receive that care," said Dr. Shulkin. "These mental health telehealth resource centers will provide our veterans in underserved areas the expert mental health providers they may not otherwise be able to obtain locally. We know that we are doing more in telehealth than any other healthcare system and connecting mental health providers to areas hard to recruit and retain."

The Mental Health Telehealth Clinical Resource Centers will be located in Charleston, SC; Salt Lake City, UT; Pittsburgh, PA; and a consortium of facilities in Boise, ID; Seattle, WA; and Portland, OR. The fifth facility, already operational in West Haven, CT, is a specialty hub focused on the most severe and complex mental health issues, such as chronic depression and bipolar disorder. The others are expected to be available in the summer, with the priority given to VA medical facilities in urgent need of additional mental health providers.

Chief Telehealth modalities include Clinical Video Telehealth (CVT), the use of real-time interactive video conferencing, sometimes with supportive peripheral technologies, to assess, treat, and provide care to a patient remotely. Home Telehealth (HT), a program into which veterans with chronic conditions (e.g., diabetes, congestive heart failure, etc.) are enrolled that applies care and case management principles to coordinate care using health informatics, disease management, and technologies such as in-home and mobile monitoring, messaging and/or video technologies; and Store and Forward Telehealth (SFT), which uses technologies to asynchronously acquire and store clinical information (e.g. data, image, sound and video) that is then forwarded to or retrieved by a VA provider at another VA location for clinical evaluation.

Since fiscal year 2003, the VA has provided veterans with access to mental health services through more than 1.8 million telemental health encounters. The VA's national Store-and-Forward Telehealth programs operationalize this definition to cover services that provide this care using a clinical consult pathway and a defined information technology platform to communicate the event/encounter between providers, as well as enabling documentation of the event/encounter and the associated clinical evaluation within the patient record.

VA Telehealth Services are available for more than 45 specialty areas of care. Top areas for VA telehealth services are mental health, rehabilitation including audiology and speech pathology, retinal imaging, primary care, weight management, cardiology, and dermatology.

VA HEALTH CARE OFFICIAL ANNOUNCES INITIATIVES & PROGRESS MADE TO IMPROVE ACCESS TO CARE

News Release April 8, 2016

The Department of Veterans Affairs' (VA) top health care official announced progress and new steps the VA is taking to improve veteran's access to health care. Dr. David J. Shulkin, Under Secretary for Health, announced the measures during a briefing to a group of more than 100 journalists attending the Association of Health Care Journalists' conference April 8th in Cleveland, OH. "We are working to rebuild the trust of the American public and more importantly the trust of the veterans whom we are proud to serve," said Dr. Shulkin. "We are taking action and are seeing the results. We are serious about our work to improve access to health care for our nation's veterans. We want them to know that this is a new VA." During the briefing, Dr Shulkin discussed a new initiative, MyVA Access. MyVA Access represents a major shift for the VA by putting veterans more in control of how they receive their health care. It is a top priority for the VA's Veterans Health Administration (VHA).

MyVA Access is a declaration from VHA employees to the veterans they care for; it is a call to action and the reaffirmation of the core mission to provide quality care to veterans, and to offer that care as soon as possible to veterans how and where they desire to receive that care. The initiative ensures that the entire VA health care system is engaged in the transformation of the VA into a veteran-centered service organization, incorporating aspirational goals such as same day

access to mental health and primary care services for veterans when it is medically necessary. At present, 34 VA facilities offer same-day appointments, and as a practicing physician, Dr. Shulkin currently sees veterans needing same-day appointments at the VA Medical Center in Manhattan. The VA is hoping to be able to offer same day appointments when it is medically necessary at all of its medical centers by the end of 2016.

In addition, Dr. Shulkin introduced a new smart phone app called the Veteran Appointment Request App. This app allows veterans to view, schedule, and cancel primary care and mental health appointments, as well as track the status of the appointment request and review upcoming appointments. It is currently available in 10 locations and has received positive feedback from the vast majority of veterans using the app. The VA expects to make the app available to all veterans by early 2017.

