



Idaho Division of
**VETERANS
SERVICES**

*Caring for
America's
Heroes*

BULLETIN

**July
2020**

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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



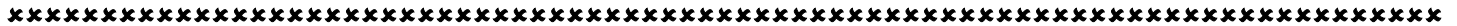
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**If you’ve not already done so, please volunteer to receive the bulletin via email
by emailing Jennel Binsky at
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FROM BILL'S DESK



I hope everyone is doing well these days and adjusting to all the changes that have come down on us. I want to apologize for this being the first bulletin since January 2020, and so there are quite a few things to pass along.

The Idaho Division of Veterans Services and Office of Veterans Advocacy has experienced a few major personnel changes in the past months. Debbie Harmon, who has been working out of the Pocatello State Veterans Home for over 15 years has officially retired as of July 1st. Debbie has assisted many veterans and families with their benefits over the many years she worked with us and will be greatly missed. We are currently working through the hiring process for a new service officer to join our Team in Pocatello. Doug Jacobson, who used to be a Veteran Service Officer and has spent the last several years as the State Approval Agency for the Post 9/11 GI Bill in the Education Office left at the end of May to pursue a new career. Tonya Erhardt is currently filling in for Doug as the search continues for Doug's replacement. Just prior to COVID shutting everything down, we hired James "JT" Ramondetta as our second service officer in Twin Falls. JT is an Air Force Security Forces/Dog Handler retiree and joins our team from the Idaho Department of Corrections.

One of the main priorities of the Idaho Division of Veterans Services is to keep the residents of our three State Veterans Homes safe and free of COVID-19. To date, there has not been a single resident who has tested positive for COVID, nor has any of the medical staff. In order to keep our residents safe, the OVA Service Officers who have been working in the Homes are being relocated out of the Homes to minimize visitors. We are still working on many of the logistics involved in moving out of the Homes and establishing new offices. The Pocatello OVA team will soon be relocating to the Department of Labor Office in Pocatello. The Lewiston OVA team is working towards relocating to the Department of Health and Welfare Building on 16th Avenue in Lewiston. Kelly McCartne, who used to work in the Boise Home, will now be working full-time at the Caldwell Veterans Memorial Building. With her move, Lance Santiago will take over the responsibilities of the Boise Veterans Home while working out of the Boise VA Regional Office. The final puzzle piece was finding more space for our Twin Falls Office with JT Ramondetta joining our Team. With that said, the Twin Falls OVA Team is moving out of the current location in the Twin Falls Department of Labor Office and moving into the Twin Falls County West Building located at 630 Addison Avenue in Twin Falls. Their offices will be located across the hall from the Twin Falls County Service Officer.

The newest State Veterans home in Post Falls has begun construction and will be located near the Buck Knives Factory. The official ground-breaking ceremony has been postponed until a latter date due to COVID-19 restrictions and will hopefully be rescheduled in the near-future. Construction is also continuing on the State Veterans Cemetery in Blackfoot. The Snake River Canyon National Cemetery, part of the VA's National Rural Cemetery Initiative, is now operational in Buhl. The point of contact for the Cemetery is Shanny Gallegos at (208) 732-7499. The National Cemetery Checklist needing completion prior to contacting the Cemetery is located further on in this bulletin. Remember, this is a National Cemetery and everything needs to be coordinated through the National Cemetery Administration and Shanny, not with James Earp at the Idaho State Veterans Cemetery.

The Boise VA Regional Office continues to be closed to the public and our OVA team that works from the Regional Office has been working from home since the middle of March. The Boise VA Regional Office is currently in Phase 1 of the VA's reopening plan, which means no more than 25% of the workforce can be in the building. Once Ada County can show a sustained downward progression of new COVID cases, it will be permitted to implement Phase 2 of the reopening plan. Phase 2 will permit 50% of the workforce to return to the building and will also allow the public to enter the building once they have been screened for COVID-19 by the Boise VA Medical Center checkpoint. The public will be required to wear facemasks when they enter the building and prove that they went through the medical screening checkpoint prior to entry.

The Boise VA Regional Office has recently been recognized as one of the Top 5 Regional Offices in the nation for overall quality of rating decisions. Great job to all of the Boise VA Regional Office employees!

For anyone currently serving in the National Guard or the Reserves and has a VA disability rating, the VA is currently working on Fiscal Year 2019 Drill Pay recoupment. The VA's Debt Management Center has suspended collecting debts owed to the VA during the COVID-19 crisis.

