ADEQUATE DEPARTMENT OF VETERANS AFFAIRS RESOURCES

WHEREAS, there are more than 18 million living veterans; and

WHEREAS, Department of Veterans Affairs anticipates that enrollment in the Veterans Health Administration will grow to nearly 10 million veterans and more than 7.2 million of those veterans will be seen by VA for health care; and

WHEREAS, veterans use VA for numerous other benefit programs including education programs, recipients of disability compensation, and insurance policies; and

WHEREAS, the complexity of conditions that veterans which receive VA health for care will add demands to the system for years to come; and

WHEREAS, even though appropriations for VA continue to increase, they have not kept pace with demand and the rate of inflation; and

WHEREAS, Congress has directed VA to review its health infrastructure and resources through the Asset and Infrastructure Review (AIR) Commission; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the Congress of the United States to authorize appropriations for the Department of Veterans Affairs which fully fund and maintain the integrity and enhancement of veteran entitlement programs and health care system.

BE IT FURTHER RESOLVED, that we ensure that any recommendations proposed by the AIR Commission fulfil the Department of Veterans Affairs' mission to provide quality, timely health care that respects the service and sacrifices of our nation's veterans.

VA PHARMACEUTICAL CO-PAYMENTS

WHEREAS, veterans, other than those with a service-connected disability rating of 50 percent or greater, those who are receiving medications for their service-connected conditions or those whose incomes fall below the nonservice-connected pension threshold, must pay a co-payment for each 30-day supply of medications obtained through the Department of Veterans Affairs; and

WHEREAS, there have been repeated proposals to change VA pharmaceutical copayments, placing an undue hardship on many veterans; and

WHEREAS, the increase in costs of the benefit would likely place an undue burden on veterans, limit access to earned benefits, and serve to inequitably balance the federal budget on the backs of veterans; and

WHEREAS, pharmaceuticals are part of the VA's standard health benefits package and must be provided to all eligible veterans; and

WHEREAS, VA is required by current law to charge veterans for life saving preventive medicines which are cost-free under private sector insurance and other public health care options; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we oppose increases in Department of Veterans Affairs pharmaceutical co-payments; and

BE IT FURTHER RESOLVED, that Congress must exempt preventive medicines from VA pharmaceutical co-payment requirements.

VA MEDICARE AND TRICARE REIMBURSEMENT

WHEREAS, the Veterans of Foreign Wars of the United States views it as essential that the Department of Veterans Affairs health care system provide qualifying veterans with timely and accessible care; and

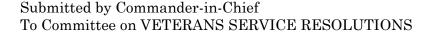
WHEREAS, VA collects third party payment for treatment, but current law prevents VA from collecting from the Medicare Trust Fund and TRICARE in certain circumstances; and

WHEREAS, a large number of VA's patients are eligible for Medicare and TRICARE: and

WHEREAS, VA medical care collections are used to supplement the appropriations VA receives from Congress to deliver efficient and effective health care at a lower cost than private sector health care providers; and

WHEREAS, with the increased demand on its health care system, it is now absolutely essential that VA be authorized to collect federal dollars to supplement its annual appropriations to ensure adequate funding for the Veterans Health Administration; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we support enactment into law of legislation authorizing Department of Veterans Affairs to receive reimbursement for the cost of non-service connected care that is provided to veterans who are enrolled in Medicare or TRICARE.



GERIATRIC AND EXTENDED CARE ELIGIBILITY

WHEREAS, the Veterans of Foreign Wars of the United States has called upon Congress to enact legislation to regulate and expand eligibility for Department of Veterans Affairs health care and provide all veterans with mandated access to the full continuum of VA health care services which include geriatric and extended care; and

WHEREAS, current VA regulations extend VA eligibility for nursing home care to those veterans who are service-connected at 70 percent or above or those seeking nursing home care for a service-connected disability; and

WHEREAS, the demand for VA geriatric and extended care; is increasing as the veteran population continues to age; and

WHEREAS, VA nursing home care units are VA hospital-based and provide an intensive and extensive level of nursing home care supported by the clinical specialties and other services within the host hospital; and

WHEREAS, VA nursing home care is considered the "safety net" for VA outpatient services such as residential care, respite care, hospital-based home care, adult day health care, homemaker/home health aid services, medical foster homes and other extended care programs; and

WHEREAS, VA, through their own statements, recognizes the difference in eligibility for nursing home care and inpatient hospital care as inconsistent with the principles of sound medical practice, which support continuity of care for veterans; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to establish a standard Department of Veterans Affairs nursing home entitlement for all veterans enrolled in the VA health care system; and

BE IT FURTHUR RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to provide sufficient funding to the Department of Veterans Affairs to ensure the VA health care system provides home and community-based services for veterans as they require extended care.