Other efforts underway include a website enhancement that will allow veterans to check wait times in real time where ever they live – this includes new and existing patients and a new, easy-to-use scheduling software program. The new program is being piloted in 10 sites and is expected to reduce scheduling errors and enhance the VA’s ability to measure and track supply, demand, and usage. MyVA Access is part of MyVA, introduced in 2014 by VA Secretary Robert McDonald following one of the most challenging times in the history of the VA. MyVA is centered around the needs of veterans by putting them first in everything the VA does. Since that time, the VA has made significant progress in addition to the new initiatives announced by Dr. Shulkin.

Among the health care progress made:

- Nationally, the VA completed more than 57.36 million appointments from March 1, 2015, through February 29, 2016. This represents an increase of 1.6 million more appointments than were completed during the same time period in 2014/2015.
- VHA and Choice contractors created over 3 million authorizations for veterans to receive care in the private sector from February 1, 2015, through January 31, 2016. This represents a 12% increase in authorizations when compared to the same period in 2014/2015.
- From FY 2014 to FY 2015, Community Care appointments increased approximately 20% from 17.7 million in FY 2014 to 21.3 million in FY 2015.
- The VA completed 96.46% of appointments in February 2016 within 30 days of clinically indicated or veteran’s preferred date.
- In FY 2015, the VA activated 2.2 million square feet of space for clinical, mental health, long-term care, and associated support facilities to care for veterans.
- The VA held two Access Stand Downs, focusing on patients with the most urgent health care needs first. During a nationwide Access Stand Down that took place on February 27th, the one-day event resulted in the VA reviewing the records of more than 80,000 veterans to get those waiting for urgent care off wait lists; 93 % of veterans waiting for urgent care were contacted, with many receiving earlier appointments.
- The VA increased its total clinical work (direct patient care) by 10% over the last two years as measured by private sector standards (relative value units). This increase translates to roughly 20 million additional provider hours of care for our veterans.
- The VA is also working to increase clinical staff, add space and locations in areas where demand is increasing, and extending clinic hours into nights and weekends, all of which have helped increase access to care even as demand for services increases.
- The VA is addressing critical components necessary for the delivery of a seamless community care experience by consolidating all purchased care programs into one Veterans Choice Program (New VCP). The New VCP will clarify eligibility requirements, strengthen the VA’s high-performing network, streamline clinical and administrative processes, and implement a care coordination model across the continuum of care.
- VHA offers an extensive community provider network of over 257,000 providers through the PC3/Choice Programs and more are joining each month.
- VA Telehealth services are critical to expanding access to VA care in more than 45 clinical areas.

In FY2015, 12% of all veterans enrolled for VA care received Telehealth based care. This includes 2.14 million telehealth visits, touching 677,000 veterans.

IMPROVING THE VETERAN'S EXPERIENCE THROUGH MYVA COMMUNITIES

News Release May 4, 2016

As part of the Department of Veterans Affairs (VA) MyVA initiative, the largest transformation in the history of the VA, the VA is reporting the progress and growth of the locally led, community-driven initiative, MyVA Communities. Modeled after San Diego's successful One VA Community Advocacy Board, more than 50 communities have joined the MyVA Communities movement. What these communities have in common is that they have local veteran engagement boards which are led by the community, provide a feedback, and input mechanism for local veterans, are accessible, and are designed to bring together all available local resources and capabilities to better support our veterans. They are also flexible enough to meet the unique needs of each community and facilitate the development of local solutions. "VA is undergoing its largest ever transformation, MyVA, based around the central premise that we must look at all of the decisions we make through the lens of the veteran, that is how we provide a better experience," said Secretary of Veterans Affairs Robert A. McDonald. "A vital part of that transformation is better working with strategic partners and that's exactly what MyVA Communities help us do, bring together local community leaders that want to help VA improve and provide services to veterans."

Connecticut established the first veterans community board in the country using the new MyVA Communities model and was followed by several other start-ups including MyVA Pikes Peak in Colorado Springs, CO. In other areas, the VA was able to join well-established existing engagements including the Alaska Forget Me Not Coalition and the Region 9 Veterans Community Action Team in Ann Arbor, MI. The community veterans engagement boards, which go by different names in each community, are co-chaired and driven by local community leaders and include representatives from all three VA Administrations on the board membership (Veterans Benefits Administration, Veterans Health Administration, and the National Cemetery Administration). To support further integration of VA service offerings in communities, the VA is incorporating the Veterans Economic Communities Initiative (VECI) into the MyVA Veterans Experience portfolio of service offerings. VECI, which was announced by the Secretary in 2015, has improved education and employment opportunities for veterans in over 25 communities around the country. This is one example of a resource the VA can offer to current and future MyVA Communities across the country.

