

Department of Florida October 2023 Newsletter



Top Left NSO Supervisor Matthew Weeg distributes Disaster Relief Check to hurricane victim
 Top Right: Chapters 4 and 113 members attending Area V Officer Training
 Bottom Left: Adjutant Andy Marshall gives Disaster Relief check to eligible veteran.
 Bottom Right: Chapter 1 Commander Standley Slowey presents 55 year membership pin to Charles Ison



DEPARTMENT COMMANDER BRENDA REED

September started out on a not so happy note. Early in the morning of the 1st my foot broke. Now I literally do not have a leg to stand on. I had surgery on the 8th and am now on the mend. I commend the VA at Bay Pines for their excellent care during this time and to John Makas for building an emergency wheelchair ramp for me.

During this time I posted a Meme on Facebook (as I do almost every day) about being there if needed. A friend of mine responded by posting:

“Can a person help if they can’t walk? Asking for a friend.”

My response was “I am always just a phone call away”. I hope that is true for all of us. We may not be able to physically help another veteran in need, but I hope we are just a phone call away to just simply listen. I think that sometimes that is all we really need to do to help someone in a time of crisis. Just listen. We may not be trained crisis workers, but sometimes just listening and being a sounding board is enough.

August reminded us that it is hurricane season! I hope none of you suffered injuries or property damage. Just as a reminder this is a post from the VA:

Disaster Assistance for Veterans

Health Care

Virtual Urgent Care 24/7/365: VA Health Connect at 1-877-741-3400 is 24/7 to provide Florida Veterans with virtual care and support

Prescriptions: The VA Emergency Prescription Refill Program (when activated)

- Veteran patients can go to any local retail pharmacy to obtain needed refills. Veteran patients must take an empty active VA prescription bottle (not older than 6 months and with refills available) or a new VA prescription on a VA form by an authorized VA provider to a retail

pharmacy. This does not include controlled substances.

- The Heritage Health Customer Care Line is available for both VA patients and Pharmacies for any billing questions or coverage at: 1-866-265-0124, option 1. The line operates Monday – Friday, 7:00 a.m. – 11:00 p.m. EST, and Saturday – Sunday, 9:00 a.m. – 5:30 p.m. EST.

I hope this information is useful to you if you have to evacuate and do not have enough medication on hand.

And as always, it doesn’t cost anything to be kind. Try to text or email a veteran to check on them. A moment of your time can save a life.

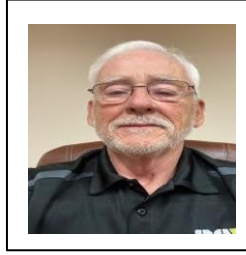
The theme for the upcoming Department Mid-Winter Conference Commander’s Testimonial will be American Bandstand 1970’s edition. Trivia contest will be music.

Please don’t forget to make your hotel reservations for the upcoming Chapter Service Officer’s Certification Program which begins Tuesday, January 2, 2024 at 1:00 pm and concludes with testing on Friday, January 5, 2024, at 8:00 am. Rooms are going fast and not many remaining.

VA Launches Mobile Medical Units to Increase Access to Health Care for Homeless Veterans

WASHINGTON - The U.S. Department of Veterans Affairs announced that it will deploy 25 mobile medical units across the country during the next six months to provide health care and support to homeless and at-risk Veterans. The first MMU arrived on Aug. 3, at the VA Orlando Healthcare System. Mobile medical units are vans or trucks that provide a private space for eligible Veterans to meet with medical providers, including mental health clinicians, social workers, and other staff that provide primary care, women’s health, audiology, laboratory, and telehealth services to those who may not have access to a local VA medical center. To read more, click [here](#).





DEPARTMENT SENIOR VICE COMMANDER LAYMOND ROSE

Congratulations to CHAPTER 109 for being the first chapter to achieve their membership goal for fiscal 2023/2024. Thanks to John and Michael Dunn, and all the chapter 109 membership for your efforts. Keep up the great work!

As of this writing, there are seven other chapters that need 10, or fewer, new members to hit their goal for the year. Now through December is the ideal time for an aggressive push toward signing new members. In my column last month, I discussed several ideas for recruiting new members. Please review those and implement as many as possible.

