

## **Resolution No. 601**

### **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.

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

## **Resolution No. 602**

### **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 co-payments, 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.

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

## **Resolution No. 603**

### **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.

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

## **Resolution No. 604**

### **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 FURTHER 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.

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

## **Resolution No. 605**

### **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.

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

## **Resolution No. 606**

### **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 through 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.

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

## **Resolution No. 607**

### **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.

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

## **Resolution No. 608**

### **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.

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



## **Resolution No. 609**

### **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.

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

## **Resolution No. 610**

### **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

## **Resolution No. 611**

### **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.

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

## **Resolution No. 612**

### **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.

## **Resolution No. 613**

### **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.

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

## **Resolution No. 614**

### **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.

## **Resolution No. 615**

### **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.

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

## **Resolution No. 616**

### **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.

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



## Resolution No. 617

### 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.

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

## **Resolution No. 618**

### **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.

## **Resolution No. 619**

### **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.

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

## **Resolution No. 620**

### **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.

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

## **Resolution No. 621**

### **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.

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

## Resolution No. 622

### 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.

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

## **Resolution No. 623**

### **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.

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

## **Resolution No. 624**

### **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.



## **Resolution No. 625**

### **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.

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

## **Resolution No. 626**

### **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.

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

## **Resolution No. 627**

### **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.

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

## **Resolution No. 628**

### **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.

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

## **Resolution No. 629**

### **CONVERT THE MANILA DEPARTMENT OF VETERAN'S ADMINISTRATION OUTPATIENT CLINIC TO A FULL-FLEDGED VETERAN'S ADMINISTRATION REGIONAL MEDICAL CENTER**

WHEREAS, the Department of Veterans Administration (VA) has an Outpatient Clinic in Manila, Republic of the Philippines that services 30 thousand US Military Veterans from different conflicts to include World War II, Korean War, Vietnam and to the current conflicts in Iraq and Afghanistan Wars; and

WHEREAS, the Outpatient Clinic provides medical service for service-connected disabilities but only provide minimal medical care to all US Military Veterans; and

WHEREAS, the closing of the Medical Supply leaves the Veteran to seek outside sources which is not cost effective, but cumbersome to the Veteran who will no longer be provided with controlled substance medications as of 1 October 2022 placing them at risk for life threatening conditions; and

WHEREAS, budget cuts to the Manila VA Outpatient Clinic have caused degradation of VA medical services putting the lives of all Veterans at risk; and

WHEREAS, making the Manila VA Outpatient Clinic a full-fledged VA Regional Medical Center with a sufficient budget would enhance medical services to all US Veterans in the Pacific areas including Thailand, Japan, Korea, Taiwan, Guam, Commonwealth of Northern Marianas, Saipan, and Australia resulting in improving the lives of Veterans and help treat medical and mental health conditions; now, therefore

BE IT RESOLVED, that the Veterans of Foreign Wars of the United States, urge Congress to enact legislation to convert the VA Outpatient Clinic Manila, Philippines into a full-fledged VA Regional Medical Center with a sufficient budget and medical personnel to provide adequate medical service all US Veterans in the Pacific Areas equal to VA Medical Centers in the Continental United States.

Submitted by Department of Pacific Areas  
To Committee on VETERANS SERVICE RESOLUTIONS

## **Resolution No. 630**

### **COMBATING ALS IN THE VETERAN COMMUNITY**

WHEREAS, Amyotrophic Lateral Sclerosis (ALS), also known as Lou Gehrig's Disease, is a fatal neurodegenerative disease that destroys the nerve cells that control voluntary muscle function, eventually impacting the ability to move, speak and breathe; and

WHEREAS, from World War II through Operations Enduring Freedom and Iraqi Freedom, and even in peacetime, multiple studies have consistently shown that the rate at which veterans develop ALS is twice that of non-veterans; and