The VA expects to see 100 MyVA Communities throughout the country by the end of this year as a result of ongoing engagements with community leaders and existing groups with similar missions. The goal is to seek integration with existing community collaborative groups, and encourage local community leaders to adopt the MyVA Communities model where gaps may exist.

VA SECRETARY GRANTS RELIEF FOR VETERANS WITH TRAUMATIC BRAIN INJURIES

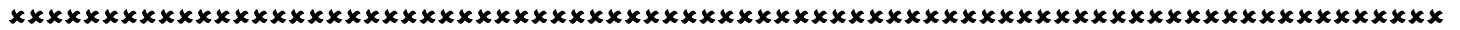
Secretary of Veterans Affairs Robert McDonald has granted equitable relief to more than 24,000 veterans following a national review of Traumatic Brain Injury (TBI) disability compensation examinations conducted between 2007 and 2015. Equitable relief is a unique legal remedy that allows the Secretary to correct an injustice to a claimant, where the VA is not otherwise authorized to do so within the scope of the law.

Since 2007, medicine around TBI has been a rapidly evolving science. The VA instituted a policy requiring one of four specialists – a psychiatrist, physiatrist, neurosurgeon, or neurologist – to complete initial TBI exams when the VA does not already have a diagnosis. The VA selected these specialists because they have the most experience with the symptoms and effects of TBI. As more research became available, the VA issued a series of guidance documents that created confusion regarding the policy. The nationwide review revealed that more than 24,000 veterans did not receive an exam by one of the specifically designated specialists. Of the veterans identified, more than 13,000 are already service connected for TBI at a 10% disability evaluation or higher.

To minimize burden and ensure no financial harm to affected veterans, the Secretary of Veterans Affairs granted equitable relief to all of the more than 24,000 identified veterans on May 3, 2016. The relief authorizes the VA to offer new TBI exams, conducted by an appropriate specialist, to all identified veterans. Further, this equitable relief enables the VA to take action on any new examinations without requiring veterans to submit new claims. It also allows the VA to award an effective date as early as the date of original TBI claim and provide any retroactive benefits due.

The VA will contact affected veterans to notify them of the opportunity to receive new examinations and have their claims reprocessed. Affected veterans will have one year in which to request new examinations. The VA understands the importance of an accurate exam to support veterans' disability claims. The VA is committed to improving the medical exam experience and has identified it as one of the Department's 12 MyVA Breakthrough Priorities.

PROPOSED NEW APPEALS FRAMEWORK PROVIDES FIVE KEY BENEFITS FOR VETERANS



I. Improved Communications: In order to make an informed and intelligent choice as to which review option is the most beneficial, veterans will need a clear and detailed Decision Notice when a claim is decided. We have identified eight elements needed to draft a comprehensive notice to veterans.

1. Issues adjudicated
2. Evidence considered
3. Statutes and regulations considered
4. Identification of findings favorable to the veteran
5. Findings as to which element(s) were found not to have been satisfied leading to the denial of the claim including an explanation of how the evidence was weighed
6. Notice of how to obtain a copy/access to the evidence used in making the decision
7. Notice of the criteria that must be satisfied to grant the claim
8. Notice of appellate rights and all procedures available to seek further review

II. Effective Date Protection: The new system will protect a veteran’s potential effective date while he or she considers the different options available. Choosing one lane over another lane (see choice below) does not prevent a veteran from later choosing a different lane.