There have been many different changes that have been released by the VA since the COVID-19 situation began. The VA has pulled all Disability Benefit Questionnaires (DBQs) off of the VA websites. The DBQs used to allow veterans to take the blank exam to their own doctors and have them complete the exams for them. In theory, once the completed DBQ was submitted with the disability claim, a rating decision could be made much sooner, but a recent VA Office of the Inspector General Report found that there was fraud being committed by some doctors who were completing the DBQ. The VA also ended the 48-hour Service Officer Review Period of Rating Decisions that had been in effect since 1956. The VA had determined that with the various options under the Appeals Modernization Act, the 48-Hour review period was no longer needed. As of June 22, 2020, Vocational Rehabilitation and Education (VR&E) has changed their name to Veterans Readiness and Employment Service. They still conduct the same mission, but as of June 30th, the VA.gov website is replacing the eBenefits.va.gov website.

With the closure of the Boise VA Regional Offices, we have not been able to conduct Board of Veterans Appeals Video Conference hearings. Due to this, the Board of Veterans Appeals has rolled out the option of conducting a Virtual Video

Conference with great success. As long as the veteran/claimant has a laptop with a video camera, a tablet, or a smart phone, a virtual hearing can be conducted from the veteran's/claimant's home. We have performed a large number of these virtual hearings and have had very few issues with them. Speaking of appeals, there are currently 86,000 appeals pending nationwide and 20,000 are considered legacy appeals. There are currently 106 Board of Veterans Appeals Law Judges.

The VA continues to work on Blue Water Vietnam Veteran/Herbicide presumptive claims for those veterans who served within 12 nautical miles of the Vietnam coastline. If you have questions or know of a widow of a Blue Water Veteran, please refer them to a Service Officer.

Since our last bulletin, the Idaho State 100% Property Tax Benefit has been expanded to include those who are rated Individually Unemployable. The ability to file for this benefit for the 2020 year has expired, but you will be able to file for it again in 2021.

Due to COVID-19, the 2020 Annual County and Post Service Officer Training has been cancelled. Almost all of the various Veteran Service Organization State and National Conventions have also been cancelled this year. Take care of each other and if anyone has any questions pertaining to benefits, please let our office know. We will do everything that we can to assist. I hope everyone has a great remainder of the summer!

INFORMATION ON COVID-19 & THE BOISE VA MEDICAL CENTER

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The Boise VA Medical Center (VAMC) is opened to limited in-person care by appointment only. Your safety is their first priority, which means they must follow the CDC guidelines and prevent crowding at all locations. Most patient visits will continue to be delivered by video or phone.

Unless you require urgent medical attention, do not go the Boise VAMC if you are experiencing any Covid-19 symptoms. Covid-19 symptoms include cough, wheeze, shortness of breath, fever, chills, muscle aches, nausea, vomiting, diarrhea, new loss of taste/smell. Everyone entering the Boise VAMC campus must go thru the drive thru screening to be checked for Covid-19 symptoms. Once you have been successfully screened you will be given a wrist band to enter the facility. VA clinics outside of Boise do not have drive thru Covid-19 screenings or wrist bands.

All people must wear a mask while inside a VA facility, including all VA clinics outside of Boise. The mask must cover your nose and mouth. Homemade masks are allowed for patients and visitors. A mask will be provided to you if you do not have one. Visitors are not permitted on any of the inpatient units, with the exception of those veterans receiving end of life care. Accompanying veterans in an outpatient clinic is only allowed if the veteran requires assistance from a caregiver to safely manage the appointment. No visitors under the age of 18 are allowed. Visitors who have Covid-19 symptoms, or who have been in contact with someone with Covid-19 symptoms will not be allowed to enter. Visitors must limit where they go inside the VAMC to only those locations where the veteran is, or that are necessary.

VA LAUNCHES COVID-19 SCREENING TOOL

Press Release, June 29, 2020

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The U.S. Department of Veterans Affairs (VA) announced the launching of a digital COVID-19 screening tool to streamline veteran access to medical care during the coronavirus pandemic. The tool, designed with veteran and staff input, enables the screening of more than 10,000 people each day.

Veterans, their caregivers, and VA health care employees can use this tool on their mobile phones before entering facilities. It takes less than a minute to complete and helps reduce wait times, lowers exposure risk and eases patient stress. It also helps veterans gain confidence with increased digital interactions as part of their VA health care experience. "This screening tool emphasizes the ongoing importance of VA's investment in digital modernization, as it went from initial concept to national availability in less than two weeks," said VA Secretary Robert Wilkie. "In addition to providing a broad range of innovations and improvements that significantly benefit the veterans we serve; our culture of innovation allows us to respond quickly to urgent and evolving needs."

