MEMORANDUM FROM JOHN E. HAMILTON ADJUTANT GENERAL VETERANS OF FOREIGN WARS OF THE UNITED STATES

April 6, 2015

To: Department Adjutants

Attached are resolutions referencing National Security & Foreign Affairs, POW/MIA, and Veterans Service to be proposed by the Commander-in-Chief to the delegates attending the 116th National Convention.

These resolutions are being provided for the review of your department convention. Do not return these resolutions to national. They require no action by your department convention other than to discuss, debate and direct respective committee members and registered delegates from your department. Consideration as to any of your convention proposed resolutions may be redundant or repetitive to these Commander-in-Chief resolutions. Additionally, the national convention committee members or registered delegates can still take the concerns of your membership to the national convention committee meetings and the convention floor for a final determination by the delegates.

"Preparing a Proposed Amendment to the National By-Laws" and "Preparing a Resolution," is attached for your use. Please use this information as a guide when submitting a proposal for a by-law amendment or preparing a resolution for your department's review or submission to the national convention.

Please mail or email your department's approved resolutions that require action by the national convention within five days following the close of your department convention. This includes approved resolutions concerning matters of interest beyond your department and any approved proposals to the National By-Laws, Manual of Procedure or the Ritual.

Do not forward resolutions or by-law proposals that were rejected or disapproved by your convention delegates or that refer to state issues.

Resolutions regarding federal legislation, Department of Veterans Affairs' issues, Department of Defense policy or other matters of national significance approved by your department must be acted on by the national convention before becoming official policy.

Questions and information requirements regarding resolutions and proposals affecting the National By-Laws, Manual of Procedure or Ritual should be directed to the Administrative Operations office: David Prohaska, Director of Administrative Operations, (816) 968-1114 (<u>dprohaska@vfw.org</u>) or Tammie Gniotczynski, (816) 968-2727 (<u>tgniotczynski@vfw.org</u>).

PREPARING PROPOSED AMENDMENT TO THE NATIONAL BY-LAWS, MANUAL OF PROCEDURE OR RITUAL

By-Laws: Any member in good standing, a Post, a District, or a Department, may propose an amendment to the National By-Laws; provided, however, before consideration at the National Convention, the proposed amendment must be approved by a Department Convention. Immediately following a Department Convention, the proposed amendment(s) must be forwarded to National Headquarters.

Manual of Procedure and Ritual: Any Post, District, or Department may propose an amendment to the Manual of Procedure or Ritual; provided, however, before consideration at the National Convention, the proposed amendment must have been forwarded, through channels and have been properly approved.

In order to meet National By-Law/Manual of Procedure Article XIV requirements, to provide 15 day notice to all Posts of all amendments, the Adjutant General requests all amendments be forwarded to National Headquarters no later than 5 working days following the close of the Department Convention.

By-Law, Manual of Procedure or Ritual changes not in proper form, unclear as to meaning, or concerning matters clearly not within the scope and purpose of the Veterans of Foreign Wars <u>cannot</u> be considered by the National Convention.

A proposed change to the National By-Laws, Manual of Procedure or Ritual must be submitted as such, <u>not as a resolution</u>. Proposed amendments must be <u>definite</u> and <u>specific</u> as to the verbiage to be deleted or added. Use of the most recent amended copy of the National By-Laws, Manual of Procedure and Ritual is encouraged, as proposed changes considered by convention delegates cannot be amended on the floor.

EXAMPLE 1

Proposed Amendment to National By-Laws proposed by Department of ______.

Section 202 – By-Laws.

Amend Section 202, National By-Laws, by deleting the words "two-thirds (2/3)" in the first sentence of paragraph one, and inserting, in lieu thereof, the following:

"majority".

EXAMPLE 2

Proposed Amendment to National Manual of Procedure proposed by Department of ______.

Section 518 – Officers: Duties and Obligations.

Amend Section 518, Manual of Procedure, by deleting paragraph (a) (1) d. in its entirety and inserting, in lieu thereof, the following:

"Plan and organize all social functions."

EXAMPLE 3

Proposed Amendment to National Ritual proposed by Department of

Amend the Ritual by deleting on page 48, in the last sentence of the Member's Obligation, the words "and a citizen of our great republic."