WHEREAS, the Department of Veterans Affairs (VA) has acknowledged this disproportionate affliction in the veteran population to the effect that it has established presumptive causation between ALS diagnosis and military service of as short as 90 days duration; and

WHEREAS, the prognosis for a veteran diagnosed with ALS today has largely remained the same as 150 years ago – death in an average of two to five years with no known cause or cure; every day three more veterans are diagnosed with ALS while another three die from it; and

WHEREAS, those who wore a uniform bear an outsized burden from this disease with three times more veterans lost to ALS since 9/11 than troops killed in Iraq and Afghanistan combined (21,100 vs 6,896); and

WHEREAS, the prevalence of ALS in Post-9/11 veterans is up to ten times higher than the general population; that these veterans are also being diagnosed at progressively younger ages, with some as young as their 20s and 30s; and

WHEREAS, veteran suicide is a significant problem in our nation, the suicide rate for veterans with ALS is four times greater than for those without ALS; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we call upon Congress to dedicate more resources towards research on causes, development of therapies, and expanded access to treatments for veterans stricken with amyotrophic lateral sclerosis to ensure that our military men and women are at no greater risk for ALS than other Americans.

Submitted by Department of Virginia  
To Committee on VETERANS SERVICE RESOLUTIONS

## **Resolution No. 631**

### **PROVIDE LIQUID BIOPSIES DURING ANNUAL PHYSICALS**

WHEREAS, early detection of cancer improves the likelihood of surviving cancer, and

WHEREAS, virtually 50,000 VA enrolled veterans are diagnosed with cancer each year; and

WHEREAS, if VA enrolled veterans were a state in the U.S. it would rank 10<sup>th</sup> in the nation for cancer diagnoses; and

WHEREAS, eight cancers were the most frequent among veterans in 2010: prostate, lung, colorectal, melanoma, kidney, bladder, liver, intrahepatic bile duct; and

WHEREAS, all veterans have a 40 percent increased rate of breast cancer; and

WHEREAS, “beating cancer starts with knowing you have it” and “71% of cancer deaths are caused by cancers not commonly screened for”; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the Department of Veterans Affairs to increase cancer screenings including novel screenings; and

BE IT FURTHER RESOLVED, that we urge the Department of Veterans Affairs to add liquid biopsies for cancer screening to annual physicals for all veterans by January of 2023 with a preference on those with FDA approval.

Submitted by Department of Montana  
To Committee on VETERANS SERVICE RESOLUTIONS

## **Resolution No. 632**

### **INCREASED RESOURCES FOR SERVICE MEMBERS WITH ALZHEIMERS AND DEMENTIA**

WHEREAS, members of the military face many psychological problems because of the stress they encounter in operations, especially during wars, and;

WHEREAS, regardless of the causes, military personnel have faced challenges beyond the battlefield, including mental health concerns. During the last 10 years, Alzheimer cases in military members have more than doubled and that other types of dementia have also become common among war veterans in later stages of their lives, and;

WHEREAS, a study evaluating more than 750 thousand military retirees across the U.S have been diagnosed to be suffering from Alzheimer's disease or other types of dementia. Although the study focusses mostly on older war veterans, it also evaluates the impact of risk factors in veterans who have fewer years retired. Studies have also found that Post Traumatic Stress Disorder (PTSD) plays a significant part in the developing of Alzheimer's disease, and

WHEREAS, Alzheimer's disease and other types of dementia represent an expense that currently exceeds oncological and cerebrovascular pathology together. It is not only within military members and war veterans', but percentages of people also suffering from these conditions have increased. There is an exponential increase in the number of people suffering from dementia not related to the military. For this reason, this type of condition is currently the main challenge our social health systems are facing, and