To protect patients and staff, the VA screens everyone for coronavirus symptoms and exposure each time they enter a health facility. VA staff uses the information received to direct people to either enter the building or go to a designated area for additional screening. Veterans, caregivers, and staff can use the tool by texting the word "SCREEN" to 53079 or scan a dedicated QR code with their mobile phone to get a link to the tool. They then answer a series of simple questions and share their results at the VA facility entrance.

VA ROLLS OUT SIMPLIFIED TRAVEL REIMBURSEMENT SYSTEM FOR VETERANS, BENEFICIARIES

Press Release, June 29, 2020

The U.S. Department of Veterans Affairs (VA) is rolling out a new system in July for veterans and eligible beneficiaries to submit and track transportation reimbursement claims using the VA's secure web-based portal, Access VA. The Beneficiary Travel Self-Service System (BTSSS), which is accessible 24/7, 365 days a year, will simplify how eligible veterans and beneficiaries claim mileage reimbursement for travel to and from both VA health care or VA authorized non-VA health care service locations. "VA is working diligently to find new ways to innovate and simplify how we serve veterans and their beneficiaries," said VA Secretary Robert Wilkie. "Streamlining the Beneficiary Travel Self-Service System will help our veterans get their travel reimbursements more securely and efficiently."

BTSSS enables veterans and caregivers to submit claims for reimbursement of costs from a personally owned vehicle, common carrier, meals and/or lodging, and other travel related expenses such as tolls, parking, and luggage. The national implementation across Veterans Integrated Service Networks (VISN) will run in phases through November. The first phase will start in July and includes VA Salt Lake City Health Care System, Kansas City VA Medical Center, Bay Pines VA Health Care System, Bay Pines, Florida and Minneapolis VA Health Care Systems.

VA REINSTATES IN-PERSON SERVICES AT 100 HOSPITALS ACROSS THE COUNTRY

Press Release, July 2, 2020

The U.S. Department of Veterans Affairs (VA) announced, as of mid-June, more than 100 VA medical facilities and medical centers (VAMCs) have reinstated at least one in-person service within their direct health care delivery system after certain services were temporarily on hold or reduced due to the COVID-19 pandemic. VA leadership reviews and considers many factors daily, including community infection rates, to determine when it is safe for a facility to expand services. "We will continue to provide a safe environment for both veterans and employees," said VA Secretary Robert Wilkie. "VA will also ensure the safety of patients and employees are a priority when implementing which Veterans Health Administration facilities move forward with expanding in-person services."

The department's focus has been to provide in-person care to veterans who have the greatest clinical need during the pandemic — while VAMCs remain open for urgent and emergency care services. For non-emergent care, telehealth appointments have been a valuable link between the VA and veterans during this challenging time, however, veterans should not delay contacting their care team to make an appointment if they have a medical concern.

The VA continues to increase telehealth appointments for veterans not in need of in-person services, which has now seen more than a 1,000% increase — totaling more telehealth visits in March 2020 than in all of 2019. The VA will continue to use and expand innovative personalized telehealth options, phone consults and wellness checks regardless of a veteran's geographic location. For information on which VAMCs are providing in-person services, contact your local VAMC directly.

VA SUPPORTS 988 EXPANSION FOR NATIONAL SUICIDE PREVENTION CRISIS LINE

Press Release, June 26, 2020

The U.S. Department of Veterans Affairs (VA) announced their support for the Suicide Prevention 988 expansion initiative, a new national three-digit emergency telephone number to access crisis call centers across the country for suicide prevention and mental health services, including the Veterans Crisis Line, by July 2022. The VA is working alongside the Federal Communications Commission, the Substance Abuse and Mental Health Services Administration, and the National Suicide Prevention Lifeline to implement and activate the 988 expansion. "The 988 three-digit number will help veterans and non-veteran callers quickly access help in times of crisis and open the door to engage new individuals in life-saving care," said VA Secretary Robert Wilkie. "The Veterans Crisis Line will continue to remain available 24/7, 365 days a year, by calling 1-800-273-8255 and pressing 1."