Further amend by placing a period after the word "comrade" in the same sentence.

If you require help composing a proposed change to the Bylaws, Manual of Procedure or Ritual, please contact Administrative Operations at National Headquarters for advice and assistance in properly preparing a proposed amendment to be voted upon by your department convention.

PREPARING A RESOLUTION TO BE CONSIDERED BY THE NATIONAL CONVENTION

The policy of the Veterans of Foreign Wars is established by resolutions adopted by the delegates attending Department and National Conventions. Most such resolutions originate at the Post level and are passed through the District and Department before being acted upon at a National Convention. Many times, an otherwise worthy idea gets nowhere merely because it is not correctly presented.

A resolution contains two separate parts; a statement of the problem to be solved, and the proposed solution to the problem. The problem is outlined in the *"WHEREAS"* clauses, and the proposed solution is given in the *"RESOLVED"* section.

The *"RESOLVED"* section of a resolution should be complete in itself without depending on the *"WHEREAS"* clauses to give it meaning.

EXAMPLE

WHEREAS, the rising cost of living has created an intense hardship on those disabled veterans whose only income is a meager pension check; now, therefore

BE IT RESOLVED, that we petition Congress to enact legislation which would provide a substantial increase in non-service connected pension rates.

(Note: The "RESOLVED" section has a proposed solution that makes sense and can stand alone without the "WHEREAS" clause giving it meaning.)

A resolution may deal with a local problem. It needs no action on a level higher than that of the Post. If the problem concerns an area larger than that served by the Post, it should, after Post approval, be presented before the District or County Council. All resolutions of statewide, regional or national concern must be acted upon by the Department Convention. Those resolutions approved by a Department Convention, which affect persons or matters <u>outside</u> the state boundaries, must be forwarded to the National Convention for final disposition.

When submitting a resolution to the Department Convention, a notation on the bottom should show the previous action taken, such as, approval by Post and, if applicable, by the District. A Post or District submitting a resolution to its Department Convention must follow guidelines established by the Department, which may require submitting the resolution to the Department Adjutant prior to the convening of the convention.

Resolutions not in proper form, unclear as to meaning, or concerning matters clearly not within the scope and purpose of the Veterans of Foreign Wars <u>cannot</u> be considered by the National Convention.

Resolutions approved by a Department Convention, which affect matters outside state boundaries, must be forwarded by the Department Adjutant to the National Convention for final disposition. Approved resolutions should be sent to national headquarters at the close of the department convention. The Adjutant General requests all resolutions be forwarded to National Headquarters no later than 5 working days following the close of the Department Convention. A resolution disapproved by the Department Convention or not acted upon by the Department Convention will not be considered by the National Convention.

Resolutions may also be originated by Department officers or by the Department Convention itself and acted upon by the Department Convention. A National Officer may originate a resolution concerning National affairs and submit it directly to the National Convention without Department action. Likewise, a National Convention Committee may originate a resolution and present it for approval during the National Convention.

Policy set by the National Convention is binding upon all subordinate units of the Veterans of Foreign Wars. No Post or Department is permitted to take any individual action or espouse any cause contrary to the National By-Laws or to the actions of the National Convention except that it may propose changes in policy by the preparation of a resolution for consideration as outlined herein.