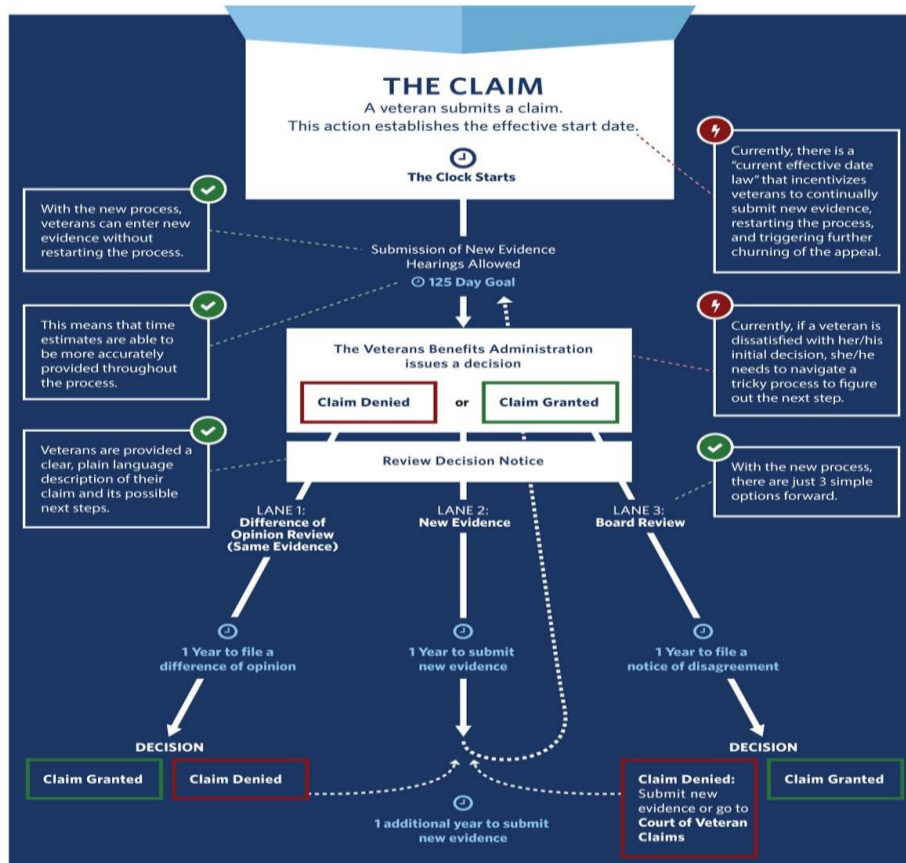
III. Choice: The new model provides veterans with three options (lanes) after every VBA decision. These lanes are designed to allow veterans to choose the option that best suits their particular need.

1. A Difference of Opinion Review (within VBA)
2. An option to submit New Evidence (within VBA)
3. The right to Appeal to the Board of Veteran Appeals (Board)

IV. Early Resolution: The new approach is designed to facilitate early resolution of appeals at the RO level – through options 1 and 2 - rather than driving appeals through a single process which leads to and through the Board.

V. Timely Resolution:

1. The focus on early resolution and a 125 day turn-around goal within the two VBA lanes will dramatically reduce the time to resolution for many appeals.
2. The Board will provide 1) an Expedited Review docket for claimants who simply wish for a review on existing evidence, and 2) an Alternate Review docket which allows for hearings and the submission of new evidence.



GOVERNOR PROCLAIMS 2016 "THE YEAR OF IDAHO'S MILITARY FAMILIES"

News Release March 22, 2016

Governor C.L. "Butch" Otter took time on March 22nd to formally acknowledge the role and self-sacrifice families of Idaho's servicemen and women make every day for the security of our state and nation. The Governor officially dedicated 2016 in the state as "The Year of Idaho's Military Families."

"In the aftermath of another horrible round of terrorist attacks, this time in Belgium, I want to encourage our citizens to take a moment to recognize the invaluable contributions made every day by the families of our men and women in uniform," said Governor Otter. "These families are routinely asked to shoulder a disproportionate share of the burden, under extremely adverse and demanding circumstances, all in an effort to keep our country safe. As a society, we should never forget that this hazardous duty takes a toll not just on the man or woman in uniform, but on their family as well. For their service and sacrifice, I wish to extend the humble thanks of a grateful state."

