

COLA INCREASE ANNOUNCED

Veterans who receive disability pay as well as military retirees are scheduled to receive a 2.8 percent cost-of-living increase starting in December. This is the highest increase in six years.

The Social Security Administration recently announced the adjustment for 2019, and the increase last year was only two percent. For the three years before that, it was only two percent combined.

Currently under the law, there are automatic cost-of-living increases annually for Social Security benefits. This means they can be enacted by the executive branch without Congress. Some other federal benefits including military retiree payouts are also automated under that law.

However, the Department of Veterans Affairs payouts do require a reauthorization each year.

As a result of the newly enacted increase, veterans will see an increase in disability pay as well as clothing allowance, compensation for dependents and other veterans benefits. While the changes become effective in December, recipients will see the first increase in their checks in January.

According to The Military Times, there has been a big push from veteran advocates. That push has been focused on making veterans COLA increases automated as with the payouts for military retirees. However, it hasn't come to fruition legislatively to this point.

There are more than 67 million Americans expected to be affected by the change in COLA. The increase to the cost-of-living is based on both the current levels of inflation, as well as estimated future levels.

If a veteran was receiving benefits totaling \$1,500 a month, the COLA increase could bring them more than \$500 additionally over the year.

TRIWEST TAKES OVER VA COMMUNITY CARE PROGRAMS

THROUGHOUT THE COUNTRY

It was recently announced that TriWest Health Care Alliance would be taking over nationwide operations for the VA's primary community care programs, even though there was controversy last month surrounding overpayments being made to the company.

Over the past five years, operations for the two primary outside care programs which are Patient-Centered Community Care and Veterans Choice Program have been operated by TriWest and Health Net Federal Services.

Under the recently announced new contract, the TriWest partnership is extended and they are the sole provider until the programs are replaced next year with a new community care program mandated under the VA Mission Act, which became law in the summer.

VA officials said the contract would allow for a continuation of health care for veterans over the next year.

"Extending the time and reach of our partnership with TriWest will ensure veterans get the care they need while the department transitions to delivering care under the Mission Act next year," Va Secretary Robert Wilkie said in a statement.

However, last month the VA inspector general reportedly found that over a year, TriWest officials had filed more than 111,000 duplicate claims for outside care services. They also made mistakes in almost 300,000 others, which led to overpayments of more than \$45 million.

There were also similar situations found on the part of Health Net officials, leading to \$56 million in overpayments according to investigators.

VA officials put new payment controls in place and were able to recover around \$40 million.

Cases currently being handled by Health Net are supposed to be moved to the new program and department officials are promising the transition won't lead to a disruption in care.

SUICIDE RATE FOR YOUNGER VETERANS

REPORTEDLY INCREASES SIGNIFICANTLY

A recent report showed that while the suicide rate among all veterans went down slightly, the rate among younger veterans went up very significantly. The data was based on information released by the VA and it was first reported on by the Wall Street Journal.

The data is from 2016, which is the most recently available information. It shows that the suicide rate for veterans was 1.5 times higher than for Americans who never served in the military. Around 20 veterans a day across the U.S. die by suicide. Veterans make up 14 percent of all suicide deaths among adults in the U.S. even though only eight percent of the country's population has served in the military.

Despite the startling number of suicides among young veterans, the VA still says they are making strides in terms of crisis intervention including their crisis hotline and their mental health support services which they've worked to expand over recent years.

The research showed that veterans who regularly contact VA health services are less likely to commit suicide as compared to veterans with little or no interaction.

"To prevent veteran suicide, we must help reduce veterans risk for suicide before they reach a crisis point and support those who are in crisis," according to the report. "This requires the expansion of treatment and prevention services and a continued focus on innovative crisis and intervention services. It also requires effective networks of support, communication, and care across the communities where veterans live and work."

The report shows that veterans aged 18 to 34 had increased suicide rates from 2006 to 2016. From 2015 to 2016, there was an increase of 10 percent, which is a rate of 45 deaths per 100,000 veterans.

The suicide rate among all adults went up almost 21 percent from 2005 to 2016. Among just veterans, the rate was up 26 percent during that time.