Membership Dues will increase from the current \$300 for lifetime membership to \$325 effective January 1st, 2024. Obviously, we should maximize our recruiting efforts over the next three months. Membership for veterans that are 80+ years old will still be free! Every 80+ veteran in your chapter area should be offered a FREE membership in DAV. They deserve it, and we could use the increase in membership. Our membership fee is still highly competitive with other VSOs, especially over the long term when compared to the annual membership fees charged by many. New members can still elect to pay the fee in small monthly installments using a credit card.

Veteran Appreciation Day – Chapter 109. On Saturday, September 9th I attended a new function at chapter 109 – they are calling Veteran Appreciation Day! This is a new monthly event the chapter started in July and is scheduled for the 2nd Saturday of the month from 3PM - until. The event includes free food, refreshments, movies, games, and karaoke. The 1st event in July had 18 attendees. The September event drew 38 attendees. They are expecting continued growth in the coming months.

I was also able to attend monthly meetings at chapter 4 and 18 in September. I'm planning to increase the number of chapters I visit in October through December. I may be calling you soon to schedule. If you have special events scheduled, please don't hesitate to let me know. I will attend when possible.

LVAP HOURS: As stated in last month's newsletter, the timely and accurate reporting of LVAP hours will be one of

my priority goals this fiscal year. I don't believe it is an issue that chapters/members are not performing voluntary activities that qualify as LVAP hours, but rather they are just not reporting them. Last year only 21 of our 52 chapters reported LVAP hours to the department monthly as required.

This year, we intend to publish an LVAP status chart monthly. If you are reporting hours, you deserve to be recognized. If you are not reporting, you will see zeros beside your chapter number.

It is my belief that every chapter is performing functions for which LVAP hours can be claimed – they simply are not reporting those hours. Consequently, we are significantly under-reporting the activity of the Department of Florida.

Why is it so important to report LVAP hours?

- Donor Recognition: Every donor, large and small has many options of where they can donate their money. Volunteer hours serving the needs of veterans is one very favorable way that DAV can be recognized by the public.
- Capitol Hill: DAV is required to report volunteer hours to Congress. The number of volunteer hours is one more factor that contributes to our reputation and the strength of our voice.
- Watchdog groups: Reporting 'ALL' of our volunteer hours can strengthen the favorable opinion of watchdog groups.

Melanie Marshall of Tampa, Florida, was found guilty of theft of government funds for stealing from the VA's Vocational Rehabilitation and Employment program. Although Marshall was eligible for the program, which assists veterans with service-connected disabilities find employment, she lied to her vocational rehabilitation counselor in order to continue receiving benefits beyond what had been approved. After failing to report that she had completed a degree in December 2015, she lied on multiple occasions regarding her progress. As a result of Marshall's lies, the VA continued to pay for classes and issue monthly subsistence allowance payments totaling \$20,986.92. This case was investigated by the VA OIG and Social Security



DEPARTMENT JUNIOR VICE COMMANDER CHIP HANSON



A few years ago, I wrote an article on National Cemeteries, I thought I would you would like to read it again.

VA takes special care to pay lasting tribute to the memory of Veterans who served and sacrificed and that of their families. VA meticulously maintains 155 VA national cemeteries in 44 states and Puerto Rico and is working to increase access to accommodate Veterans and eligible family members close to home. Currently, more than 94 percent of Veterans have a burial option in an open VA, state, or tribal veteran's cemetery located within 75 miles of their home.

Burial benefits available include a gravesite in any of our National Cemeteries with available space, opening and closing of the grave, perpetual care, a Government headstone or marker, a burial flag, and a Presidential Memorial Certificate, at no cost to the family. Some Veterans may also be eligible for Burial Allowances.

Burial benefits available for spouses and dependents buried in a national cemetery include burial with the Veteran, perpetual care, and the spouse or dependents' name and date of birth and death will be inscribed on the Veteran's headstone, at no cost to the family. Eligible spouses and dependents may be buried, even if they predecease the Veteran.