TRAUMATIC BRAIN INJURY HEALTH CARE

WHEREAS, Department of Defense reports that more than 430,000 service members have sustained Traumatic Brain Injury since 2000; and

WHEREAS, veterans with blast injuries, blunt trauma, motor vehicle accidents, and falls are at risk for TBI which often goes unrecognized; and

WHEREAS, even patients with mild TBI may have long-term health consequences; and

WHEREAS, veterans with severe TBI require a lifetime of intensive services to care for their injuries, yet many Department of Veterans Affairs medical facilities are neither properly staffed nor equipped to provide the necessary screening and comprehensive health care services veterans suffering from TBI require; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to provide sufficient funding to the Department of Veterans Affairs to ensure that appropriate screening, diagnostic services, treatment and life-long case management services are available to every veteran suffering from conditions associated with service-connected head trauma to include, but not limited to Traumatic Brain Injuries; and

BE IT FURTHER RESOLVED, that we urge the Secretary of Veterans Affairs to improve research pertaining to screening methods, diagnostic tools, and treatment of conditions associated with TBIs caused by blast injuries, blunt traumas, motor vehicle accidents, falls and other related injuries to ensure veterans who have experienced a TBI receive effective health care.

PTSD AND MENTAL HEALTH CARE

WHEREAS, the Department of Veterans Affairs (VA) has indicated that treating Post Traumatic Stress Disorder (PTSD) and providing Mental Health Care among returning war veterans is one of its highest priorities, and the VA operates a nationwide network of nearly 200 specialized PTSD outpatient treatment programs; and

WHEREAS, the early and accurate screening, diagnosis and treatment for PTSD, depression, substance use, and other mental health disorders, yields optimal patient outcomes, and statistics have shown that these conditions, left untreated or poorly treated, can lead to increases in suicide attempts or death by suicide among a host of other negative consequences; and

WHEREAS, studies conducted by VA though the National Center for PTSD found that approximately 20 percent of Iraq and Afghanistan veterans have been diagnosed with PTSD; and

WHEREAS, VA expects an increase in PTSD conditions as veterans return from Iraq and Afghanistan after multiple tours of duty; and

WHEREAS, available research has not sufficiently evaluated the clinical effectiveness of treatment programs for veterans diagnosed with and/or suffering from the effects of traumatic brain injuries, PTSD, or other mental health conditions, and adequate research into the brain's response to internal and external influences that could result in mental illness has yet to be undertaken; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we strongly urge the Department of Veterans Affairs to continue to adequately staff VA mental health treatment and research programs; and

BE IT FURTHER RESOLVED, that we urge Congress to dedicate adequate resources to address the alarming rate at which Veterans die by suicide to include studying the full scope of VA benefit and care programs; and

BE IT FURTHER RESOLVED, that we urge the Department of Veterans Affairs to assess what specific treatments or practices are the most effective in helping our veterans cope with their PTSD.

VA HEALTH CARE FOR WOMEN VETERANS

WHEREAS, the total number of women veterans continues to grow, as does the number of women utilizing the Department of Veterans Affairs (VA) benefits; and

WHEREAS, VA reports that only 25 percent of women veterans utilize VA health care facilities; and

WHEREAS, VA currently has two Women's Health Primary Care Providers (WH-PCP) at all of the VA's health care systems. In addition, there are WH-PCPs in 90 percent of the community-based outpatient clinics; and

WHEREAS, women veterans have reported that VA staff continue to confuse them for spouses or caregivers and even challenge their veteran status; and

WHEREAS, women veterans also reported concerns regarding the gender specific competencies of VA health care professionals; and

WHEREAS, VA reported that more than 80 percent of enrolled women veterans are assigned to a Designated Women's Health Provider (DWHP), who have experience and training in women's health care; and

WHEREAS, we acknowledge that the VA has improved the care and services it provides women veterans; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge VA to continue to staff, equip, monitor and enhance health care services available to women veterans at all VA medical facilities and expand its designated women's health program to mental health care to ensure access to mental health care providers who understand women-specific mental health conditions; and

BE IT FURTHER RESOLVED, that we urge the Secretary of Veteran Affairs to improve outreach to women veterans, allow women to choose the gender of their VA health care providers and properly train VA's workforce to treat women veterans with the respect and dignity they have earned and deserve.