More than 500 Idaho National Guard men and women of the 124th Fighter Wing based at Gowen Field in Boise, will soon depart for the Middle East. They will be deployed this spring and summer in support of the U.S.-led combat operations in southwest Asia. The mission will include multiple aircraft, pilots, maintenance personnel, security forces, medical personnel and various other support staff. Deployments typically last up to 180 days.

The attacks in Belgium killed at least 32 people and left over a hundred injured. Among the injured were an unidentified American serviceman and his family. The Governor and First Lady ask all Idahoans to join them in keeping the victims of the terror attacks in their thoughts and prayers.

VA LAUNCHES VETERANS LEGACY PROGRAM

News Release May 31, 2016

The Department of Veterans Affairs (VA) announced the launch of the Veterans Legacy Program to memorialize veterans' service and sacrifice through public educational programming. The program uses the rich resources found throughout VA national cemeteries, soldiers' lots, and monument sites. Secretary of Veterans Affairs Robert A. McDonald announced the program during a Memorial Day ceremony at Riverside National Cemetery in Riverside, California. "The Veterans Legacy Program is meant to bring to life the stories of veterans buried in VA national cemeteries through lesson plans, interactive maps, and video vignettes," said Secretary McDonald. "Behind every marker is a story—a story of what it meant to be a Soldier, Sailor, Airman, Marine and Coast Guardsman at a particular moment in time. Our goal is to ensure that our nation does not forget their stories and their sacrifice."

Using online educational products such as lesson plans, interactive maps, and short video vignettes, the VA, through the Veterans Legacy Program, will engage the general public, students and educators. The VA launched this initiative earlier this year at two pilot sites: Beaufort National Cemetery in South Carolina and Riverside National Cemetery in California. Over the next several years, online educational products and programs will be developed for all VA national cemeteries. VA has also formed a partnership with the American Battle Monuments Commission (ABMC) to co-sponsor a "Teachers Institute," a workshop for educators who will conduct research at the VA and ABMC cemeteries. Information about the program may be found at www.cem.va.gov/cem/legacy/.

More than 4 million Americans, including veterans of every war and conflict, are buried in the VA's 133 national cemeteries. The VA also provides funding to establish, expand, improve, and maintain 100 veterans cemeteries in 47 states and territories including tribal trust lands, Guam, and Saipan. For Veterans not buried in a VA national cemetery, the VA provides headstones, markers, or medallions to commemorate their service. In 2015, the VA honored more than 353,000 veterans and their loved ones with memorial benefits in national, state, tribal, and private cemeteries.

Information on VA burial benefits is available from local VA national cemetery offices at www.cem.va.gov or by calling VA regional offices toll-free at (800) 827-1000. For more information about the history of VA national cemeteries, visit www.cem.va.gov/history. Blogs about the Veterans Legacy Program may be found at www.blogs.va.gov/VAntage/26511/va-launches-veterans-legacy-program/ and www.blogs.va.gov/VAntage/28031/veterans-stories-not-just-stories-americas-history/.

GO GREEN AND RECEIVE THE BULLETIN VIA EMAIL

In our continual effort to reduce costs and lessen our "ecological footprint," the Office of Veterans Advocacy is again asking for your help. In order to reduce printing and mailing costs, as well as the amount of paper used, we are asking you to volunteer to receive the bulletin via email. The bulletin will arrive in your in-box every quarter as a PDF document, which will allow to you forward or print and disseminate. In addition to receiving the quarterly bulletin, you will also receive our annual Veterans Resource Directory via email. If you've not already helped us with our goal of reducing costs and the saving paper, please email Jennel Binsky at jennel.binsky@veterans.idaho.gov. Thanks for your help with this most worthwhile endeavor!