Cremated remains represent about 75% of interments in National Cemeteries, they receive the same honors as casketed remains. However, with cremated remains, there are 4 separate ways of interment. They can be buried in the same manner as a casket, with the same headstone as a standard casket grave, The cremated remains can also be placed in the columbarium, (a freestanding wall with areas for the urns), or the ashes can be buried in the Ossuary a common gravesite open to all Veteran's (a Memorial Garden) and the name placed on the Memorial Wall, finally, If the Family chooses to spread the ashes in a manner that cannot be visited (such as spreading them around in the Ocean or a meadow or other

ways the Veteran wanted to interred), the name of the Veteran can be placed on the Memorial Wall. The Ossuary and the Memorial Wall are available in National Cemeteries completed after 2007.

There is never a charge for any interment at a National Cemetery or the Memorial Wall.

Burial in a Civilian cemetery only includes A government headstone, marker, or medallion.

Included in all Veteran interments are. A burial flag and A Presidential Memorial Certificate.

Please note that gravesites in a VA national cemetery cannot be reserved. The only exception to this rule is if both spouses are Veterans, the surviving spouse may reserve a space next to the deceased Veteran.

The highest tribute to the dead is not grief but gratitude.

Thorton Wilder

9/22/2023

Don Azul, of Los Angeles, California, was sentenced in connection with a yearslong scheme he perpetrated against relatives of veterans as well as the University of California and California State University systems. Azul posed as an authorized contractor for the California Department of Veterans Affairs (CalVet) and defrauded more than 40 families with a grandparent or other family member who served in the armed forces into paying at least \$500 each for counterfeit CalVet college fee waivers. The waivers are a free benefit provided by California that waive tuition and fees for certain eligible students, including children of a military veteran with a 100 percent service-connected disability. As a plea deal, Azul agreed to serve three years and four months in a state prison and has been ordered to pay more than \$450,000 in restitution. The VA OIG investigated this case with the police departments of several universities.



DEPARTMENT CHAPLAIN REVEREND JIM TAYLOR



It is always a blessing to me to be able to touch base with you each month about what is on my heart and mind. To that end I want to share my reflection on attending Harold Holloway's funeral at Cape Canaveral National Cemetery. I was able to meet Harold within the past year, but this was by the time life had gotten very difficult. I was impressed even back then it was important for him and Maria to continue to be present at conferences. In conversation with the family days before the internment and again during the reception, the overarching topics were devotion to family and veterans and a work ethic beyond compare. In wonderful humor and respect, several family and friends mentioned his character. Most reminisced on how if you asked Harold a question you would definitely be provided with his opinion. And if you asked what he thought of an idea he was not one to mince words about how you could improve your idea.

So, why do I offer this reflection on this event. I found in the midst of the reflections on Harold and the genuinely meaningful memories of a man that was well loved and respected was something else. I have been a part of many past funerals in my previous ministry as a chaplain. So many times, I find the meaningful reflections, and the sorrow of the loss of the loved one are not the only emotions present. Often there is a sense of anxiety over "are we doing what dad (in this case) would want us to do for him in death and our future life." In Harold's case this concern was not present. Harold's children said more than once that that they never had to guess what dad wanted them to do for the funeral or the future

I close with encouragement to myself and to each of you. Reflect on and write out what you would find meaningful and let your children know. There are numerous helpful guides to accomplish this preparation found on the VA National Cemetery Association website. This includes items like [Schedule a Burial](#) | [Find a Cemetery](#) | [Grave Locator](#) | [What to Expect](#) | [Burial Benefits](#) | [Planning in Advance](#) | [Daily Burial Schedule](#) | [Additional Resources and FAQs](#) | [Background](#). This can be found at [VA » National Cemetery Administration](#) » NCA Resources Guide, <https://www.cem.va.gov/resources.asp>.

Thousands of workers leave the VA amid a flood of new cases and quota demands

Claims processors with the Department of Veterans Affairs say a rigid quota system pits their livelihoods against the veterans they signed up to help.

Claims processors with the Department of Veterans Affairs say they have strained to keep up with a flood of new cases brought on by the [PACT Act](#) and an existing quota system that pits their livelihoods against the veterans they signed up to help as a growing number of the processors leave the job.

The PACT Act expanded benefits to millions of veterans exposed to toxic substances when it was enacted in August of last year. But that has stressed the VA workers tasked with moving cases along amid a backlog, mandatory overtime, inadequate training and quota demands, according to two former claims processors and four current processors who spoke to NBC News on the condition of anonymity out of fear of retaliation.