WHEREAS, until recently physicians could only diagnose Alzheimer's when the patient lost his autonomy for the activities of daily life. Now physicians are able to identify those individuals who are at high risk, or who are in very early stages of the disease while the patient still retains its full autonomy. These types of evaluations allow physicians in the future to apply therapies very early or even in asymptomatic individuals who already present the pathological changes of Alzheimer's in their brain; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress and VA to fund studies into the cause of Alzheimer's, fund studies into early detection, fund studies into the treatment and alternatives of treatment for patients with Alzheimer's and Dementia, and further study the direct correlation between military service and the increased risk to service members for Alzheimer's and Dementia; and



Resolution No. 632 – continued

BE IT FURTHER RESOLVED, that VFW Department of Illinois urges the Illinois General Assembly and the Illinois Department of Veterans Affairs review the facilities and staffing at the Illinois Veteran Homes and expand the facilities to accept the increasing number of patients that suffer from Alzheimer's and Dementia. Illinois Department of Veterans Affairs should also review the application process and ensure service members that suffer from Alzheimer's and Dementia are not discriminated against due to the drug therapy they are undergoing to treat the symptoms.

Submitted by Department of Illinois  
To Committee on VETERANS SERVICE RESOLUTIONS

## **Resolution No. 633**

### **VETERANS STATUS FOR GUARD AND RESERVE RETIREES**

WHEREAS, The National Guard and Military Reserves provide for the national security in the United States; and

WHEREAS, the Guard and Reserve are employed as an operational reserve to ensure the success of active-duty missions; and

WHEREAS, Guardsmen and Reservist were under contract to perform active duty but were never activated; and

WHEREAS, 20 years of qualifying service in the Guard and Reserve, qualify members for retired military pay; and

WHEREAS, Congress has given the title of Honorary Veteran to Guard and Reserve Retirees; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to mandate that the Department of Defense recognize military retired Guard and Reserve members with an Armed Forces discharge and further urge the Department of Veterans Affairs to recognize Retired Guard and Reserve members as Veterans with admission to state veterans' homes with full funding.

**Resolution No. 634**

**INCREASE GRANT FUNDING FOR LOCAL VETERANS  
CEMETERIES**

WHEREAS, the Department of Veterans Affairs (VA), Veterans Cemetery Grants Program was established in 1978 to complement VA's National Cemetery Administration; and

WHEREAS, the program was established to assist states, territories and federally recognized tribal governments in providing gravesites for veterans in those areas where the VA's national cemeteries cannot fully satisfy their burial needs; and

WHEREAS, the funding from the grant may be used only for the purpose of establishing, expanding or improving veterans cemeteries that are owned and operated by a state, federally recognized tribal government or U.S. territory and can only be provided to these entities; and

WHEREAS, the current budget for this grant program is \$5 million per year while the total application requests for this funding far exceed the allocated budget; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we, request an increase in the VA's Veterans Cemetery Grant Program budget to \$10 million per year to cover the establishment, improvement, operations and maintenance for these cemeteries.

Submitted by Department of Illinois  
To Committee on VETERANS SERVICE RESOLUTIONS

## **Resolution No. 635**

### **SUPPORT THE STATE VETERANS HOME PROGRAM**

WHEREAS, the State Veterans Home program is a partnership between the federal government and the states to provide long-term care for aging, ill and disabled veterans; and

WHEREAS, there are 158 State Veterans Homes in all 50 states and in Puerto Rico, which provide skilled nursing care, domiciliary care and adult day health care (ADHC) daily to almost 30 thousand veterans and their dependents; and

WHEREAS, State Veterans Homes provide more than 50% of VA-supported skilled nursing beds for veterans while receiving only 25% of the Department of Veterans Affairs (VA) budget for skilled nursing care; and

WHEREAS, VA provides a per diem payment that is authorized to cover up to 50% of the cost of care for skilled nursing care provided to veterans with service-connected disabilities rated 60% or lower and pays the full cost of skilled nursing care for veterans with 70% or higher service-connected disabilities or who require nursing home care for service-connected disabilities; and

WHEREAS, the VA also provides lower per diem payments for eligible veterans receiving domiciliary care and ADHC in State Veterans Homes; and