DATES TO REMEMBER

| | |
|-------------------|---|
| July 2 | U.S. Army Air Corps established, 1926 |
| July 4 | Independence Day |
| July 20 | Neil Armstrong walks on the moon, 1969 |
| July 27 | Korean War Armistice Day, 1953 |
| August 4..... | U.S. Coast Guard established, 1790 |
| August 7..... | Order of the Purple Heart established, 1782 |
| August 14..... | Japan surrendered, ending WWII, 1945 |
| September 5..... | Labor Day |
| September 11..... | Patriot Day |
| September 14..... | Star Spangled Banner written by Francis Scott Key, 1814 |
| September 16..... | POW/MIA Day (<i>see history below</i>) |
| September 17..... | VFW Ladies Auxiliary organized, 1914 |
| September 18..... | U.S. Constitution approved, 1787 |
| September 18..... | U.S. Air Force established, 1947 |
| September 29..... | Veteran of Foreign Wars (VFW) established, 1899 |

CONVENTION SCHEDULES

American Legion

- State July 14-17, 2016, Moscow, ID
- National.....August 26-September 1, 2016, Cincinnati, OH

AMVETS

- National.....August 7-4, 2016, Sparks, NV

Catholic War Veterans of the United States

- National.....August 2016, Portland, ME

Disabled American Veterans

- National.....July 31-August 3, 2016, Atlanta, GA

Marine Corps League

- Boise, ID.....May 12-14, 2016, Boise, ID
- National.....August 7-13, 2016, Tulsa, OK

Military Order of the Purple Heart

- National.....August 9-13, 2016, Norfolk, VA

Veterans of Foreign Wars

- National.....July 23-27, 2016, Charlotte, NC

THE HISTORY OF POW/MIA DAY

Many Americans across the United States pause to remember the sacrifices and service of those who were prisoners of war (POW), as well as those who are missing in action (MIA), and their families. All military installations fly the National League of Families' POW/MIA flag, which symbolizes the nation's remembrance of those who were imprisoned while serving in conflicts and those who remain missing.

Veteran rallies take place in many states in the United States on National POW/MIA Recognition Day. United States flags and POW/MIA flags are flown on this day and joint prayers are made for POWs and those missing in action. National POW/MIA Recognition Day posters are also displayed at college or university campuses and public buildings to promote the day. Remembrance ceremonies and other events to observe the day are also held in places such as the Pentagon, war memorials, and museums. National POW/MIA Recognition Day is not a federal public holiday in the United States but it is a national observance.

There are 1,741 American personnel listed by the Defense Department's POW/MIA Office as missing and unaccounted for from the Vietnam War, as of April 2009. The number of United States personnel accounted for since the end of the Vietnam War in 1975 is 841. About 90% of the 1,741 people still missing were lost in Vietnam or areas of Laos and Cambodia under Vietnam's wartime control, according to the National League of Families website (cited in the United States Army website).

The United States Congress passed a resolution authorizing National POW/MIA Recognition Day to be observed on July 18, 1979. It was observed on the same date in 1980 and was held on July 17th in 1981 and 1982. It was then observed on April 9th in 1983 and on July 20 in 1984. The event was observed on July 19th in 1985, and then from 1986 onwards the date moved to the third Friday of September. The United States president each year proclaims National POW/MIA Recognition Day. Many states in the USA also proclaim POW/MIA Recognition Day together with the national effort.

DAV VAN SCHEDULES TO AND FROM VA MEDICAL CENTERS

BOISE & SURROUNDING AREA TO BOISE VAMC

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

For more information call Jim Rossette at the Boise VA Medical Center (208) 422-1000 ext. 7555.

* Homedale, Marsing, and Canyon County: Call Laverne Gillum (208) 422-1000 ext. 7555.

Pickup points: Star Star Merc
Middleton Downtown Shell Station
..... Shell Station at exit 25 of I-84
Notus Shell Station
Parma M&W Market
Wilder Shell Station
Homedale Shell Station
Caldwell Chevron at 10th Avenue South & the freeway
..... Emergency entrance of West Valley Medical Center
..... Maverick at 10th Avenue South & Ustick
..... 20248 Hoskins Road
Nampa Karcher Mall near Ross Dress for Less
..... Albertson's at 7th Street & 12th Avenue South
..... D and B Supply on 12th Avenue South
Melba/Bowmont Chevron at Greenhurst & Southside
..... McDonalds at exit 38 of the freeway
Kuna West side of the Winco parking lot

* Weiser, Payette, Ontario, Emmett, and surrounding area: Call Lori Walla (208) 919-5733