Once activated, the 988 expansion will also grant the VA the opportunity to collaborate with the suicide prevention community across the United States. This initiative is aligned with the President's Roadmap to Empower Veterans and End a National Tragedy of Suicide (PREVENTS) program, a nationwide plan to raise awareness about mental health, connect veterans and others at risk of suicide to federal and local resources. If you or someone you know is having thoughts of suicide, contact the Veterans Crisis Line to receive free, confidential support and crisis intervention available 24 hours a day, 7 days a week, 365 days a year. Call (800) 273-8255 and Press 1, text to 838255, or chat online at VeteransCrisisLine.net/Chat.

When will the change go into effect? Section 622 of the National Defense Authorization Act for Fiscal Year 2020 was signed into law on December 20, 2019; however, the actual adjustments to SBP payments for those affected by the change will begin in 2021. The legislation phases in the repeal of the SBP-DIC offset from 2021 to 2023. Survivors subject to the SBP-DIC offset will remain offset dollar-for-dollar in 2020.

When will I see an increase in my SBP payments? Section 622 of the National Defense Authorization Act for Fiscal Year 2020 phases in the elimination of the SBP-DIC offset in the following way. In 2020, surviving spouses will continue to have their SBP offset by the full amount of DIC they receive from the VA. In 2021, SBP will be reduced by no more than two-thirds of the amount of DIC rather than by the entire amount of DIC, even though eligible surviving spouses will continue to receive the full amount of DIC. In 2022, SBP will be reduced by no more than one-third of the amount of DIC received. In 2023, the SBP-DIC offset will be eliminated in total, so that surviving spouses eligible for both programs will receive both SBP and DIC in full, effective January 1st (paid as of February 1st).

Why can't I receive the full SBP benefit starting this year? Section 622 of the National Defense Authorization Act for Fiscal Year 2020 does not authorize any change to the calculation of the SBP-DIC offset prior to January 1, 2021.

When will I start receiving benefits in full? Eligible survivors will start receiving SBP payments in full, without offset, beginning with their January 2023 entitlement, which will be paid on February 1, 2023.

Does any form, document, or supporting statement need to be submitted to take advantage of these increased SBP payments? If yes, when is the cutoff date? No, the increase in benefits will occur automatically for surviving spouses subject to the SBP-DIC offset. All surviving spouses subject to the offset will have their benefit recalculated for the month of January 2021, which they will receive on February 1, 2021. We would encourage you to ensure your contact and bank account information is updated through the Defense Finance and Accounting Service's self-service portal, myPay.

If a person becomes a surviving spouse this year, would that person automatically start to receive both SBP and DIC benefits? First, in order to be eligible for both benefits the current or former military member must either have retired – and elected to participate in SBP – or died in the line of duty. If retired, he or she must also have died of a service-connected disability for the surviving spouse to be eligible for DIC. Less than 10% of surviving spouses qualify under both programs. In 2020, all new surviving spouses remain subject to the SBP-DIC offset if eligible under both programs. Those survivors will receive only the amount of SBP in excess of the amount of DIC they receive. Beginning in 2021, new surviving spouses will receive the same increase in benefits as existing survivors.

How much will the average survivor get? SBP annuity payments can vary for each beneficiary because they are based on a number of factors such as retirement date, length of service, pay grade, and disability rating of the sponsor. There is no set amount, so each surviving spouse's current and future SBP payments could be quite different.

I am currently subject to the SBP-DIC offset. Will I definitely get an increase? Yes, eventually, although not all survivors will see an increase in the first year. It is possible that if your SBP payments are currently less than two-thirds of the amount of DIC, you may not see an increase in 2021. For example, if you currently receive \$1,500 from the VA for DIC, but your gross SBP before offset is only \$800, you would not see an increase in 2021 other than the normal annual cost of living adjustment (COLA). This is because your SBP amount, \$800, is still less than the amount of DIC that would be subject to offset, which in this example would be \$1,000 (i.e., \$1,000 is two-thirds of the \$1,500 DIC). Eventually, though, you will see an increase as the SBP-DIC offset is further reduced in 2022 and then completely eliminated in 2023.

Now that the offset is being eliminated, will there be any back pay for the years we didn't get SBP payments we paid for? No, Section 622 of the National Defense Authorization Act for Fiscal Year 2020 does not authorize back payments. Surviving spouses of retirees who were subject to the SBP-DIC offset received either a partial or full refund of premiums to account for the reduced SBP payments.

I received a SBP premium refund once I started getting both SBP and DIC, will I have to pay it back? No, if you previously received a refund of SBP premiums due to the SBP-DIC offset, you will not have to pay back that refund because of this change in the law.