WHEREAS, some State Veterans Homes also provide specialized care for veterans with severe mental health, behavioral and memory issues; and

WHEREAS, under the State Home Construction Grant Program the Federal Government provides grants to cover up to 65% of the cost to construct, expand, rehabilitate or repair a State Veterans Home, with states required to match a minimum of 35% of the cost; and

WHEREAS, lessons learned from the COVID-19 pandemic demonstrated the advantages of modern nursing home designs that provide veterans with single rooms in smaller communal facilities, which can improve safety during health emergencies such as the COVID-19 pandemic, as well as improve their quality of life through greater social interaction; and

WHEREAS, the costs to construct and operate more modern designs of State Veterans Homes are higher than for traditionally designed nursing homes; and

WHEREAS, a fiscal year 2019 regulation (RIN 2900-AO88) changed the rules and requirements for operating domiciliary care and ADHC programs, which increased the cost of these programs without providing commensurate increases from VA per diem support; and

Resolution No. 635 – continued

WHEREAS, recognizing the growing number and needs of elderly veterans, including those with mental health, behavioral and memory issues, the State Veterans Home program must continue to be a major partner with the VA in meeting the long-term care needs of aging veterans; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we call on Congress and the VA to provide sufficient funding to support State Veterans Homes, including adequate per diem payments for skilled nursing care, domiciliary care and adult day health care, which properly support different levels of care within each program.

Submitted by Department of Illinois  
To Committee on VETERANS SERVICE RESOLUTIONS

## **Resolution No. 636**

### **AMENDMENT TO SCHOOL CODE**

WHEREAS, the State of Illinois is the home for Scott Air Force Base, Great Lakes Naval Station and the Rock Island Arsenal, and

WHEREAS, in the interest of national security it is important that the dependents of our active duty personnel receive the best care possible, and

WHEREAS, it is important for the welfare of our active duty dependents to receive the best education available in a consistent and stable environment; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the Illinois General Assembly to Amend the School Code and Provide that if, at the time of enrollment, a dependent of United States military personnel is housed in temporary housing located outside of a school district, but will be living within the district within 6 months (instead of within 60 days), the dependent must be allowed to enroll and must not be charged tuition provided that United States military personnel provide proof within 6 months (instead of within 60 days) after the time of enrollment that the dependent will be living within the district.

Submitted by Department of Illinois  
To Committee on VETERANS SERVICE RESOLUTIONS

## **Resolution No. 637**

### **VETERANS BILL OF RIGHTS**

WHEREAS, compared to nonveterans, veterans are at higher risk of homelessness, and women veterans especially face unique challenges that increase their risk of homelessness; and

WHEREAS, many veterans experience post-deployment readjustment conditions such as posttraumatic stress disorder and substance use disorders they acquired during or were worsened by their military service, or traumatic brain injuries that may make their participation in the workforce difficult or impossible, making them more prone to homelessness; and

WHEREAS, the Department of Veterans Affairs' specialized homelessness programs each year provide health care to almost 150 thousand homeless veterans and other services to more than 112 thousand veterans; and

WHEREAS, with greater numbers of women serving in military deployments and the greater likelihood of women veterans being single parents, new and more comprehensive housing and childcare services are needed; and

WHEREAS, a wide variety of public and private programs are in place to assist veterans in preventing or overcoming chronic homelessness, but these programs are often underfunded; and

WHEREAS, VA's initiatives to end homelessness among veterans through enhanced collaboration with other federal, state, faith-based, veterans service organization and community partners have made significant inroads in decreasing homelessness among veterans; and

WHEREAS, annual point-in-time counts, a "snapshot" of homelessness on a given night in America, have demonstrated downward or stable trends in homelessness since 2009 but have not yet registered the economic or psychosocial impact of quarantine and lockdowns related to the COVID-19 pandemic; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we require the Department of Veterans' Affairs to make specified efforts to: (1) increase loans to small business concerns owned and controlled by veterans or service-disabled veterans; (2) increase veterans' access to health care coverage and services; (3) take specified steps toward preventing veteran suicide; and (4) develop and implement a strategy to end veteran homelessness within 3 years; and