The processors were struggling to manage the workload even before the PACT Act, with more than 2,000 having resigned or retired since 2020. The number of departures has grown each year, data shows.

"The PACT Act came in like a bull," one of the current processors said. "Morale is on the floor."

Another employee said at least 25 new claims enter her queue each day, on top of the cases she did not get to the day before.

Confused by the new regulations under the PACT Act, she said she began making multiple errors for the first time on the job, which lowered her performance scores during three monthly quality checks and delayed a scheduled promotion.

"It's impossible," she said. "You're falling in sand you can't get out of."



LVAP HOURS:

The timely and accurate reporting of LVAP hours will be one of my priority goals this fiscal year. Last year only 21 of our 52 chapters reported LVAP hours to the department monthly as required. It is my belief that every chapter is performing functions for which LVAP hours can be claimed – they simply are not reporting those hours. Consequently, we are significantly under-reporting the activity of the Department of Florida.

Reporting LVAP hours, by every chapter, is very important to the DAV organization. DAV is required to report volunteer hours to Congress, watchdog groups, members, and donors. Reporting 'ALL' of our volunteer hours can strengthen our lobbying capabilities in congress, elevate the favorable opinion of watchdog groups, and reinforce the trust of our members and donors. The below chart will be updated and appear in this newsletter monthly going forward so that every chapter will know where they stand.

7/8/9/23 LVAP HOURS REPORTED BY CHAPTER											
Chap #	Current Month	YTD	Chap #	Current Month	YTD	Chap #	Current Month	YTD	Chap #	Current Month	YTD
1	1,075	1,075	23	68	68	83		0	112		0
4	1,997	1,997	29		0	84	362	362	113	787	787
5	118	118	30	824	824	85		0	123	1,697	1,697
6		0	32	497	497	86	1,041	1,041	125		0
7		0	38	751	751	87		0	126		0
11	637	637	42	265	265	90		0	129		0
12		0	49		0	94		0	133	1,235	1,235
13		0	57	94	0	97		0	144		0
16	1,486	1,485	63		0	98		0	148		0
17		0	67	347	347	101		0	150	918	918
18	1,025	1,025	70		0	108	679.5	679.5	158	113	113
20		0	73		0	109	3,582	3,282	159	486	486
22		0	82	705	705	110		0			

TOTALS 7/1/23-Present

20,789.5



DEPARTMENT JUDGE ADVOCATE MICHAEL MICHELOTTI



Let's talk about Chapter Constitution and By-Laws (C&BL)

-How often should C&BL be reviewed or changed? Your C&BL have no expiration date; however, they should be reviewed periodically. I recommend annually to see if anything has changed in how your chapter conducts business, do you have the "right number" of officers, how many members present make a quorum (are you making a quorum), want to add virtual attendance, etc.

-How to change C&BL? The best method is to appoint a C&BL Committee to review and make recommends changes. Also, any chapter member in good standing can make recommendations. Proposed changes must be read at two separate chapter meetings. Following the 2nd reading a motion to accept or reject the proposed change must be made. If rejected no further action is needed. If accepted, a copy of the new C&BL highlighting the proposed changes must be forwarded to the DAV Department of Florida for review and recommendation for approval/disapproval. Once the Department recommends approval the proposed C&BL are then forwarded to DAV National for final approval.

-How to get help. If you have any questions or are undertaking a review of your C&BL, you can always reach me at mmichelotti@davfla.com. You can also find an excellent guide to rewriting your C&BL at <https://www.dav.org/member-resources/member-leaders/> left side click on "Chapter Constitution & Bylaws Guidelines & Suggestions".

New Hampshire Man Indicted for Faking Disability to Get VA Benefits for Nearly 20 Years

Christopher Stultz, of Antrim, New Hampshire, was indicted on one count of making false statements to the VA and fraudulently receiving veteran disability benefits. Between January 2003 and December 2022, it is alleged that Stultz falsely represented that he could not use both his feet and obtained benefits that he was not entitled to receive. The charge could lead to five years in prison and up to three years of supervised release and a fine of \$250,000 or twice the gross gain or loss, whichever is greater. The VA OIG investigated this case.