What is the Special Survivor Indemnity Allowance? The Special Survivor Indemnity Allowance (SSIA) is a payment made to surviving spouses subject to the SBP-DIC offset that partially restores some of the SBP amount that is offset. SSIA is a set amount established by Congress and adjusted each year by a COLA, if applicable. The SSIA rate for 2020 is \$323 per month. Surviving spouses subject to the SBP-DIC offset will continue to receive SSIA, up to the amount that is reduced from their SBP payment (i.e., until the offset is fully-repealed in 2023).

Will the SSIA be phased out? Eligible survivors will continue to receive SSIA, up to the prescribed maximum amount (\$323 per month for 2020) or the amount of SBP that is offset due to DIC, whichever is less. SSIA will no longer be paid once the SBP-DIC offset is fully eliminated in 2023 and surviving spouses receive the full amount of SBP and DIC concurrently, without offset.

The National Defense Authority Act for Fiscal Year 2020 repealed the authority for optional annuities for dependent children. What does this mean? When a currently-serving member dies in the line of duty on active or inactive duty, the surviving spouse has the option, in consultation with the Secretary of the Military Department, to choose to have the SBP annuity paid directly to a dependent child rather than to receive the benefit for him or herself. This allows the surviving spouse to receive DIC from the VA in full without it affecting the SBP payments. SBP paid to the child or children of the deceased service member is not offset by DIC. This provision is only allowed in situations in which the member died on active or inactive duty, in the line of duty, after October 7, 2001. While it remains in effect for now, on January 1, 2023, this option will go away in accordance with Section 622 of the National Defense Authorization Act for Fiscal Year 2020. Further, those annuities that were directed to a child rather than a surviving spouse will automatically revert to the surviving spouse, if he or she is still eligible, on January 1, 2023.

I chose the SBP optional child annuity when my spouse died on active duty. Will I now receive the SBP benefit? Not yet, but you will eventually. If your child is the designated SBP beneficiary, he or she will continue receiving the SBP payments until the SBP-DIC offset is fully eliminated in 2023. As long as you did not remarry prior to age 55, the annuity will revert to you as the surviving spouse on January 1, 2023. If your child or children lose eligibility because he or she reaches age 18 (or age 22 if a full-time student) prior to January 1, 2023, the annuity will be suspended until January 1, 2023, at which time it will revert to you.

I gave the SBP to my child when my spouse died in the line of duty while still in military service, but she is no longer eligible because she is too old. What happens now? The annuity remains suspended until January 1, 2023, at which point it will revert to you. If you previously chose to transfer the SBP annuity to your child or children, and your child or children are no longer eligible for SBP, the SBP benefit will be restored to you, as the surviving spouse, beginning on January 1, 2023, as long as you did not remarry prior to age 55.

I previously chose the SBP child annuity when my spouse died on active duty. What do I need to do to ensure the payment comes back to me instead of my child? You will be contacted by the appropriate military service prior to the annuity reverting to you as the surviving spouse on January 1, 2023. You do not need to do anything yet, although we would encourage you to ensure your contact information and bank's direct deposit information is correctly updated through the Defense Finance and Accounting Service's myPay website.

When my spouse retired from the military, he elected child-only SBP. Does this mean I will now get the SBP instead of my child? No, the child remains the designated beneficiary for SBP. Section 622 of the National Defense Authorization Act for Fiscal Year 2020 does not impact SBP Child-Only or Special Needs Trust (SNT) elections made by retirees and their spouses at retirement. Spouse eligibility is not restored because the election of child-only or SNT coverage at retirement was irrevocable. The section of the National Defense Authorization Act for Fiscal Year 2020 that discusses restoring eligibility to spouses refers only to certain situations in which the surviving spouses chose to transfer the benefit to a child following the death of a military member on active or inactive duty, in the line of duty, after October 7, 2001.

I am a retiree who elected spouse and child SBP coverage? How will this change in the law affect that coverage? This change in the law does not affect spouse and child SBP elections made by retirees. If the elected coverage was for spouse and child, the child (if under age 18 or age 22 if a full-time student) will only become eligible for SBP if the spouse loses eligibility, for example a surviving spouse remarries before age 55 or the spouse passes away.

I would like to learn more, where can I go? The Defense Finance and Accounting Service (DFAS) has created this webpage to share information about the elimination of the SBP-DIC offset: www.dfas.mil/retiredmilitary/survivors/SBP-DIC-News. Additionally, you can contact Military One Source at (800) 342-9647.