BE IT FURTHER RESOLVED that the Department of Financial and Professional Regulation review all state licenses for which military service members may have relevant training or experience, produce a report recommending steps that can be taken to

Resolution No. 637 – continued

increase recognition of military training and experience toward licensing and take those steps within one year of issuing the report which should contain provisions regarding veterans at public institutions of higher education receiving college credit, registering for courses, and being called to active duty; and

BE IT FURTHER RESOLVED that the Department of Commerce and Economic Opportunity annually review apprentice, training, and other vocational programs focused on providing job training and placement to returning military service members and veterans.

Submitted by Department of Illinois  
To Committee on VETERANS SERVICE RESOLUTIONS



## **Resolution No. 638**

### **TAX CREDIT FOR VETERAN CAREGIVERS**

WHEREAS, immediate family members and dependents are involved in the care and rehabilitation of severely injured veterans and are responsible for performing complete clinical care once provided by medical professionals, often with little to no relief while shouldering a great and lifelong burden as home and institutional caregivers and attendants, giving up or severely restricting their employment, future financial security, education and social interactions and suffering severe financial and personal penalties as a consequence in order to care for a severely ill loved one; and

WHEREAS, in the absence of such caregivers, the burden of direct care would fall on DOD and VA facilities or other institutions, at significantly higher financial cost and a reduced quality of life for these veterans; and

WHEREAS, the United States Government owes its highest obligation to those who are put in harm's way at the call of the nation and become wounded, injured and ill as a consequence of that service; and

WHEREAS, following implementation of the VA's caregiver support program, DAV commissioned a veterans' caregiver survey and report published in 2017, which confirmed that despite government services to support family caregivers of veterans, over 80% indicate they do not receive those services most important to them, such as medical training, caregiver education, home health aide services, respite care and direct financial assistance; and

WHEREAS, 25% of family caregivers report their veteran would need to be placed into institutional care, such as a skilled nursing or assisted living facility, now and another 50% in the future; and

WHEREAS, in equity and fairness, caregivers of all severely disabled veterans should be recognized and afforded generous relief, assistance and care for the duration of the lives of veterans injured or made ill by military service to our nation; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the Illinois General Assembly to enact legislation to create an income tax credit for taxpayers who are caregivers of a veteran with a disability and that the credit shall be in an amount equal to 5% of the costs incurred in caring for the veteran, not to exceed \$1,000 in credits in any taxable year.

Submitted by Department of Illinois  
To Committee on VETERANS SERVICE RESOLUTIONS

## **Resolution No. 639**

### **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 annually adjust Grant and Per Diem program rates for inflation, based on separate indices for food and housing, with the latter adjusted for local variations in housing cost based on the Variable Housing Allowance Tables used by the Department of Defense, 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.

Submitted by Department of Connecticut  
To Committee on VETERANS SERVICE RESOLUTIONS

## **Resolution No. 640**

### **END WILD HORSE ROUND-UPS**

WHEREAS, Congress finds and declares that wild free-roaming horses and burros are living symbols of the historic and pioneer spirit of the West, as stated in the Wild Free-Roaming Horses and Burros Act of 1971; and

WHEREAS, it is the policy of Congress that wild free-roaming horses and burros shall be protected from capture, branding, harassment, or death; and

WHEREAS, the Bureau of Land Management (BLM) is the primary agency responsible for managing the wild free-roaming horse and burro populations; and

WHEREAS, the BLM Wild Horse and Burro Program has cost taxpayers 561 million dollars over the last 10 years to remove wild free-roaming horses and burros from Federal Land and house those animals in off-range holding facilities; and

WHEREAS, the BLM plans to permanently remove 18 to 20 thousand wild free-roaming horses and burros each year for the foreseeable future; and