Four IGs Review Personnel Shortages in Federal Healthcare Programs During Pandemic

The COVID-19 pandemic put an unprecedented strain on the nation's federal healthcare systems. The Pandemic Response Accountability Committee (PRAC) Health Care Subgroup surveyed more than 300 facilities across four federal healthcare programs to determine if the facilities had sufficient medical staff during the pandemic. The VA Office of Inspector General (OIG) reviewed staffing at Veterans Health Administration facilities, the Department of Justice OIG reviewed Federal Bureau of Prisons facilities, the Department of Defense OIG reviewed medical treatment facilities, and the Health and Human Services OIG reviewed staffing within Medicare- and Medicaid-certified nursing homes.

Collectively, the IGs learned that most facilities had challenges hiring and maintaining the staff they needed. This joint report provides insights into shortages in personnel positions most commonly reported; factors contributing to personnel shortages reported by facility officials; impacts to the healthcare personnel, the patients, and healthcare services provided by the federal healthcare programs; and strategies to mitigate personnel shortages caused by or exacerbated by the pandemic. Specific insights identified in the report include

- Nurses and medical officers were the most commonly reported positions that experienced shortages during the pandemic.
- A limited labor pool, noncompetitive pay, COVID-19 requirements, and a challenging hiring process were the most commonly reported factors that contributed to personnel shortages.
- A decrease in patient access to care and patient satisfaction and an increase in health care personnel work hours and responsibilities were the most commonly reported impacts resulting from personnel shortages.
- Monetary incentives were the most commonly reported strategy to recruit and retain personnel.

These insights can help policymakers understand the challenges that federal healthcare programs experienced throughout the pandemic and determine the actions necessary to ensure sufficient staffing for ongoing health care needs and future pandemic response efforts.



Andy Marshall Department Adjutant

Congratulations to the following Department of Florida members who received appointments from National Commander Nancy Esponsia:

Sgt.-at-Arms	Thomas Ayala Chapter 1
Deputy Chief of Staff	Mike Dunn Chapter 109
Deputy Chief of Staff	Mark Roehm Chapter 4
POW/MIA Committee	Laymond Rose Chapter 16
Membership Committee	Brenda Reed Chapter 4

Nonadherence to Requirements for Processing Gulf War Illness Claims Led to Premature Decisions

A large population of veterans could be eligible for compensation for Gulf War illness, which refers to a group of unexplained or ill defined chronic symptoms found in veterans deployed to the Persian Gulf during Operations Desert Storm and Desert Shield. The VA Office of Inspector General (OIG) conducted this review to determine whether the Veterans Benefits Administration (VBA) processes disability claims related to this illness in accordance with applicable VA regulatory requirements.

The OIG found that VBA's Gulf War illness claims process did not ensure that all requirements were met before claims processors decided disability compensation claims. As a result, VBA prematurely decided an estimated 3,200 of the 13,800 Gulf War illness claims (23 percent) completed from October 1, 2021, through March 31, 2022, leading to at least \$5.1 million in improper overpayments for those six months. Moreover, the team found that premature decisions are apt to continue due to shortcomings in exam requests and exam findings. About 5,500 of the 13,800 claims reviewed (40 percent) had

medical examinations that did not contain the necessary information or related documentation.

Among the shortcomings were that examination requests do not provide a full definition of some key terms. For example, while undiagnosed illnesses are defined, the instructions do not indicate what is needed to determine whether a veteran has a medically unexplained illness. Disability benefits questionnaires used for evaluating claims for Gulf War illnesses also do not ask specific questions that would show how a condition meets requirements to be an undiagnosed illness.

The OIG made five recommendations to update instructions, definitions, and diagnostic criteria provided to examiners and clarify for claims processors that all regulatory requirements must be met to award benefits.

Recommendation 1: Update the instructions provided to examiners for completing Gulf War general medical examinations to add the definitional requirements for medically unexplained illness as outlined in 38 C.F.R. § 3.317 and clarify the instructions and related procedures to reflect that an examiner's determination that a disability pattern is an undiagnosed illness or a medically unexplained illness requires a written explanation. VBA Response: Concur. VBA will add the definitional requirements for medically unexplained illness, as outlined in 38 C.F.R. § 3.317, to the Supplemental Language Matrix (SLM). This will add the requirements to the Examination Scheduling Request (ESR) for examiners, until VBA can update the Examination Management System (EMS). VBA will add the definitional requirements and clarification of the instructions and related procedures in both the SLM and a Vendor Guidance Memorandum (VGM).