EXPAND VA CAREGIVER BENEFITS

WHEREAS, the Department of Veterans Affairs Comprehensive Assistance for Family Caregivers Program provides a monthly stipend, respite care, mental and medical health care, and necessary training and certifications for caregivers of veterans who were severely injured; and

WHEREAS, the comprehensive program has begun to expand for the caregivers of veterans of other eras; and

WHEREAS, the Veterans of Foreign Wars of the United States believes severely wounded, injured, and ill veterans of all conflicts have made incredible sacrifices, and all family members who care for them are equally deserving of our recognition and support; and

WHEREAS, the Department of Defense provides support to family caregivers of members of the armed forces who are catastrophically disabled through its Special Compensation for Assistance with Activities of Daily Living program, which includes disability caused by illnesses in its eligibility criteria; and

WHEREAS, the VA Comprehensive Assistance for Family Caregivers Program excludes veterans who require home caregiver services as a result of serious illnesses; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to provide the accurate resources to VA for the expansion of the Department of Veterans Affairs Comprehensive Assistance for Family Caregivers Program to veterans of all eras; and

BE IT FURTHER RESOLVED, that we urge Congress to fully align the VA's Comprehensive Assistance for Family Caregivers Program and the Department of Defense Special Compensation for Assistance with Activities of Daily Living program to include eligibility criteria for those who require caregiver services as a result of serious illnesses incurred in the line of duty; and

BE IT FURTHER RESOLVED, that we urge VA to ensure that veterans who previously qualified for benefits associated with the Comprehensive Assistance for Family Caregivers Program are not erroneously removed from the program and have clear recourse if they feel their benefits may be unjustly severed.

SUSTAINABLE COMMUNITY CARE OPTIONS

WHEREAS, members of the Veterans of Foreign Wars of the United States report being satisfied with the health care they receive from the Department of Veterans Affairs and believe the VA health care system must be improved to ensure all veterans have timely access to high quality care; and

WHEREAS, the VFW has consistently worked with Congress and VA to improve the health care VA provides our nation's veterans through community care programs to ensure veterans have a seamless experience; and

WHEREAS, the veteran population is a shifting demographic with evolving health care needs, which necessitates that VA identify new and innovative ways to deliver timely access to high quality, comprehensive, and veteran-centric health care; and

WHEREAS, VA is now allowed to charge veterans copayments for service-connected care they receive from networked urgent care clinics in the community; and

WHEREAS, the networks of VA community care programs, to include dependent care delivered through CHAMPVA, are limited by factors that influence the willingness of private sector providers to participate in these programs; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we oppose any out-of-pocket costs for care coordinated by VA for service-connected disabilities; and

BE IT FURTHER RESOLVED, that VA comply with federal prompt payment requirements and incentivize private sector health care providers to participate in its community care programs, while ensuring veterans and eligible dependents are not held financially liable for services furnished through such programs; and

BE IT FURTHER RESOLVED, that VA must remain the guarantor and coordinator of care for enrolled veterans and that the VFW remains opposed to privatizing VA or eroding VA's ability to provide direct care to veterans; and

BE IT FURTHER RESOLVED, that Congress must provide Department of Veterans Affairs with the oversight, appropriations and assets necessary to properly implement the VA MISSION Act as intended by Congress; and

BE IT FURTHER RESOLVED, that Congress and VA must furnish and conduct proper outreach to ensure veterans are fully aware of their health care options.

RESEARCH ON MEDICAL CANNABIS TREATMENTS

WHEREAS, over the past several years, Post-Traumatic Stress Disorder and Traumatic Brain Injury have been thrust into the forefront of the medical community and general public in large part due to suicides and over medication of veterans; and

WHEREAS, medical cannabis is legal in more than 38 states, the District of Columbia, Guam, Puerto Rico, and Mariana Islands, with more states pending legalization legislation, state funding has supported research into the effective use of medicinal marijuana for PTSD and other health care issues; and

WHEREAS, Department of Veterans Affairs cannot legally prescribe cannabis products as long as the federal government continues to categorize it as a Schedule 1 drug; and

WHEREAS, states that have legalized medical cannabis have seen a 15-35 percent decrease in opioid overdose and abuse; and

WHEREAS, the U.S. Senate and House of Representatives have recently introduced legislation which would allow VA doctors to discuss the use of medical cannabis with veteran patients to treat service-connected disabilities; and

WHEREAS, in April 2016, the Drug Enforcement Agency gave its approval to a study on the effect of medical marijuana on post-traumatic stress disorder, the first federally funded, randomized, controlled research in the U.S. for PTSD, other substantial evidence from comprehensive studies by the National Academy of Sciences and the National Academic Press concluding cannabinoids are effective for treating various medical conditions; and

WHEREAS, veterans are at risk of losing their right to possess or own firearms if they report their use of marijuana to VA healthcare providers based on the difference in Federal and State laws; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we support federally funded research of Medical Cannabis for veterans being treated by Department of Veterans Affairs; and

BE IT FURTHER RESOLVED, veterans who use state approved marijuana programs should not forfeit their Second Amendment rights.