VA HITS MAJOR MILESTONE IN THE RESOLUTION OF LEGACY APPEALS

Press Release, July 6, 2020

The Department of Veterans Affairs (VA) announced it has reached a significant milestone in the overall Legacy Appeals Resolution Plan with the Veterans Benefits Administration (VBA) completing actions on nearly all non-remand legacy appeals as of July 4th. The non-remand inventory includes Notices of Disagreement (NODs) and substantive appeals filed with VBA in the legacy system before passage of the Veterans Appeals Improvement and Modernization Act of 2017 (AMA). "Prior to implementing the AMA, the overall VA-wide legacy appeals inventory was more than 400,000," said VA Secretary Robert Wilkie. "From February 2019 to the present — VBA, the Board of Veterans' Appeals and Veterans Health Administration have worked collectively to reduce the numbers to less than 200,000 — a more than 50% reduction."

In conjunction with hitting this milestone, the VBA's Appeals Management Office will be known as the Office of Administrative Review (OAR). Under the new name, OAR will work to reduce the VBA's legacy remand inventory, administer VBA's higher-level review program, and oversee the VBA's Decision Review Operations Centers, which processes AMA higher-level reviews, higher-level review returns, and Board remands and grants. The VA continues to be on target to meet the goal of resolving legacy appeals under the Legacy Appeals Resolution Plan by December 2022.

HOW THE DEBT MANAGEMENT CENTER IS HELPING VETERANS & BENEFICIARIES DURING COVID-19

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The Debt Management Center understands the impacts due to Covid-19 are far reaching and is helping veterans and their beneficiaries with solutions. At this time, the Debt Management Center is providing assistance to veterans and beneficiaries in many ways.

- Suspended collections on new debts and halted issuing debt collection letters.
- Paused referral of delinquent debt to Department of the Treasury, Credit Alert Interactive Verification Reporting System, and credit reporting agencies.
- Offering temporary suspension of debt collection.
- Providing extended payment arrangements.
- Text messages sent directly to veteran's phone accounts – 8.6 recipients.
- Conducted a Borne the Battle Podcast with Public Affairs – reached 11 million.
- Communicated to veterans via a letter, multiple emails, Facebook, website posts, and blog updates.

The Debts Management Center will continue top update their website, www.va.gov/debtman with new information regarding the Covid-19 crisis. They will announce important dates regarding resumption of debt collection activities on their website. For help with payment plans, call the Debt Management Center at (800) 827-0648 or submit an online request to iris.custhelp.va.gov/app/ask.

VA VIDEO CONNECT VISITS INCREASE 1,000% DURING COVID-19 PANDEMIC

Press Release, June 12, 2020

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The U.S. Department of Veterans Affairs (VA) announced telehealth video appointments using VA Video Connect increased from approximately 10,000 to 120,000 appointments a week between February and May of 2020. This increase of 1,000% is attributed to VA providers and veterans taking precautions against COVID-19. “As we near the three-year anniversary of the launch of VA Video Connect, even during these challenging times, VA has and continues to maintain access to high-quality health care for veterans,” said VA Secretary Robert Wilkie. “As the service becomes more popular, VA remains committed to providing a seamless user experience to ensure veterans have access to care where and when they need it.”

VA Video Connect allows veterans and their caregivers to meet virtually with their VA care teams on any computer, tablet, or mobile device with an internet connection. It is one of the largest and most successful digital health platforms in the nation and currently enables more than 25,000 virtual appointments, including mental health appointments each day.

VA is also taking strides to bridge the digital divide for veterans who lack the technology or broadband internet connectivity required to participate in VA telehealth services. More than 26,000 cellular-enabled tablets are currently distributed to veterans across the country. Major wireless carriers T-Mobile, Sprint, now part of T-Mobile, SafeLink by Tracfone, and Verizon are allowing veterans to access VA telehealth services without incurring data charges.

Due to increased demand during the COVID-19 pandemic, the VA is rapidly expanding VA Video Connect, allowing more veterans and VA care teams to connect by video. During this time, veterans using VA Video Connect with limited data plans could temporarily experience data charges. While cellular carriers are taking measures to support veterans during this period of expansion, veterans with concerns are encouraged to contact their carrier. For information about VA’s telehealth services visit connectedcare.va.gov.