WHEREAS, simultaneous to wild free-roaming horses and burros being removed from Federal Lands, cattle and sheep remain on the land and, due to heavily subsidized below market grazing fees, the BLM grazing program lost over seventy-two million dollars in 2017; and

WHEREAS, the lifetime cost to house a horse removed from Federal Land is approximately 50 thousand dollars, and administering a vaccine to prevent pregnancy costs two-hundred and twenty dollars per treatment; and

WHEREAS, reports from the National Academy of Sciences, General Accountability Office, and the Office of Inspector General have labelled these BLM programs as costly, inefficient, and ineffective; and

WHEREAS, the Veterans For Mustangs Act was introduced in 2022 which prioritizes hiring and training veterans to administer fertility controls to protect American wild horses and burros in their native habitat; and

WHEREAS, legislation has been proposed to the Senate Committee on Appropriations to prioritize the use of fertility control over removals and working with veterans to implement fertility control vaccine programs in order to protect wild horses and burros in their native habitat; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to put an end to the wasteful practice by the Bureau of Land Management of removing wild free-roaming horses and burros from Federal Land and to protect wild horses and burros from slaughter or killing as population management; and

BE IT FURTHER RESOLVED, that Congress shall pass legislation to prioritize the use of fertility control over removals, and working with veterans to implement fertility control vaccine programs; and

BE IT FURTHER RESOLVED, that Congress shall reallocate the excess funds saved by shifting away from wasteful spending on the removal and housing of these wild free-roaming symbols of American Freedom to the Department of Veterans Affairs

Submitted by Department of Colorado  
To Committee on VETERANS SERVICE RESOLUTIONS

## **Resolution No. 641**

### **ELIMINATE ANNUAL EARNINGS LIMIT FOR ALL SOCIAL SECURITY RETIREMENT RECIPIENTS**

WHEREAS, the Social Security Administration (SSA) pays retirement and disability benefits to 64.8 million recipients, 8.5 million of whom are military veterans; and

WHEREAS, all senior citizens drawing Social Security retirement can continue working if they choose, but the Senior Citizens Freedom to Work Act of 2000 only eliminates the Annual Earnings Limit for beneficiaries once they reach Full Retirement Age (currently 66 years and two months). The law was created to encourage older workers to return or remain in the workforce, but it left intact a disincentive for 62 to 65-year-old beneficiaries to work, a penalty that originated with the Social Security Act of 1935 that required full retirement as a condition to receiving government benefits; and

WHEREAS, the penalty has been revised many times over the years, and today reduces Social Security retirement benefits by \$1 for every \$2 earned over the 2022 Annual Earnings Limit of \$19,560 – or \$1 for every \$3 earned if the individual reaches Full Retirement Age this year and earns more than \$51,960. Whatever amount SSA withholds is returned in the form of higher retirement checks once the beneficiary reaches Full Retirement Age; and

WHEREAS, individual life circumstances determine whether senior citizens continue working in their retirement years to supplement their earned Social Security benefits. Yet nearly 4 million beneficiaries face a reduction in benefits if they choose to continue working simply because they are too young and because they earn too much; and

WHEREAS, according to the Bureau of Labor Statistics, as of May 1, there were 11.4 million job openings but only 5.9 million unemployed workers to fill them. So even if the nationwide unemployment rate dropped to zero, there would still be a shortage of 5.5 million workers in all 50 states, the District of Columbia, and our U.S. Territories. More should be done to counter a nationwide worker shortage by eliminating this government disincentive that financially penalizes millions of Social Security retirement beneficiaries who might choose to remain in or return to the workforce; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we call upon Congress to modernize the Senior Citizens Freedom to Work Act of 2000 by eliminating the Annual Earnings Limit for all Social Security retirement recipients.

Submitted by Department of Hawaii  
To Committee on VETERANS SERVICE RESOLUTIONS