Submitted by Commander-in-Chief To Committee on VETERANS SERVICE RESOLUTIONS

COVID-19 LESSONS LEARNED

WHEREAS, there were over 612,000 VA COVID-19 cumulative cases and more than 21,000 known deaths within the Department of Veteran Affairs; and

WHEREAS, shortly before March 13, 2020, VA instructed veterans with previously scheduled care appointments to contact their facilities to convert to audio-only and video-based telehealth appointments, therefore in home or off-site telehealth visits increased by 1,386%; and

WHEREAS, previous to the COVID-19 pandemic VHA had almost 45,000 unfilled vacancies, by the end of FY21 Q4 VHA's vacancies increased to 47.910; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to provide the appropriate funding to ensure telehealth is an available option to access VA care by improving technology, accessibility, and security; and

BE IT FURTHER RESOLVED, that we urge the Veterans Health Administration to ensure that the Office of Human Resources have the necessary staff to properly implement policies and procedures to accelerate qualified employees' hiring processes to adequately maintain the number of health care personnel.



CONSIDER TREATMENT FOR A PRESUMPTIVE SERVICE CONNECTED CONDITION OR A SERVICE CONNECTED CONDITION THAT HAS INCREASED IN SEVERITY AS A CLAIM FOR VA COMPENSATION

WHEREAS, many service members have suffered from diseases that are recognized to be presumptive; and

WHEREAS, veterans suffering from diseases which include many types of cancer, as well as diabetes and other chronic diseases, may not be aware that they may be eligible for service connection, even if they are being treated in a Department of Veterans Affairs, Veterans Health Administration (VHA) facility; and

WHEREAS, the Department of Veterans Affairs, Veterans Benefits Administration (VBA) neither communicates with nor obtains treatment records from VHA until a claim for compensation benefits has been filed with VBA; and

WHEREAS, many VHA facilities are not currently staffed or equipped to provide appropriate counseling to veterans or their families on how to file a claim for service connected compensation benefits; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to enact legislation requiring that treatment by the Department of Veterans Affairs VHA facility for a condition or disease recognized, as presumptively service connected or a service connected disability that has increased in severity will serve as the effective date for service connected compensation; and

BE IT FURTHER RESOLVED, that we urge Congress to enact legislation requiring VA to notify veterans, upon receiving treatment for a presumptive disability, that said disability is a claimable presumptive service connected disability.

EXTENDING GULF WAR PRESUMPTIONS BEYOND 2026 AND TO AFGHANISTAN THEATER VETERANS

WHEREAS, many service members served in the Afghanistan theater of operations since the start of Operation Enduring Freedom; and

WHEREAS, these veterans have served under circumstances similar to those served in the Southwest Asia theater of operations; and

WHEREAS, Afghanistan is not considered part of the Southwest Asia theater of operations during; and

WHEREAS, veterans of Afghanistan are suffering from similar undiagnosed conditions as those who have served in the Southwest Asia theater of operations; and

WHEREAS, the authority to extend presumptive service connected conditions for Southwest Asia theater veterans is set to expire on December 31, 2026; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress and Department of Veterans Affairs to support research to verify whether service members who served in Afghanistan are subjected to the same environmental hazards as those who served in Iraq, so that appropriate benefits, including eligibility for compensation based on undiagnosed illnesses, and medical care eligibility, will be provided retroactive to the beginning of Operation Enduring Freedom; and

BE IT FURTHER RESOLVED, that VA must permanently extend presumptive disability compensation benefits for Gulf War veterans to ensure all service members who serve in Southwest Asia theater of military operations are afforded this protection.

EXTEND SERVICE CONNECTION PRESUMPTION TO BLAST SURVIVORS

WHEREAS, the Global War on Terrorism has exposed more than 330,000 service members to diagnosable blast injuries, with thousands more going undiagnosed and untreated; and

WHEREAS, the nature of the conflict these service members face is frequently guerrilla-style combat where the enemy is widely known to use improvised explosive devices and indirect fire; and

WHEREAS, much of the attention has been focused on the apparent physical wounds, there are many unseen effects of blast trauma, which could include brain injuries, long-term hearing and balance issues, chronic pain, air embolisms, and injuries mistaken for personality disorders; and

WHEREAS, some effects associated with blast injuries may not become manifest immediately allowing the service member to return to the field, only to have their ability to fulfill their duty dramatically affected by the long-term effects of the blast; and

WHEREAS, many injuries are difficult to diagnose and service members can suffer from these disabilities for many years after the blast; and

WHEREAS, a large number of veterans have been identified as having been diagnosed at Department of Veterans Affairs medical centers with conditions possibly related to blast exposures since the start of the Global War on Terrorism; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to approve a presumption of service connection for conditions associated with blast exposure.