<u>116TH NATIONAL CONVENTION</u> COMMANDER-IN-CHIEF RESOLUTIONS

NATIONAL SECURITY & FOREIGN AFFAIRS COMMITTEE NATIONAL POW/MIA SUBCOMMITTEE

- 401 END SEQUESTRATION
- 402 SUPPORT THE TROOPS AND THEIR WAR AGAINST TERRORISM
- 403 KEEP DEFENSE BUDGET RELEVENT
- 404 PRESERVE THE ALL-VOLUNTEER FORCE
- 405 LINK MILITARY PAY INCREASES TO PRIVATE-SECTOR INCREASES
- 406 THOROUGHLY REVIEW MCRMC RECOMMENDATIONS
- 407 PRESERVE MILITARY TUITION ASSISTANCE PROGRAMS
- 408 ENSURE DOD COMPLIANCE WITH TAP MANDATE
- 409 REVISE UNFAVORABLE DISCHARGE REVIEW PROCEDURES
- 410 PROVIDE DD-214s TO ALL RESERVE COMPONENT MEMBERS
- 411 CORRECT RESERVE COMPONENT EARLY RETIREMENT PAY PROVISIONS
- 412 EXPAND OPERATION WARFIGHTER PLACEMENTS
- 413 PROVIDE FULL CONCURRENT RECEIPT OF MILITARY RETIREMENT PAY AND VA DISABILITY COMPENSATION
- 414 MST INCIDENT REPORTING AND TREATMENT
- 415 REPEAL SBP/DIC OFFSET
- 416 CREATE A JOINT MILITARY MEDICAL COMMAND
- 417 PROTECT POW/MIA FULL ACCOUNTING MISSION FUNDING
- 418 CALL FOR MORE UNILATERAL POW/MIA ACTIONS BY VIETNAM
- 419 SECURE AMERICA'S BORDERS
- 420 HALT ROGUE NATION WMD PROGRAMS
- 421 BALLISTIC MISSILE DEFENSE CRITICAL TO NATIONAL SECURITY
- 422 SUPPORT THE REPUBLIC OF CHINA ON TAIWAN
- 423 SUPPORT THE REPUBLIC OF KOREA
- 424 SUPPORT THE STATE OF ISRAEL

VETERANS SERVICE RESOLUTIONS

- 601 ADEQUATE DEPARTMENT OF VETERANS AFFAIRS BUDGET
- 602 OPPOSE VA PHARMACEUTICAL CO-PAYMENT INCREASES
- 603 MAKE CHAMPVA PAYMENTS FAIR TO PROVIDERS
- 604 VA MEDICARE REIMBURSEMENT
- 605 CONSIDER TREATMENT FOR A PRESUMPTIVE SERVICE CONNECTED CONDITION AS A CLAIM FOR VA COMPENSATION
- 606 EXTENDING GULF WAR PRESUMPTIONS AND HEALTH CARE TO AFGHANISTAN THEATER VETERANS
- 607 NURSING HOME ELIGIBILITY
- 608 TRAUMATIC BRAIN INJURY HEALTH CARE
- 609 PTSD AND MENTAL HEALTH CARE
- 610 VA SERVICES FOR WOMEN VETERANS
- 611 INCREASE ACCESS, CHOICE, AND VALUE OF HEALTH CARE FOR VETERANS, SERVICE MEMBERS, AND THEIR FAMILIES
- 612 EXPAND VA CAREGIVER BENEFITS

- 613 EXTEND SERVICE CONNECTION PRESUMPTION TO BLAST SURVIVORS
- 614 TINNITUS AND HEARING LOSS PRESUMPTIVE SERVICE CONNECTION
- 615 HEARING LOSS COMPENSATION
- 616 VA CLAIMS WORKLOAD
- 617 IMPROVE EDUCATION BENEFITS FOR SURVIVORS
- 618 BURIAL PLOT ALLOWANCE
- 619 TOXIC EXPOSURES
- 620 HOMELESS VETERANS PRIORITIES
- 621 ENSURE VETERAN SUCCESS IN EDUCATION
- 622 VOCATIONAL REHABILITATION AND EMPLOYMENT PROGRAM ELIGIBILITY
- 623 SUPPORT VETERANS EMPLOYMENT AND TRAINING PROGRAMS
- 624 VETERAN ENTREPRENEURSHIP
- 625 SUSTAINABLE NON-VA HEATH CARE OPTIONS FOR VETERANS

END SEQUESTRATION

WHEREAS, the Budget Control Act of 2011 raised the federal debt ceiling on an agreement to offset the increase with a corresponding decrease in federal discretionary spending over a 10-year period. A bipartisan Congressional committee was created to identify which federal accounts to reduce, and as a penalty, an automatic 10 percent across-the-board sequester would kick in at the beginning of the 113th Congress should the committee fail to reach an agreement, which it did; and

WHEREAS, the Budget Control Act of 2011 also mandated a \$487 billion reduction in Pentagon spending over a 10-year period. The imposed sequester doubles that amount; and