Target Completion Date: September 30, 2023



Adjutant's Column Continued

Recommendation 2: Implement a plan to update the Gulf War general medical examination disability benefits questionnaire to add the definitional requirements for medically unexplained illness as outlined in 38 C.F.R. § 3.317. VBA Response: Concur. VBA will implement a plan to add the definitional requirements for medically unexplained illness as outlined in 38 C.F.R. § 3.317 to the Gulf War general medical examination disability benefits questionnaire (DBQ). The plan will consist of release of a VGM to examiners to provide them with the definitional requirements. Following release of the VGM, VBA plans to revise the Gulf War general medical examination DBQ to include the definitional requirements for medically unexplained illness. The DBQ update is currently scheduled for a March 2024 release. VBA expects to implement this plan, which will meet the intent of the recommendation, by September 30, 2023.

Target Completion Date: September 30, 2023

Recommendation 3: Implement a plan to incorporate the clinical requirements listed in 38 C.F.R. § 3.317 for an undiagnosed illness and a medically unexplained illness into the Gulf War general medical disability benefits questionnaires. VBA Response: Concur. VBA will implement a plan to incorporate the clinical requirements listed in 38 C.F.R. § 3.317 for an undiagnosed illness and a medically unexplained illness in the Gulf War general medical DBQ. VBA will add the clinical requirements to the SLM, which will add the requirement to ESR for examiners to follow. Following updates to the SLM, VBA plans to revise the Gulf War general medical examination DBQ to incorporate the clinical requirements listed in 38 C.F.R. § 3.317 for an undiagnosed illness and a medically unexplained illness. The DBQ revision is currently scheduled for a March 2024 release. VBA expects to implement this plan, which will meet the intent of the recommendation, by September 30, 2023.

Target Completion Date: September 30, 2023

Recommendation 4: Implement a plan to incorporate into the appropriate medical disability benefits questionnaires the diagnostic criteria for functional gastrointestinal disorders from 38 C.F.R. § 3.317 and require an explanation of whether the disorder is functional or structural. This should include a requirement that any necessary testing has been completed before examiners diagnose specific functional gastrointestinal disorders. VBA Response: Concur. VBA will implement a plan to include the diagnostic criteria for functional gastrointestinal disorders from 38 C.F.R. § 3.317 and require an explanation of whether the disorder is functional or

or structural. This will also include a requirement that any necessary testing has been completed before examiners diagnose specific functional gastrointestinal disorders. VBA plans to add this guidance to the SLM for incorporation into the ESR for examiners to follow, until VBA can update the DBQ in EMS. VBA will also provide this guidance in a VGM to the examination vendors. VBA plans to revise the Gulf War general medical examination DBQ to incorporate the diagnostic criteria for functional gastrointestinal disorders from 38 C.F.R. § 3.317. The DBQ revision is currently scheduled for a March 2024 release. VBA expects to implement this plan, which will meet the intent of the recommendation, by September 30, 2023.

Target Completion Date: September 30, 2023.

Recommendation 5: Update VA's Adjudication Procedures Manual to clearly state that all the requirements of 38 C.F.R. § 3.317 must be met to award benefits. Clarify and reiterate instructions to claims processors that benefits should only be awarded after taking into consideration the overall evidence of record. VBA Response: Concur. VBA will update the Adjudication Procedures Manual to clearly state that all applicable requirements of 38 C.F.R. § 3.317 must be met to award benefits. VBA will clarify and reiterate instructions to claims processors that benefits should only be awarded after taking into consideration the overall evidence of record.

Target Completion Date: December 31, 2023

CSO Certification Training & Mid-Winter Conference

Registration Packets for the upcoming CSO Certification Training & Midwinter Conference will be mailed to all chapters and units in October. Please ensure your Chapter has completed the Service Officer Nomination Form to attend the certification training.

Rooms are going fast. Book now (407) 995 7016.