TINNITUS AND HEARING LOSS PRESUMPTIVE COMPENSABLE SERVICE CONNECTION

WHEREAS, veterans of the armed services who served in combat or in a position (e.g., member of a gun crew on board Navy or Coast Guard ships) or certain occupational specialties have a high incidence rate of hearing loss or tinnitus as a direct result of acoustic trauma; and

WHEREAS, veterans, from earlier, were not afforded a comprehensive audiological examination upon entrance and discharge from the military services, but instead were subject to highly inaccurate test methods; and

WHEREAS, in recent years the second leading disability granted service connection by Department of Veterans Affairs was for hearing loss or tinnitus; and

WHEREAS, the VA has the authority to grant service connection for disabilities associated with combat-related diseases or injuries even if medically undocumented at the time of service; and

WHEREAS, in 2005 the Institutes of Medicine (IOM) (now referred to as the National Academy of Sciences) released a study that showed that nearly all service members are exposed to acoustic trauma at some point during their military service and that many experience hearing loss and/or tinnitus as a result, often years after service. However, "after the fact, hearing loss or tinnitus incurred as a result of military service cannot be distinguished with certainty from subsequent noise-induced hearing loss..." Given these findings, reasonable doubt must be resolved in favor of veterans who suffered acoustic trauma in service; and

WHEREAS, tinnitus is a separate diagnosis that does not necessarily indicate hearing loss for VA purposes, and has been rated as a separate condition for more than a decade; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, we urge Congress and the Secretary of Veterans Affairs to grant service connection on a presumptive basis for any veteran diagnosed after discharge with hearing loss or tinnitus when the evidence shows that the veteran participated in combat or worked in a position or occupational specialty likely to cause acoustic trauma; and

BE IT FURTHER RESOLVED, that we urge the Secretary of Veterans Affairs to amend the Schedule for Rating Disabilities to provide a minimum compensable evaluation for any service connected hearing loss for which a hearing aid is medically indicated; and

BE IT FURTHER RESOLVED, that we oppose any changes to the Schedule for Rating Disabilities that seek to include tinnitus as a component of hearing loss, potentially denying veterans of service connected benefits.

VA CLAIMS WORKLOAD

WHEREAS, the Department of Veterans Affairs (VA) has made significant progress in reducing the backlog of claims for compensation, pension, education benefits and appeals, yet submissions and appeals continues to grow; and

WHEREAS, Congress has provided increased funding for staffing at VA and improved its oversight. Yet, the attrition rate and quality of new hires and retirement of journeymen claims processors continues to challenge VA's ability to train and maintain a technically proficient workforce; and

WHEREAS, VA has attempted to increase workload production by implementing arbitrary timeliness goals that rarely account for the complexity of claims; and

WHEREAS, VA continues to order redundant and often unnecessary examinations when the evidence of record is sufficient to make a determination, or claimants submit adequate medical records and doctors opinions; and

WHEREAS, after dozens of Congressional hearings, numerous studies, changes of VA leadership, altered workflow, amended work processes, erratic IT development, as well as fruitless pilot programs and experimental initiatives, it is clear that there are no easy, simple or quick solutions that lead to the speedy reduction of the backlog; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that Congress require Department of Veterans Affairs to accept private medical evidence and opinions in lieu of VA examinations whenever they are sufficient for rating purposes; and

BE IT FURTHER RESOLVED, that we continue to advise that Congress exercise its oversight authority and provide the vital resources necessary to sustain a sufficient workforce capable of effectively managing the workload and provide quality and timely service to those claiming benefits or appealing decisions from VA; and

BE IT FURTHER RESOLVED, that Congress bolsters its oversight and funding of VA technology initiatives to ensure that they are constructive, relevant and effective in streamlining claims processing and improving quality of entitlement decisions.

BURIAL PLOT ALLOWANCE

WHEREAS, the Department of Veterans Affairs pays certain burial benefits at the death of a veteran who dies from a service connected disability. VA pays a different burial benefit and plot allowance on behalf of a wartime veteran who dies from a non-service connected condition; and

WHEREAS, the cost of funeral expenses in the private sector have increased annually and the current VA benefit is \$2,000 for a service connected death, and \$300 burial and up to \$796 plot allowance for a qualifying non-service connected death; well below the cost in the private sector; and

WHEREAS, Congress should provide the resources to meet the changing needs of burial benefits and bring burial allowances and plot allowances to the same proportionate level they were when the benefits were joined in 1973; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that Congress increase all burial benefits to what the *Independent Budget* recommends. The VFW urges Congress to provide the resources required to meet the burial needs of all veterans who have served their country so honorably and faithfully.

TOXIC EXPOSURES

WHEREAS, for decades, veterans have returned home from serving their nation with an array of unexplained health conditions and illnesses associated with the toxic exposures and environmental hazards they encountered in service; and

WHEREAS, without documentation in their service records, veterans often lack evidence that is needed to prove an in-service event for service connection; and

WHEREAS, VA has been unwilling to extend presumptive conditions despite the National Academies of Sciences, Engineering, and Medicine (NASEM) publishing findings of sufficient evidence associating said conditions to toxic exposure; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to invest adequate resources to study, diagnose, and treat conditions and illnesses associated with toxic exposures; and

BE IT FURTHER RESOLVED, that we urge Congress and the Department of Veterans Affairs to grant a presumption of service connection for all conditions and illnesses that are deemed by scientific evidence to be at least as likely as not associated with or caused by exposure to a toxic substance or environmental hazard and not solely on the basis of a definitive causal link or scientific certainty; and

BE IT FURTHER RESOLVED, that we urge the Department of Defense to disclose known and potential toxic exposures during all military operations; and

BE IT FURTHER RESOLVED, that Congress ensures that the Department of Defense expedites declassification efforts related to exposure events and that the Department of Veterans Affairs extends presumptive service connection to veterans suffering from conditions or illnesses found to be associated with exposure to toxic substances.