VA'S VOCATIONAL REHABILITATION & EMPLOYMENT SERVICE SIGNALS TRANSFORMATION

Press Release, June 22, 2020

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The U.S. Department of Veterans Affairs (VA) Vocational Rehabilitation and Employment (VR&E) service announced it’s changing its name to Veteran Readiness and Employment Service to better reflect the needs of veterans. The new name, which includes readiness, is more in line with what service members and veterans already understand from their military service. “The new name puts an emphasis on the veteran and the department’s mission to help them reach their employment goals,” said VA Secretary Robert Wilkie. “The service will also maintain the VR&E abbreviation allowing it to remain identifiable.” The process of renaming the program began with a comprehensive Human-Centered Design (HCD) research effort to better understand the program’s strengths, pain points, and opportunities to increase program awareness and enhance the delivery of VR&E services. Data collection activities and information sessions were held with veterans, service members, VR&E employees, and veterans service officers at the various stages of the HCD research process. VR&E learned that confusion and stigma around the former program name deterred some potential program participants from seeking services.

VR&E provides benefits and services that enable transitioning service members and Veterans with service-connected disabilities and an employment barrier, to prepare for, obtain and maintain suitable employment, and to the maximum extent possible, achieve independence in daily living.

PRESIDENT TRUMP RELEASES PREVENTS ROADMAP, A PLAN TO END VETERAN SUICIDE

Press Release, June 17, 2020

The U.S Department of Veterans Affairs (VA) announced the release of the President’s Roadmap to Empower Veterans and End a National Tragedy of Suicide (PREVENTS), an historic, nationwide plan to raise awareness about mental health, connect veterans and others at risk of suicide to federal and local resources, and facilitate focused and coordinated research into suicide. The roadmap is the result of an Executive Order President Trump signed March 5, 2019, calling on the Departments of Veterans Affairs, Defense, Health and Human Services, and several others to develop a comprehensive strategy for ending the national tragedy of suicide. The order was signed as data continue to show 132 Americans, including 20 service members, former never federally activated Guard and Reserve members, and veterans; die on average each day by suicide. “Veteran suicide is a tragedy this country started measuring in the decades following the Civil War, but one that sadly went unaddressed for generations,” said President Trump. “Today, my administration is taking steps to ensure the men and women who bravely fought for us when they were called will be given the care and attention, they need during some of their darkest hours. Our veterans will lead the way for all Americans as we end the stigma that for too long has kept us from talking openly about mental health and thwarted our efforts to provide the kind of assistance and support that will save lives.” “Suicide prevention is VA’s highest clinical priority, and the department is taking significant steps to address the issue,” said VA Secretary Robert Wilkie. “But just as there is no single cause of suicide, no single organization can end veteran suicide alone. That’s why PREVENTS aims to bring together stakeholders across all levels of government and in the private sector to work side by side to provide our veterans with the mental health and suicide prevention services they need. By employing a public-health approach to suicide prevention, President Trump’s roadmap will equip communities to help veterans get the right care, whenever and wherever they need it.”

The PREVENTS Task Force is co-chaired by White House Domestic Policy Council Director Brooke Rollins and Secretary Wilkie, and the roadmap released calls for several steps to be taken to further this critical national goal, many of which are already underway.

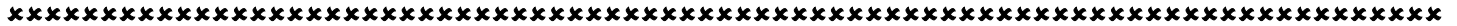
This summer, the PREVENTS Task Force will launch a nationwide public health campaign aimed at educating Americans that suicide is preventable, creating awareness of mental health and suicide prevention best practices with a call to action for ALL Americans to take the PREVENTS Pledge to Prevent Suicide. A primary goal of the campaign is to change the culture surrounding issues related to suicide and mental health. The campaign will stress everyone has a role to play in the well-being of family members, friends, and coworkers. It will create awareness about risk and protective factors and encourage people to reach out to those who may be struggling. The campaign will rely on coordinated messaging from all levels of government and non-government partners, as well as national digital, radio, and television public service announcements. Efforts will focus on dissemination in states with a high concentration of veterans. It will also rely on high-profile ambassadors who will help amplify these messages, including Second Lady Karen Pence, and U.S. Surgeon General Jerome Adams.

Too often, efforts have focused on a one-size-fits-all approach to suicide prevention that fails to consider an individual’s specific risk factors. As a key element of the roadmap, PREVENTS will launch the National Research Strategy to accelerate the development and implementation of effective solutions to help prevent veteran suicide. A critical first step toward this goal is the optimization of the current research ecosystem, which will accelerate the impact of veteran suicide research by enhancing interagency collaboration, evaluating the role of open science practices, leveraging team science and enhancing data resources and analysis. The PREVENTS Task Force will have an initial assessment of the current research landscape by the end of 2020 and will simultaneously work with Task Force agencies and non-governmental partners to begin moving toward this exciting goal. The development of the National Research Strategy will result in an increase in focus on the isolation of risk factors and an identification of the most effective treatment practices and interventions for veterans. This all of government and all of nation approach will lead to a dramatic shift in the ability to prevent suicide for veterans and all Americans.