VA Secretary Robert Wilkie has vowed to keep suicide prevention a top priority.

To contact the Veteran Crisis Line, callers can dial 1-800-273-8255 and select option 1 for a VA staffer. Veterans, troops or their family members can also text 838255 or visit VeteransCrisisLine.net for assistance.

PROBLEMS ARISE FOR 360,000 USERS OF THE GI BILL

As the school year is now in full swing at colleges and universities throughout the country, many GI Bill users are experiencing problems with their housing stipends. As a result of technical issues, around 360,000 GI Bill users are getting the wrong amount of money for these stipends.

The Forever GI Bill, which was signed by President Trump last year, indicated the VA was supposed to change how calculation were done for monthly housing stipends for students attending classes at a location other than the main campus of their school beginning August 1. Payments were also supposed to reflect the same 2018 that an active-duty E-5 with dependents would receive for housing.

To enact these changes require substantial updates for the VA's Office of Information and Technology, which experienced many significant issues during testing according to a VA spokesman.

Instead of going forward without the system working properly, the VA said schools are supposed to certify students' claims under the old rules, leading to inaccurate payments.

VA spokespeople have said they are working to resolve the issues, but there isn't an estimated date of completion yet.

The monthly housing allowance rate only increased by less than 1 percent between 2017 and 2018 on average.

There are likely to be even further problems when the VA software is working, because then claims will have to be rerun to ensure accuracy retroactively.

Veteran advocates have written to VA Secretary Robert Wilkie about the incorrect payments and the VA has said it will correct any discrepancies.

PRESIDENT TRUMP SIGNS THE LARGEST VA BUDGET EVER

President Trump recently signed the Department of Veterans Affairs fiscal 2019 budget law into effect, and it provides a funding boost of more than six percent. It also makes the agency's total spending over \$200 billion for the first time.

"With this funding bill we have increased the VA's budget to the largest ever," he said. "We are delivering resources to implement crucial VA reforms."

The bill includes \$1.1 billion to start a complete overhaul of the VA electronic health records system and \$400 million for opioid abuse prevention within the department.

The budget also includes a \$1.75 billion increase in money related to the VA Mission Act, which was passed at the beginning of the summer. The legislation seeks to rewrite community care program and as a result, expand veterans' access to private health care at the expense of taxpayers.

Democrats aren't happy with what they see as a short-term solution to cover what might be a bigger financial hole next year.

"The bill the president signed today leaves a funding gap in May of 2019 expected to grow more than \$8 billion in fiscal year 2020," said Sen. Patrick Leahy, D-Vt.

"We do our veterans no favors when we make promises we do not keep, and I will continue to fight in Congress to make sure they receive the care they deserve."

The legislation also includes \$10.3 billion in military construction funding for FY 2019 and full-year budgets for the legislative branch and federal energy programs.

PRESIDENT TRUMP APPROVES APPOINTMENT

OF FOUR MORE JUDGES TO VA'S BOARD OF VETERANS APPEALS

Today the U.S. Department of Veterans Affairs (VA) announced that President Donald J. Trump recently approved the appointment of four new Veterans Law Judges to VA's Board of Veterans' Appeals.

"Bringing on additional judges means the Board will be better staffed to conduct hearing and decide appeals properly in a timely manner," said VA Secretary Robert Wilkie. "Combined with procedural changes under the Appeals Modernization and Improvement Act of 2017 (AMA) and the hiring of more than 200 additional Board attorneys, this translates into better and faster service for Veterans."

Veterans law judges are presidential appointees and go through a thorough vetting process. After an initial screening, the chairman of the Board recommends a list of candidates to the Secretary of the VA. If agreed to, the list of selectees is forwarded to the White House for final approval. Once approved, the selectees are notified by the chairman and officially sworn in.

The following Veterans Law Judges will assume their roles October 14, and will begin holding hearings and signing decisions for Veterans and other appellants: Lauren Cryan, Evan Deichert, William Donnelly and Cynthia Skow.