WHEREAS, mandatory sequestration began in the second half of FY 2013. In order to meet the forced spending cuts without impacting combat operations in Afghanistan, the four military services had to slash flying, sailing and troop training, as well as began furloughing its civilian workforce. A Bipartisan Budget Agreement signed in December 2013 put a temporary hold on sequestration until FY 2016, which begins Oct. 1, 2015; and

WHEREAS, cutting almost \$1 trillion from the Pentagon's budget — no matter how dispersed — could eliminate quality of life programs for military personnel and their families, and have a tremendous impact on readiness and modernization programs, to the point of jeopardizing the military's ability to respond when and where needed; and

WHEREAS, mandatory sequestration also impacts other federal agencies, most notably the Department of Homeland Security and its many subsidiary units, to include the U.S. Coast Guard, U.S. Customs and Border Protection, and the Transportation Security Agency. Plus, it is still unknown how a restarted sequester will impact future budgets requests for the Department of Veterans Affairs; and

WHEREAS, sequestration cripples the government's ability to operate, to secure our country and protect our citizens, and it threatens to dismantle every quality of life program the VFW has helped to create for veterans, service members and their families everywhere; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the United States Congress to end sequestration.

SUPPORT THE TROOPS AND THEIR WAR AGAINST TERRORISM

WHEREAS, the Veterans of Foreign Wars of the United States supports the Commander-in-Chief and our military and intelligence agencies in their mission to identify, target and destroy terrorists wherever they hide; and

WHEREAS, it is critical that the Administration and Congress provide the military with the resources necessary to succeed in this global fight against a shadow threat, as well as to properly care for those American service members who return home wounded, ill or injured, and their families; and

WHEREAS, it is equally critical that U.S. intelligence agencies be properly resourced in order to identify threats to U.S. security and interests by organized extremist groups or lone individuals, both foreign and domestic; and

WHEREAS, it is essential that the Administration and Congress heed the expert counsel of field commanders regarding future troop buildups or reductions, and modernization initiatives. This includes working together in a bipartisan manner to end the draconian effects of sequestration; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we support the Commander-in-Chief and the brave men and women in uniform who prosecute the war on terrorism, and that we call upon Congress to end sequestration and provide our military and the nation's intelligence agencies the necessary resources to identify, target and destroy our enemies.

KEEP DEFENSE BUDGET RELEVENT

WHEREAS, America's Number #1 priority is to defend herself and her citizens, yet continued efforts to keep defense spending below 5 percent of Gross Domestic Product jeopardizes the Defense Department's ability to properly train, equip and field a military that can defeat all enemies, as well as protect vital U.S. interests around the globe; and

WHEREAS, defense spending today is approximately 16 percent of the total federal budget—the lowest since before World War II—but defense also amounts to nearly half of all discretionary spending, which means DOD took 50 percent of the cuts under the Budget Control Agreement of 2011; and

WHEREAS, the Budget Control Agreement forces the Defense Department to reduce overall spending by at least \$487 billion over the next decade, an amount that is doubled by mandatory sequestration. DOD only has three principal accounts in which to rein in costs—Personnel, Operations and Maintenance, and Modernization—with Congress having approval authority for every request regarding troop strengths, weapons systems, stateside installations, and quality of life programs; and

WHEREAS, excluding Overseas Contingency funding, the FY 2015 defense budget of \$521 billion represents just 3 percent of the nation's 2014 Gross Domestic Product, and the FY 2016 defense request of \$534 billion will only account for 2.9 percent of the nation's estimated GDP; and

WHEREAS, the military shrinks in terms of installations, manpower and material at the end of every war, but bringing the troops home has yet to make the world any less dangerous, our enemies any more predictable, or reduce the world's reliance on the United States to lead every contingency or humanitarian operation; and

WHEREAS, it is crucial that any proposed reduction not jeopardize America's security or break faith with those who serve or have served her in uniform. A nation that cherishes its freedom and supports the troops can afford to do both; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we strongly urge Congress to end sequestration and to provide the necessary funding equal to not less than 5 percent of GDP for the readiness, training, modernization, healthcare, and quality of life initiatives for the armed forces of today and tomorrow.