DIGITAL CLAIMS PROCESS

WHEREAS, advancements in technology have created an expectation among many Americans to conduct business in real time in a secure, digital space; and

WHEREAS, Department of Veterans Affairs now processes nearly all its workload in a digital environment; this includes claims for compensation, pension, survivor benefits and appeals, but still cannot consistently offer timely access to this digital environment to veterans' representatives in the benefits process; and

WHEREAS, VA has committed to developing new self-service tools for veterans to file claim actions, but has yet to introduce comparable secure resources that would allow VSOs to provide quality claims assistance to veterans in real time, relying instead on its antiquated Personal Identity Verification (PIV) credentialing process; and

WHEREAS, the Veterans of Foreign Wars (VFW) has engaged with VA to assist in developing cutting-edge digital tools for VA-accredited representatives to provide high quality assistance anytime, anywhere, such as electronic notification and Claims Accuracy Review; and

WHEREAS, VSOs currently contract with third-party vendors or develop internal solutions at substantial cost to the VSOs and without consistent integration with VA systems; and

WHEREAS, VSOs are currently restricted by the VA Adjudications Manual from intervening in the resolution of claims errors prior to the promulgation of a VA rating decision, despite VSOs currently having the capability to do so, which likely results in unnecessary appeal actions; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Department of Veterans Affairs to update regulations to authorize VSOs the same advocacy rights in the digital environment as were allowed in the paper-based claims process and honor proof of digital transmission to VA as the effective date; and

BE IT FURTHER RESOLVED, that the Secretary of Veterans Affairs work with all VA-accredited entities to develop real-time, secure access to tools that allow advocates to provide comprehensive assistance to clients in real time; and

BE IT FURTHER RESOLVED, that VA grant VSOs the authority to intervene on VA errors prior to the issuance of a rating decision, during which, VA shall not finalize decisions without the VSO electronically certifying that errors or discrepancies have been resolved.

SERVICE-DISABLED VETERANS LIFE INSURANCE

WHEREAS, Department of Veterans Affairs has established life insurance designed to support veterans whom might otherwise be uninsurable due to service connected disabilities; and

WHEREAS, by statute the maximum coverage rate is \$40,000; and

WHEREAS, the Secretary of Veterans Affairs has statutory authority to increase coverage if he or she determines that such new maximum amount and the premiums therefore are administratively and actuarially sound; and

WHEREAS, VA life insurance rates will not be competitive with private insurance company rates should the VA Secretary fail to exercise his or her discretion to increase the maximum coverage amount; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress and Department of Veterans Affairs to ensure that VA life insurance rates are competitive with private insurance company rates; and

BE IT RESOLVED FURTHER RESOLVED, that we urge Congress to pass legislation to index for inflation the maximum coverage rate of the Service-Disabled Veterans Insurance program.

VA AUTOMOTIVE ALLOWANCE

WHEREAS, the Department of Veterans Affairs will issue only one certificate of eligibility for financial assistance in the purchase of a new or used automobile or other conveyance; and

WHEREAS, the Department of Veterans Affairs will provide or assist in providing eligible veterans with a second automobile or other conveyance when the first vehicle purchased with VA financial assistance is destroyed as a result of any natural catastrophe, the destruction was not the veterans fault or the veteran does not receive compensation for the loss from a property insurer; and

WHEREAS, current technology, design and safety advances have reached such a level that automobiles and conveyances are superior to every model produced in the last 50 years; and

WHEREAS, it is impractical to assume veterans who require such assistance would not benefit from better design and equipment changes to make it easier to accomplish daily tasks, attend medical or other appointments and experience an overall better quality of life; and

WHEREAS, veterans who require such assistance are unduly penalized by the narrow scope of this program by virtue of the nature of it being a "one time" benefit; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress and the Secretary of Veterans Affairs to remove the unreasonable restrictions of a once in a lifetime grant; and

BE IT FURTHER RESOLVED, that the Secretary of Veterans Affairs authorize veterans, or their duly authorized representatives who are already in receipt of the automotive allowance, those with applications pending, and any future qualified applicant be allowed to reapply for this essential benefit at the end of the sales or lease contract or every five years, whichever is greater, so as to maintain a practical quality of life and benefit from current safety and technology standards.