In fiscal year 2018, the Board issued a historic 85,288 decisions to veterans –61.6 percent more than 2017. Expanding the roster of Veterans Law Judges will allow the Board to continue issuing more decisions for veterans, as VA prepares for full implementation of the AMA.

This law transforms a complex process into one that's simplified, timely and transparent by providing veterans with increased choice and control, according to the VA. The AMA will go into effect on February 14.

VA AND PARTNER ORGANIZATIONS LAUNCH APPROACH

TO IMPROVE LIVES OF VETERANS WITH PTSD

With research showing that veterans with post-traumatic stress disorder (PTSD) face significant barriers to employment, the U.S. Department of Veterans Affairs (VA) and several state, city and nonprofit organizations recently created a first-of-its-kind “Pay for-Success” project to improve employment outcomes for such veterans.

The Veterans Coordinated Approach to Recovery and Employment (Veterans CARE) project was launched October 3 by the Commonwealth of Massachusetts, the City of Boston, New York City partners and the nonprofit organization Social Finance, which stemmed from VA’s grant award to the organization, and will serve 480 veterans over three years in New York City; Boston and Brockton, Massachusetts; and Central and Western Massachusetts.

“This project demonstrates that supporting veterans depends on networks of collaborative partnerships, as well as great research and innovative ideas,” said VA Secretary Robert Wilkie. “Research and innovation are fundamental to improving the health care and benefits for our nation’s veterans.”

According to research, PTSD interferes with a person’s ability to thrive in the workforce and has been found to impact sustained employment and income negatively. In addition, a negative cycle exists between unemployment and PTSD—persistent unemployment often is linked to negative health conditions, including depression, which can exacerbate PTSD systems.

Further, VA research noted that up to 20 percent of veterans from recent tours of duty have PTSD, and a 2015 analysis found that veterans’ labor force participation had declined over the previous 35 years, in close correlation with a growth in service-connected disability.

The Veterans CARE project will involve local VA medical centers to deliver individual Placement and Support (IPS), an evidence-based approach to supported employment, to program participants. The Tuscaloosa VA Medical Center (TVAMC) will oversee and monitor the project.

“The Veterans CARE project will take our work from the research arena into real-world setting where we plan to achieve the highest level of impact of IPS at full scale,” said Veterans CARE study Chair Dr. Lori Davis. “Sustained meaningful work is a key part of the recovery plan for veterans living with PTSD.

Pay for Success is a public finance model that harnesses the power of the capital markets to address critical social and environmental challenges and improve the lives of those in need. In

this Pay for Success project, BNP Paribas, Northern Trust, the Dakota Foundation, Deutsche Bank and Robin Hood Foundation provided \$5.1 million in impact capital to fund the project.

“We are excited to launch the first Pay for Success project globally to support veterans, who have served our nation so honorably,” said Tracy Palandjian, CEO and co-founder of Social Finance. “The Veterans CARE project is about bringing the public, private and social sectors together to help veterans with PTSD secure meaningful employment and lead healthier, happier lives.” VA’s Center for Innovation and cooperation for National and Community Service’s Social Innovation Fund are providing \$3 million, which is matched by local government partners, to repay project investors if the project achieves measurable results for veterans.

VA STUDY ON CHOLESTEROL GENETICS MIGHT HELP

WITH NEW TREATMENTS FOR DIABETES AND HEART DISEASE

In the U.S. Department of Veterans Affairs' (VA) drive to help improve lives of veterans through health care discovery and innovation, a team led by VA researchers recently identified three genetic mutations that govern cholesterol levels, which could lead to the development of new drugs to treat cardiovascular disease and diabetes.

Detailed results of the study can be found in the October 1 issue of Nature Genetics, a scientific journal.

"This is fantastic news, not just for veterans, but for all Americans suffering from these diseases," said VA Secretary Robert Wilkie. "VA researchers have been improving the lives of veterans and all Americans through health care discovery and innovation for decades. Their groundbreaking research has resulted in three Nobel prizes and numerous other national and international honors."