Pickup points: Emmett Tom's Cabin Restaurant
..... Subway near Albertson's
..... Stinker Station
Fruitland Shell Station at Palisades Corner
..... Shell Station at the highway
Middleton (Caldwell) 44 Quick Stop
New Plymouth Lowell's Market at 5 Corners
..... Hamilton Corners at Highways 52 & 30
Nyssa Anderson Corner
..... McDonalds at West Park Plaza
Ontario McDonalds at West Park Plaza
..... McDonalds at K-Mart
..... Shell Station at the freeway
..... Shell Station on Idaho
..... The Elk's
Payette Albertson's
..... Jerry's Market on 6th
..... Kings Variety/Maverick at Highway 95
Weiser Sinclair Station at Highway 95
..... Maverick Station at Highway 95
..... Chevron Station
..... Pioneer Market
..... Ridley's Market

* Twin Falls, Jerome, Lincoln, Gooding, and Elmore Counties: Call Hayley Rienstra (208) 733-7610 ext. 2415.

Pickup points: Twin Falls Sheriff's Office
Filer Logan's Market
Buhl Oasis Stop-N-Go
Jerome Ridley's Market
Gooding Ridley's Market
Wendell Farmhouse
Bliss Ziggy's
Hammett Valley Market
Glenns Ferry Shell Station
Mountain Home Foothills Chevron, Albertson's, & Exit 90 Chevron/Burger King

* Cassia, Minidoka, and Blaine Counties: Call Georgia Greenwell (208) 678-3599 or 878-2565.

Pickup points: Burley Sheriff's Office
..... Exit 211 Wayside
..... Exit 208 Hub 66
..... Greenwood Store

* Southeast Oregon - Baker City, Haines, Halfway, Huntington, John Day:

Call Carl Swinyer (541)-894-2546, Robert Warner (541)523-5340 or the VFW Hall (541) 523-4988.

DAV VAN SCHEDULES TO AND FROM THE SPOKANE VA MEDICAL CENTER

LEWISTON & SURROUNDING AREA

Wednesdays: Spokane VA Medical Center. 6:00 a.m. departure from the State Veterans Home at 821 21st Avenue.

Picks up in Genesee, Moscow, Viola, Potlatch, Tensed, Plummer, and Worley. Arrives Spokane at 9:30 a.m.

Fridays: Spokane VA Medical Center. 6:00 a.m. departure from the State Veterans Home at 821 21st Avenue.

Picks up in Uniontown, Colton, Pullman, Colfax, Steptoe, Rosalia, and Spangle, WA. Arrives Spokane at 9:00 a.m.

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

Call the DAV Transportation Office at the Spokane VA Medical Center (800) 325-7940.

*****If you are interested in being a volunteer driver, please call Voluntary Services at (509) 434-7503*****

LIBBY & SURROUNDING AREA TO SPOKANE VAMC

Tuesdays and Thursdays: 6:00 a.m. departure from Libby, MT.

Picks up in Troy MT, Bonner's Ferry, Sandpoint, Priest River, and Newport WA. Arrives at Spokane VA Medical Center at 9:00 a.m.

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

Call the DAV Transportation Office at the Spokane VA Medical Center (800) 325-7940.

COEUR D'ALENE & SURROUNDING AREA TO SPOKANE VAMC

Daily: Door to door pick up and return, times variable.

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

Call the DAV Transportation Office at the Spokane VA Medical Center (800) 325-7940.

SANDPOINT & SURROUNDING AREA TO SPOKANE VAMC

Mondays, Wednesdays, and Fridays:

Picks up in Noxon, Clark Fork, Hope, Sandpoint, Laclede, Priest River, Newport, Diamond Lake, Chattaroy. Arrives at Spokane at 9:00 a.m.

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

Call the DAV Transportation Office at the Spokane VA Medical Center (800) 325-7940 ext. 7019.

WALLA WALLA VA MEDICAL CENTER VAN TO AND FROM LEWISTON

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*****

SALT LAKE CITY VA MEDICAL CENTER

July 1, 5, 7, 11, 13, 15, 19, 21, 25, 27, 29

August 2, 4, 8, 10, 12, 16, 18, 22, 24, 26, 30

September 1, 7, 9, 13, 15, 19, 21, 23, 27, 29

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

Call the VTS/DAV Transportation Office at (800) 613-4012 ext. 2003 or 1027.