PRESERVE THE ALL-VOLUNTEER FORCE

WHEREAS, America's All-Volunteer Force successfully undertook a 13-year, twofront war, that nobody prior to 9/11 would have thought possible. It did so despite multiple combat tours and significant military recruiting and retention challenges; and

WHEREAS, with the War in Afghanistan officially over, the challenge now for a military in transition is how to balance the needs of the troops and their families with the national security requirements of a nation that continues to confront new and old enemies abroad; and

WHEREAS, congressional budget decisions have forced the Department of Defense to reduce spending by \$487 billion over a 10-year period, an amount that is doubled by a looming sequester that is on temporary hold until Oct. 1, 2015; and

WHEREAS, of DOD's three principal funding accounts—Personnel, Operations and Maintenance, and Modernization—it is the Personnel account that continues to bear the brunt of planned or recommended reductions because Congress is hesitant to authorize a new Base Realignment and Closure Commission, and due to the inherent inflexibility of the military acquisition program process; and

WHEREAS, planned troop strength cuts, limited pay raises, reduced housing allowances, and increased active-duty family healthcare costs, combined with no end to real or perceived threats, is continuing to erode military morale. And recommendations made by the Military Compensation and Retirement Modernization Commission, combined with the potential lure of a better civilian jobs market, could possibly give troops more incentives to separate than reenlist; and

WHEREAS, DOD's FY 2016 budget recommendation to further lower troop numbers and reduce benefits is the direct result of a military struggling to survive a budget crisis that will continue to grow the longer Congress is unable to end the sequester. The cumulative impact of DOD's action, in combination with a better civilian economy, could impact both recruiting and retention, and possibly threaten the continued existence and viability of the All-Volunteer Force; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we will redouble our efforts to work with Congress and the Administration to preserve the All-Volunteer Force, to end the sequester, and to help bring some financial stability to a military that will continue to operate in a very dangerous and unpredictable world.

LINK MILITARY PAY INCREASES TO PRIVATE-SECTOR INCREASES

WHEREAS, military pay raises are linked by law to the increase in private-sector wages, as measured by the Employment Cost Index (ECI). The Administration's military pay raise request, however, can be more or less than the ECI, with Congress having the final approval; and

WHEREAS, Congress erased the double-digit pay gap of the 1990s by directing military pay raises from fiscal years 2000-2006 to be a half-percent above private-sector wage increases, and raises from FY 2007-forward to match the ECI, although more could be authorized; and

WHEREAS, the 1.7 percent military pay raise for FY 2013 matched the ECI, but the Department of Defense—in its continuing campaign to slow the growth of military compensation due to budget constraints and the sequester—recommended that future pay increases be limited, despite knowing it could lead to another pay gap similar to the past; and

WHEREAS, over the objections of the VFW but with the approval of Congress, the new "slow the growth" initiative began with the FY 2014 military pay increase of 1 percent, even though the ECI increase was 1.8 percent, and continued into FY 2015 with another 1 percent raise, though the ECI was 1.7 percent. DOD is now requesting a 1.3 percent increase for FY 2016, which again is expected to be less than ECI forecasts; and

WHEREAS, changes to military pay and benefits is the top concern of military service members and their families. Continued efforts to slow the growth of military compensation, combined with a better civilian jobs market, could directly impact recruiting and retention, which could jeopardize the continued existence and viability of the All-Volunteer Force; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we call upon Congress to maintain military base pay comparability with private-sector wages by matching annual military pay raise percentages to annual ECI increases.

THOROUGHLY REVIEW MCRMC RECOMMENDATIONS

WHEREAS, the Military Compensation and Retirement Modernization Commission's (MCRMC) contained 15 recommendations regarding potential changes to military quality of life programs that it claims will help to preserve the long-term viability of the All-Volunteer Force, to maintain the quality of life of troops and their families, and to achieve fiscal sustainability for the military compensation and retirement systems going forward; and

WHEREAS, the VFW believes the Commission's work, in concert with ever-continuing efforts by the Department of Defense to shift personnel costs, has initiated an important conversation with Congress and the American people about what it means to properly take care of veterans, service members and their families; and