DOMICILIARY PROGRAMS AND TEMPORARY TOTAL RATINGS

WHEREAS, Department of Veterans Affairs provides free medical treatment for service connected disabilities; and

WHEREAS, VA grants temporary total ratings for veterans hospitalized in excess of 21 days due to service connected disabilities; and

WHEREAS, veterans are not able to work while participating in VA domiciliary and day programs; and

WHEREAS, VA has mischaracterized the United States Court of Appeals for Veterans Claims decision *Mangham v. Shinseki* and now no longer considers domiciliary and day programs as "hospital care" for temporary 100 percent disability ratings; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that Congress restore eligibility for temporary 100 percent ratings to include medical treatment provided by all domiciliary and day programs provided the program is treating a service connected disability.

IMPROVE EDUCATION BENEFITS FOR SURVIVORS

WHEREAS, the Survivors and Dependents Educational Assistance (DEA) Program provides educational support to eligible dependents (spouse or children) of a service member who died on active duty or a veteran who died or is permanently and totally disabled due to a service-connected disability; and

WHEREAS, while DEA benefits increase annually, they fail to increase at the same rate as tuition; and

WHEREAS, according to the College Board Advocacy and Policy Center, the average cost of attendance, including tuition, fees, and room and board, at a four-year public university is consistently more than twice the rate of reimbursement for DEA; and

WHEREAS, the Veterans of Foreign Wars of the United States worked with Congress to successfully expand the Gunnery Sgt. John David Fry Scholarship to offer Post-9/11 GI Bill benefits to eligible surviving children, and spouses; and

WHEREAS, Congress recently increased the monthly allowance for DEA while also decreasing the amount of months to utilize the benefit; and

WHEREAS, while nothing can repay the enormity of the loss and sacrifice of military survivors, providing a quality educational benefit will provide them the opportunity to build a meaningful and productive future for themselves and their children; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to increase Survivors and Dependents Educational Assistance Program benefits to reflect the rising cost of education, with future increases indexed to reflect the average cost of attendance as reported by the Department of Education.

VETERAN HOUSING AND FOOD SECURITY PRIORITIES

WHEREAS, homelessness among veterans has significantly decreased due to coordinated efforts across multiple agencies of government and the ambitious goal of the Department of Veterans Affairs to eliminate homelessness among veterans; and

WHEREAS, a growing number of female veterans experience homelessness, many of whom have dependents in their care; and

WHEREAS, local and state homeless veteran agencies and programs are federally funded by the Department of Veterans Affairs Grant and Per Diem program and the Department of Labor Homeless Veterans Reintegration program; and

WHEREAS, programs such as VA's Supportive Services for Veteran Families and the joint Housing and Urban Development and VA's Supportive Housing program are showing signs of success in reducing homelessness; and

WHEREAS, research has found that among 18- to 64-year-olds, veterans are 7.4 percent more likely to live in a food-insecure household than nonveterans, while veterans also use food assistance programs like the Supplemental Nutrition Assistance Program (SNAP) at lower rates than civilians; and

WHEREAS, the VA acknowledges its obligation to maintain comprehensive assistance to veterans who are experiencing homelessness or at risk of homelessness to the best of its capabilities; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the President and Congress to continue to address veterans' homelessness by increasing the availability of affordable housing, expanding educational and employment opportunities and training and providing gender-specific services; and

BE IT FURTHER RESOLVED, that Department of Veterans Affairs should periodically adjust Grant and Per Diem program rates for inflation to ensure sufficient operation of homeless veteran assistance programs; and

BE IT FURTHER RESOLVED, that VA compensation and non-service connected pension should not be considered countable income by the Department of Housing and Urban Development and Department of Agriculture in determining program eligibility.

ENSURE VETERAN SUCCESS IN EDUCATION

WHEREAS, our nation has consistently supported the future success of our warfighters through robust veterans' education benefits, historically molding generations of proven leaders; and

WHEREAS, the Veterans of Foreign Wars of the United States has worked to secure and preserve quality education benefits for all generations of veterans; and

WHEREAS, Department of Veterans Affairs enrolled nearly one million veterans across all Veteran Benefits Administration (VBA) education benefit programs in the past academic year; and

WHEREAS, despite significant improvements to consumer resources for student veterans, inconsistent access to quality consumer information and financial hardships continue to drive perceptions in Washington that student-veterans are not succeeding in higher education; and

WHEREAS, many Post- 9/11 veterans face losing their earned GI Bill due to delimitating dates or do not fully qualify for the Post-9/11 GI Bill benefit despite having served in combat; and

WHEREAS, certain schools and programs seek to circumvent benefit guidelines in order to reap significant financial benefit; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to ensure proper oversight of Department of Veterans Affairs educational benefit programs by developing quality metrics with which to demonstrate student veteran success in higher education, and close financial loopholes through which certain academic programs can exploit GI Bill tuition models; and

BE IT FURTHER RESOLVED, that Congress ensure veterans receive equitable access to benefits like housing payments and quality pre-enrollment educational information to ensure veterans are academically and financially prepared to succeed in higher education; and

BE IT FURTHER RESOLVED, that we work to extend full GI Bill benefits for all combat veterans and eliminate any delimitating dates for all VBA education benefits, preserving quality GI Bill benefits for all current conflict veterans and future conflict veterans to ensure they have access to quality education assistance programs.