Using data from VA's Million Veteran Program (MVP), the researchers found that three genes – PDE3B, PCSK9 and ANGPTL4 – could be targets for treatment of heart disease, abdominal aortic aneurysm and diabetes, respectively. VA research showed that those with specific mutations to the genes had better cholesterol and triglyceride levels than those without the mutations.

The PDE3B mutation appears to protect against heart disease. A mutation in PCSK9 seems to decrease the risk not only of heart disease, but also abdominal aortic aneurysm – a condition in which the aorta is enlarged, which could lead it to rupture and cause life-threatening bleeding. The ANGPTL4 mutation was linked to lower risk of Type 2 diabetes. The research was supported by VA, the National Institutes of Health and Stanford's Department of Medicine.

MVP is a national, voluntary research program funded by VA's Office of Research and Development. MVP partners with veterans receiving care in the Veterans Health Administration to study how genes affect health. As of late September 2018, MVP had enrolled more than 700,000 Veterans. It is already one of the world's largest databases of health and genomic information.

The Nature Genetics publication is one of the first major papers describing scientific findings from MVP. The publication highlights the power of researchers having access to data from large numbers of individuals. In this instance, researchers were able to identify several novel genetic factors that affect people's blood lipid (cholesterol and triglyceride) levels. Such findings may lead to new approaches to diagnose people at risk for cardiovascular disease, as well as identify candidate therapeutic targets.

SPOTLIGHT ON

VA TRANSITION ASSISTANCE

Whether someone is an active duty servicemember or they're a member of the National Guard or Reserve, there are VA transitional programs available that can help them.

Servicemembers are encouraged to contact the Transition Assistance Program (TAP) Manager at their military installation and they can then get the contact information for a Benefits Advisor.

VA Benefit Advisors serve as personal guides for a transition, and they work at military installations located around the world. They are there to help servicemembers prepare for civilian life, and to help them gain access to their earned VA benefits.

Many VA benefits advisors are veterans or military spouses, so they understand the specific challenges that can arise during this time.

The Transition Assistance Program

The Transition Assistance Program (TAP) is available in coordination with the U.S. Departments of Defense and Labor. There is comprehensive support available through this program to help with the transition to civilian life.

During TAP, participants go through what's called Transition GPS, which stands for Goals, Plans, Success. An individual transition plan can be created, with a focus on career-readiness standards.

VA Benefits Briefings

VA Benefits I & II are required for all transitioning and retiring active duty servicemembers and for all demobilizing members of the National guard and Reserve.

During these briefings participants learn about VA benefits and services, and also how to use VA web portals.

Military Spouses and Family Members

VA also covers the spouses and family members of transitioning servicemembers. Military spouses can attend VA Benefits Briefings and can meet individually with Benefits Advisors.

Benefits Delivery at Discharge

The Benefits Delivery at Discharge program lets servicemembers submit a claim for disability compensation anywhere from 180 to 90 days before separation, retirement, or release from active duty or demobilization. The VA needs a minimum of 90 days to complete the medical exam process before separation from service.

To apply, servicemembers can do one of the following:

- Submit their application and service treatment records online using eBenefits.
- Mail the VA Form 21-526EZ, "Application for Disability Compensation and Related Compensation Benefits," and submit it with copies of service treatment records to:
 - Department of Veterans Affairs
Claims Intake Center
P.O. Box 4444
Jamesville, WI 53547-4444
- Visit a local VA regional office or Benefits Delivery at Discharge Intake Site and speak with a VA representative

There are some exclusions from the Benefits Delivery at Discharge program. Some of these include:

- Claims requiring cases management for a servicemember who is seriously or very seriously injured or ill or a special category person (SPC) who has suffered loss of a body part
- Claims involving a terminally ill servicemember
- Claims involving a servicemember who is awaiting discharge while hospitalized at a VA or military treatment facility
- Claims that have to be done in a foreign country
- Claims from pregnant servicemembers
- Claims requiring a Character of Discharge determination
- Claims received from servicemembers with less than 90 days remaining on active duty—these claims can be processed under the standard VA claims process, Fully Developed Claims program, Decision Ready Claims or other qualifying claims programs