WHEREAS, the VFW supports recommendations that would bolster financial literacy, improve services to military families, and less complicate the Reserve Component's dozens of duty statuses. The VFW also supports providing a government match of up to 6 percent to the existing Thrift Savings Plan (TSP), but the VFW cannot readily support recommendations that would alter retirement compensation and healthcare benefits without significantly more information regarding who—the government or the individual—would benefit the most from enacting the recommendation; and

WHEREAS, any potential change to the existing military retirement system will grandfather current retirees and service members. New enlistees will know what they are signing up for, and current service members will be given an opportunity to opt in. The VFW's concern is whether the recommendation to lower the value of a 20-year retirement from 50 to 40 percent of base pay, but adding the market-based value of a robust TSP program and a one-time continuation bonus at the 12-year mark, will be enough incentive to retain the best and brightest through 20 years and beyond. Still another concern is the recommendation to move away from the government-managed TRICARE health program into a competitive, market-based system that the Commission claims will provide better service and more coverage selections, but at a higher out-of-pocket cost to military dependents and retirees; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we support the Military Compensation and Retirement Modernization Commission recommendations that would bolster financial literacy, improve services to military families, would less complicate Reserve Component duty statuses, and to provide a government match of up to 6 percent to existing Thrift Savings Plans; and

BE IT FURTHER RESOLVED, that we will work with Congress to further define the benefits and potential pitfalls associated with the Commission's recommendations to change current military retirement and health care programs.

PRESERVE MILITARY TUITION ASSISTANCE PROGRAMS

WHEREAS, the military's Tuition Assistance (TA) program is an invaluable inservice benefit for all service members of every rank, especially for noncommissioned officers who are highly encouraged to have an associates or bachelor's degree before being selected for promotion into the Top 3 ranks, and for company grade officers who are highly encouraged to have advanced degrees before being eligible for promotion to field grade; and

WHEREAS, in early 2013, the Army, Air Force and Marine Corps deemed TA to be a non-priority and suspended their programs in an effort to control personnel-related costs in a budget-constrained environment. The VFW intervened by working with Congress to fully reinstate TA on behalf of the estimated 300,000 service members who rely upon the benefit annually to advance their personal and professional development goals; and

WHEREAS, the Military Compensation and Retirement Modernization Commission recommended doing away with the military's Tuition Assistance program in favor of service members using their earned GI Bill veterans' benefits, which the VFW views as a postmilitary transition assistance program and not a military professional development supplement; and

WHEREAS, since the military highly encourages its members to have civilian degrees, Congress must not allow the services to eliminate TA or to require individual Soldiers, Sailors, Airmen or Marines to use their Department of Veterans Affairs-funded GI Bill programs while they are still on active-duty; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the military services to fully fund and maintain their Tuition Assistance programs, and for Congress to work with DOD to develop TA policies that will ensure the program remains a quality professional development and military retention tool.

ENSURE DOD COMPLIANCE WITH TAP MANDATE

WHEREAS, the goal of the military's Transition Assistance Program (TAP) is to ease the difficult transition from active duty into civilian life by offering job-search assistance, advice on available educational and healthcare programs, and other earned benefits; and

WHEREAS, Congress mandated TAP pre-separation counseling for all service members, and for the military to develop additional tracked curricula focused on education, employment, vocational careers and entrepreneurship in collaboration with the Departments of Veterans Affairs, Education and Labor, as well as with the Small Business Administration; and

WHEREAS, the Department of Defense has implemented a new TAP curriculum for separating service members, but does not require them to participate in classroom instruction for the individual tracks for Career Vocational Training, Accessing Higher Education, or Entrepreneurship; and

WHEREAS, former Secretary of Defense Chuck Hagel issued guidance to installation commanders to accommodate nationally-accredited Veterans' Service Organizations to provide pre-separation services to transitioning service members, but local transition program staff do not consistently afford VSOs with the opportunity to actively engage service members during scheduled TAP classes; and

WHEREAS, although DOD and the Department of Labor worked to make TAP resources available to veterans via a public-facing website, transitioning service members lose their access to TAP classroom instruction and supplemental TAP resources once they separate or retiree, which is when they may need those resources the most; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the Department of Defense to include the additional curriculum tracks in its mandatory pre-separation classroom counseling, and to ensure nationally-accredited Veterans' Service Organizations are afforded consistent access to transitioning service members; and

BE IT FURTHER RESOLVED, that we request Congress to require DOD and its partner agencies to periodically update their TAP information and procedures to maintain program relevancy, and to expand access to TAP resources for veterans after separating from the military.