Chapters visited by Department Line Officers and Adjutant since Department Convention: 4, 11, 18, 32, 82, 109, 119, 129

Membership Report

Our goal for the 2023-2024 Membership year is 63, 144. As of September 24, we had 61, 072. We are 2, 091 members short of our goal. **Congratulations to Titusville Chapter 109 for being the first chapter in our Department to reach its membership goal.**

VHA Faces Challenges Implementing the Appeals Modernization Act

What the Review Found

The review team assessed a nonstatistical sample of 180 higher-level reviews or supplemental claims (referred to collectively as decision reviews) initiated between February 19, 2019, and June 27, 2022. Based on this assessment, the OIG made two findings. First, VHA program offices did not give claimants the necessary and required information to initiate higher-level reviews and supplemental claims regarding benefits decisions. Before VHA can process decision reviews, claimants must receive necessary information on how to initiate them. Both the AMA and VHA's interim policy notices require VHA to issue claimant's decision notices explaining why a claim was denied, how to seek further review of a denied benefit, and other information.

Second, VHA did not accurately track decision reviews because it did not implement effective systems, sufficient policies, or adequate training.⁶ VHA processes decision reviews in a decentralized manner, and VHA's many programs were operating independently. Most programs did not have effective tracking systems. The two general interim policy notices VHA issued in 2021 and 2022 required tracking but lacked requirements on how to track. They were in effect for only one year each.⁷ In addition, VHA had not finished creating a training course for all processors of decision reviews. By not effectively tracking, VHA risks not processing claimants' decision reviews or not granting veterans the benefits to which they are entitled. Moreover, VHA lacks reliable data on how many decision reviews were processed and how long processing them took, information that VA and Congress need for effective oversight.

VHA Has Not Ensured Claimants Receive Sufficient Information to Challenge Benefits Decisions The AMA and interim policy notices require VHA to inform claimants why a claim was denied and what they need to do to challenge an unfavorable decision. This is done through decision notices, which must contain seven elements.

According to the interim policy notices, seven required elements apply to VHA: issues adjudicated, a summary of evidence considered, a summary of the applicable laws and regulations, favorable findings, elements not satisfied, an explanation of how to access evidence, and an explanation of the procedures for obtaining a review of the decision.

Some program offices, however, did not comply. The Office of Dentistry did not provide decision notices, and the Consolidated Patient Account Center (CPAC) Program sent decision notices that were not compliant with AMA

requirements. Officials from both the Office of Dentistry and the CPAC program did not believe the AMA applied to their programs, and as of April 2023, the Office of General Counsel had not provided VHA with an opinion on whether the Office of Dentistry or CPAC program are subject to the AMA. Disagreeing with the program offices, a leader of VHA's implementation efforts said that both the Office of Dentistry and the CPAC program administer benefits that are subject to the AMA. Veterans are eligible for dental care if they are in a vocational rehabilitation program, are experiencing homelessness, or meet other criteria, and in these cases, they may seek dental benefits through their local VA medical facility. However, the review team determined that benefits decisions were generally made verbally at the local facility. Therefore, veterans were not given any documentation explaining why they were denied dental care or what to do to contest the denials.

The CPAC program consists of revenue centers around the country that bill veterans and insurance companies for care provided by VA. Veterans may request debt waivers of repayment plans for co-payments. CPAC revenue centers send letters to the claimants that indicate whether relief has been granted, but those letters do not offer the three available AMA review lanes or some of the other required elements. Instead, the letters reference appeal procedures that existed before the AMA. CPAC program officials said the AMA does not apply to debt relief or repayment plan requests.

There were 11 recommendations in the IG Report.

Recommendation 1. Require the Office of Regulations, Appeals, and Policy, in coordination with the Office of General Counsel, to determine whether the Office of Dentistry and the Consolidated Patient Account Center program have appealable benefits decisions governed by the AMA, and if so, to update program policies, processes, and procedures accordingly.

VHA Comments: Concur.

Recommendation 2. Require the Office of Regulations, Appeals, and Policy to evaluate the program offices' barriers to include all required elements in decision notices and take corrective action, including seeking congressional relief if needed.

VHA Comments: Concur.

Recommendation 3. Using the evaluation findings from recommendation 2, require Payment Operations to update their systems to generate AMA-compliant decision notices to the extent possible.

VHA Comments: Concur.