VETERAN READINESS AND EMPLOYMENT PROGRAM ELIGIBILITY

WHEREAS, the period of eligibility for Department of Veterans Affairs Veteran Readiness and Employment benefits is 12 years from the date of separation from the military or the date the veteran was first notified by VA of a service-connected disability rating; and

WHEREAS, many veterans do not understand their eligibility to VR&E services and the benefits of the program until later in life when they become so disabled that their disabilities create an employment barrier; and

WHEREAS, VR&E lacks quality performance measures that measure rehabilitation based on the long-term effects of disability and the likelihood that a disability may require further rehabilitation; and

WHEREAS, VR&E can take more than 90 days from enrollment to the start of services; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to change the eligibility delimiting date for Department of Veterans Affairs Veteran Readiness and Employment program by eliminating the 12-year-delimiting date for eligibility to Chapter 31 benefits and allow all veterans with employment impediments or problems with independent living to qualify for VR&E rehabilitation services for life; and

BE IT FURTHER RESOLVED, that the VA must restructure performance measures to emphasize long-term employment versus the current short-term indicators of success. Furthermore, VR&E should continually follow up with veterans considered to be employable to ensure that the training and employment placement plans have been successful and if unsuccessful, to ensure the reasons and bases are clearly communicated to the veteran; and

BE IT FURTHER RESOLVED, that VA streamlines eligibility and entitlement to VR&E programs to provide more timely intervention and assistance to all disabled veterans; and

BE IT FURTHER RESOLVED, that VA must provide better information about VR&E during the Transition Assistance Program Class for separating service members.

SUPPORT VETERANS EMPLOYMENT AND TRAINING PROGRAMS

WHEREAS, the Veterans of Foreign Wars recognizes that it is in the best interest of our nation to have a strong and viable veterans employment and training system; and

WHEREAS, Congress has recognized that veterans of all eras, especially recently separated service members and veterans with service connected disabilities find it difficult to obtain meaningful employment and careers; and

WHEREAS, while there are certain employment and educational programs in place for veterans, such programs must have a proactive, long-term career focus; and

WHEREAS, programs designed to encourage federal employment of veterans, assist veterans in finding employment in their communities, and encourage federal contractors to hire veterans demand reasonable funding and responsible oversight to ensure success; and

WHEREAS, state agencies who receive federal funding are not held to the same veteran hiring standards as the federal government; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we support viable and effective veterans employment and training programs, such as the Veteran Employment Through Technology Education Courses (VET TEC), the Jobs for Veterans State Grant program, and other Department of Labor Veterans Employment and Training Service programs; and

BE IT FURTHER RESOLVED, that we urge Congress to improve and enforce federal veteran-hiring mandates for contractors who do business with the federal government as outlined in Title 38 USC 4212; and

BE IT FURTHER RESOLVED, that federal veteran hiring initiatives and programs must be held accountable for the effectiveness of the services provided and funding should be adjusted to reflect abilities in creating long-term meaningful careers for veterans, and state agencies that receive federal funding must be held to the same standards and report to Congress on the success of veteran hiring initiatives.

VETERAN ENTREPRENEURSHIP

WHEREAS, government reports consistently indicate that many federal agencies fail to reach their three-percent contracting goal for disabled veterans; and

WHEREAS, many veterans and disabled veterans lack access to the necessary capital to invest in small business opportunities; and

WHEREAS, the federal government has failed to deliver adequate tools to veterans who could help to fulfill the three-percent federal contracting mandate; and

WHEREAS, veterans eligible for the Veterans Readiness and Employment (VR&E) program are precluded from the self-employment track if not severely disabled or homebound; and

WHEREAS, the Small Business Administration remains underfunded and understaffed to fulfill its mission of establishing and maintaining robust veterans' programs; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that Congress expand entrepreneurial education and networking programs for veterans via VR&E, veterans small business centers and other entrepreneurship programs funded through the Small Business Administration; and

BE IT FURTHER RESOLVED, that Congress expand veteran's and disabled veteran's access to capital by expanding direct loan programs through the Small Business Administration; but such programs should never come at the expense of other earned veterans' benefits; and

BE IT FURTHER RESOLVED, that Congress hold Department of Veterans Affairs accountable for its duty to properly verify veteran entrepreneurs to help achieve the federal government's three-percent veterans contracting goal.