REVISE UNFAVORABLE DISCHARGE REVIEW PROCEDURES

WHEREAS, approximately 30,000 veterans have been administratively discharged from the military for adjustment or personality disorders since September 11, 2001, and according to the Army Human Resources Command, the number of misconduct discharges continues to increase; and

WHEREAS, discharges under other-than-honorable conditions often disqualifies veterans from Department of Veterans Affairs health, compensation and education benefits, and could render them undesirable to potential employers; and

WHEREAS, many veterans who received unfavorable discharges could have been suffering from the effects of undiagnosed and untreated Post-Traumatic Stress Disorder, Traumatic Brain Injuries and Military Sexual Trauma as the result of their military service; and

WHEREAS, a 2014 Department of Defense decision opened an avenue for Vietnam veterans and others to request upgrades to their other-than-honorable military discharge due to an extenuating factor not known at the time of their separation: PTSD. The decision is not a blanket approval for every upgrade request, but it does help veterans who may have been diagnosed with PTSD years after separation to submit new evidence and hopefully correct a past injustice; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to establish a process by which BCMs and DRBs presume administrative irregularity and place the burden of proof on DOD to show that the discharge was just for those cases where the veteran claims service-related PTSD, TBI or MST as a mitigating factor in requesting an upgrade to his or her military discharge.

PROVIDE DD-214s TO ALL RESERVE COMPONENT MEMBERS

WHEREAS, virtually all veterans are eligible for VA medical care, as well as compensation and pension, if a service-connected wound, illness or injury occurred while on active duty; and

WHEREAS, eligibility for other VA benefits is based on presenting proof of active military service in the form of a DD Form 214. According to Title 10, U.S. Code, a member of the Guard or Reserve can only receive a DD-214 if they serve 90 days of continuous active duty, although Service Secretaries have the authority to issue the forms for shorter time periods; and

WHEREAS, the Guard and Reserve contributed a quarter of all ground forces deployed into Iraq and Afghanistan over the past 13 years, and half of all Air Force airlift, yet similar to the active force, not every Reserve Component member had the opportunity to deploy much less be activated for 90 consecutive days; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to delete the 90-day activation requirement in Title 10, U.S. Code, and provide the DD Form 214 to all Reserve Component members who separate or retire under conditions other than dishonorable.

CORRECT RESERVE COMPONENT EARLY RETIREMENT PAY PROVISIONS

WHEREAS, America's reliance on its Reserve Component (RC) has been unprecedented in our nation's history. According to the Defense Department, more than 900,000 RC members have served on active duty since 9/11, with a third of them serving multiple tours; and

WHEREAS, RC retirees are normally eligible to receive military retirement pay at age 60, but in an effort to recognize their service, the fiscal year 2008 National Defense Authorization Act (NDAA) allowed National Guard and Reserve members to lower their retirement pay eligibility age by three months for every 90 days served on active duty after Jan. 29, 2008; and

WHEREAS, the provision did not, however, extend early retirement credit to hundreds of thousands who were activated prior to the implementation date, nor did it include a carryover clause, which meant the credit was only awarded if the minimum 90day activation period occurred within the same fiscal year; and

WHEREAS, the FY 2015 NDAA amends the earlier language by including a carryover clause for RC members activated after Sept. 30, 2014, but the new law did not extend the carryover provision back to Jan. 29, 2008, or grandfather any early retirement credits back to 9/11. This inequity discounts the dedication and sacrifice of our Reserve Component members serving at home and abroad; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to grandfather all early retirement credits to all Reserve Component members who were activated in support of a contingency operation from 9/11 forward.