Recommendation 4. Using the same evaluation findings, require the Veteran and Family Member Programs to update their systems to generate AMA-compliant decision notices to the extent possible.

VHA Comments: Concur.

Recommendation 5. Require the Office of Regulations, Appeals, and Policy and the program office for Member Services' Eligibility and Enrollment Division to ensure that priority group assignment decision notices are provided with enrollment handbooks given to veterans.

VHA Comments: Concur

Recommendation 6. Identify resources and assign duties to conduct quality control reviews of decision letters with program offices to remediate deficiencies.

VHA Comments: Concur.

Recommendation 7. Work with the Office of Information and Technology to update Case flow to address identified VHA system requirements within specified deadlines, including adding a program identifier and facilitating entries for individuals and entities that are not veterans.

VHA Comments: Concur in Principle.

Recommendation 8. Establish interim tracking procedures with the program offices until Case flow can be considered a reliable system for VHA oversight.

VHA Comments: Concur

Recommendation 9. In coordination with the Office of General Counsel, seek clarification on how the reporting metrics sections of the Appeals Modernization Act applies to VHA, and then develop those measures.

VHA Comments: Concur

Recommendation 10. Issue policy and other clear guidance that includes standard tracking processes and procedures, and oversight of that tracking.

VHA Comments: Concur

Recommendation 11. Work with VBA and others to allow access to all VHA program offices, and those offices in turn require that staff use the Centralized Mail Portal for all decision reviews or establish another

mechanism that ensures all decision reviews are tracked from request receipt through routing and processing.

VHA Comments: Concur.

Recommendation 12. Work with the Office of Information and Technology to determine the best way to create a central repository and identify the necessary resources to implement and maintain it.

VHA Comments: Concur in Principle

Recommendation 13. Develop decision review retention standards and communicate to the relevant programs what types of claims and appeals documentation should be stored, for how long, and where.

VHA Comments: Concur

Recommendation 14. Implement training on processing and tracking appeals that is mandatory for VHA staff who process decision reviews.

VHA Comments: Concur

OIG reports are available at www.va.gov/oig. Simply enter the website address for Office of Inspector General Reports if you cannot open the hyperlink,

2023 Golden Corral Military Appreciation Night

This year's event will occur on Monday, November 13, from 5 p.m. to close. Golden Corral does not require identification to receive a free meal. Since the inaugural Military Appreciation Night in 2001, Golden Corral has donated over 6 million complimentary meals for veterans and generated \$18 million in contributions to support DAV's mission.

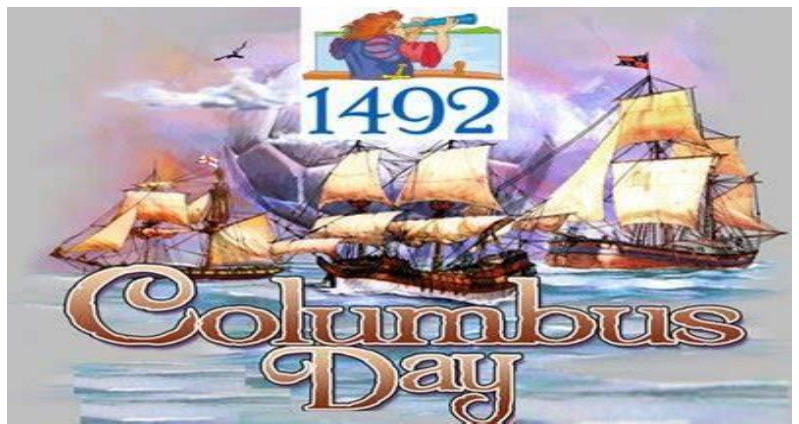
As in previous years, Golden Corral is permitting DAV contribution canisters in participating locations so patrons may donate to their local DAV department. DAV National Headquarters will provide and distribute the canisters directly to the restaurants. The canisters can be displayed from October 30 to November 13; however, canisters must be available to the public during Military Appreciation Night. Not only do the stickers recognize donors, but they also prevent members from accidentally soliciting the same person for a donation. Members are encouraged to thank and acknowledge a donor's contribution.



October 2 Release date for memo for Transportation Vehicles



October 9 Columbus Day



October 13 United States Navy Birthday



October 31 Halloween