The PREVENTS Task Force has built relationships with dozens of organizations across the country, including faith-based groups, universities, non-profits, corporations, small businesses, and state and local governments. The Task Force will continue to expand these relationships in order to share best practices for promoting mental health, ensuring awareness of and access to federal, state, local, and tribal resources, and coordinating and implementing the public awareness campaign across sectors. The Task Force will encourage all 50 states, the U.S. Territories, and the District of Columbia to sign the PREVENTS proclamation affirming their commitment to preventing suicide among veterans and all of their citizens.

The PREVENTS Task Force has already connected with more than 150 known community boards, 27 statewide suicide prevention teams, and Building Healthy Military Communities, a pilot initiative with seven partnering states. The Task Force has also completed an initial analysis of funding that will be available for suicide prevention efforts. During the next several months, PREVENTS will be implementing a plan to improve coordination among grant programs and develop a strategy to fill gaps through additional funding, as well as additional public-private partnerships. The PREVENTS Task Force is working with communities and stakeholders to develop and further efforts focused on coordinated systems of care. Government and non-government entities alike have a critical role to play in ensuring a comprehensive system of support.

DATES TO REMEMBER



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

CONVENTION SCHEDULES



American Legion

- StateCancelled
National.....Cancelled

AMVETS

- National.....Cancelled

Disabled American Veterans

- National.....Cancelled

Marine Corps League

- National.....Cancelled

Military Order of the Purple Heart

- National.....Cancelled

Veterans of Foreign Wars

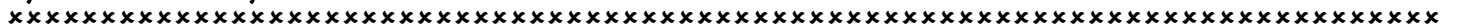
- National.....Cancelled

Vietnam Veterans of America

- National.....None announced for 2020

THE STAR SPANGLED BANNER

By Francis Scott Key



Oh, say can you see, by the dawn's early light,
What so proudly we hailed at the twilight's last gleaming?
Whose broad stripes and bright stars, through the perilous fight,
O'er the ramparts we watched, were so gallantly streaming?
And the rockets' red glare, the bombs bursting in air,
Gave proof through the night that our flag was still there.
O say, does that star-spangled banner yet wave
O'er the land of the free and the home of the brave?

And where is that band who so dauntingly swore
That the havoc of war and the battle's confusion
A home and a country should leave us no more?
Their blood has wiped out their foul footsteps' pollution.
No refuge could save the hireling and slave
From the terror of flight, or the gloom of the grave:
And the star-spangled banner in triumph doth wave
O'er the land of the free and the home of the brave.

On the shore, dimly seen through the mists of the deep,
Where the foe's haughty host in dread silence reposes,
What is that which the breeze, o'er the towering steep,
As it fitfully blows, half conceals, half discloses?
Now it catches the gleam of the morning's first beam,
In full glory reflected now shines on the stream:
'Tis the star-spangled banner! O long may it wave
O'er the land of the free and the home of the brave.

Oh! thus be it ever, when freemen shall stand
Between their loved homes and the war's desolation!
Blest with victory and peace, may the heaven-rescued land
Praise the Power that hath made and preserved us a nation.
Then conquer we must, when our cause it is just,
And this be our motto: "In God is our trust."
And the star-spangled banner in triumph shall wave
O'er the land of the free and the home of the brave.

DAV VAN CONTACTS TO AND FROM VA MEDICAL CENTERS

BOISE & SURROUNDING AREA TO BOISE VAMC

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

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

LEWISTON & SURROUNDING AREA TO SPOKANE VAMC

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

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

LIBBY & SURROUNDING AREA TO SPOKANE VAMC

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

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

COEUR D'ALENE & SURROUNDING AREA TO SPOKANE VAMC

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

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

SANDPOINT & SURROUNDING AREA TO SPOKANE VAMC

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

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

LEWISTON TO WALLA WALLA VAMC

Thursdays: Walla Walla VA Medical Center Van. 8:00 a.m. departure from the CBOC at 1630 23rd Avenue, Building 2.

Arrives at Walla Walla at 10:00 a.m. Departs Walla Walla at 1:30 p.m. Arrives Lewiston at 3:30 p.m.

If your appointment runs past the departure time of 1:30, there is no alternative for returning to Lewiston.

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

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

For the schedule or an appointment, call the VTS/DAV Transportation Office at (800) 613-4012 ext. 2003 or 1027.