EXPAND OPERATION WARFIGHTER PLACEMENTS

WHEREAS, Operation Warfighter is a Department of Defense program that allows wounded, ill or injured service members to temporarily intern with other federal departments and agencies while they recuperate or are on medical hold pending discharge or retirement; and

WHEREAS, there is no cost to gaining agencies, as DOD pays each participant's full military pay and allowances while he or she gains valuable federal civilian work experience for the average 20 hours per week, three-month internship; and

WHEREAS, the program has placed more than 2,500 recuperating service members with 105 different federal departments and agencies. More important, a third were offered fulltime employment after their military discharge or retirement; however, current legislation to reduce the size of the federal workforce by 10 to 15 percent may present fewer federal employment opportunities in the future; and

WHEREAS, the program to temporarily place wounded, ill or injured service members with federal agencies should be expanded to include the private sector as well, where fulltime employment opportunities will always be greater than within the federal government; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the Department of Defense to expand the Operation Warfighter internship program to include placing wounded, ill or injured service members with nonprofit organizations and civilian industry.

PROVIDE FULL CONCURRENT RECEIPT OF MILITARY RETIREMENT PAY AND VA DISABILITY COMPENSATION

WHEREAS, the fiscal year 2004 National Defense Authorization Act allowed for the gradual phase-in of full concurrent receipt of military retirement pay and Department of Veterans Affairs disability compensation for service-connected wounds, illnesses or injuries; and

WHEREAS, the 10-year phase-in period ended in 2014, which means military retirees with 20 or more years of service and 50 percent or higher VA disability ratings no longer have their military retirement pay offset by the amount of their VA disability compensation; and

WHEREAS, the law did not provide the same equity to service-connected disabled military retirees with VA ratings of 40 percent or below, or Chapter 61 retirees who were medically retired with less than 20 years, regardless of VA disability rating; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we support legislation for the full concurrent receipt of military retirement pay and VA disability compensation without offset and regardless of rating percentage.

MST INCIDENT REPORTING AND TREATMENT

WHEREAS, the Defense Department's annual report on Sexual Assault in the Military Services indicated that 5,983 service members reported being sexual assaulted in fiscal year 2014. The Department of Veterans Affairs reported, as of October 2014, that 25 percent of female veterans and 1 percent of male veterans responded "yes," that they experienced a Military Sexual Trauma (MST), when screened by their VA provider; and

WHEREAS, it is widely held that a far greater number of MST victims do not come forward while on active duty due to embarrassment, lack of command action when they do file reports, or for fear of personal and/or professional reprisal, to include real or perceived "red flags" in their military personnel folders; and

WHEREAS, DOD's "Zero Tolerance" campaign has made great strides to encourage prevention efforts and tighten field reporting and managerial oversight, to include providing restricted and unrestricted options for reporting a sexual assault. DOD has begun keeping records that provide evidentiary support of the assault and its effect on service members, and has taken steps to improve the actions of first responders, as well as to provide confidential counseling and other specialized treatments. Yet many MST victims are not aware of such services, which could help alleviate mental health issues commonly associated with sexual assault; and

WHEREAS, although the VA does not require MST victims to have first reported an incident or to have a VA disability rating before receiving treatment, more can still be done inside DOD with regards to prevention, treatment and reporting; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge DOD to continue strengthening its "Zero Tolerance" campaign by encouraging all MST victims to report their attacks, to provide victims with proper medical and mental health care, and to aggressively investigate every reported incident and punish attackers as appropriate.

REPEAL SBP/DIC OFFSET

WHEREAS, the surviving spouses of retired military members who die from serviceconnected wounds, illnesses or injuries are entitled to Dependency and Indemnity Compensation (DIC) benefits from the Department of Veterans Affairs. However, if the military retiree was also enrolled in the Defense Department's Survivor Benefits Plan (SBP), the surviving spouse's SBP benefit would have a dollar-for-dollar offset by the amount of DIC benefits; and

WHEREAS, SBP and DIC payments are paid for two different reasons. Similar to life insurance, SBP is purchased by the retiree and is intended to provide 55 percent of his/her retirement pay to the surviving spouse. DIC is a modest indemnity compensation benefit of \$1,215 per month that is paid to surviving spouses whose loved ones died from a service-connected condition; and

WHEREAS, with few exceptions, the surviving spouses of other federal program retirees have no offset penalty, whereas more than 65,000 surviving military spouses are affected by this aptly termed "widow's tax." Congress recognized the offset as unfair and in the fiscal year 2008 National Defense Authorization Act created a Special Survivor Indemnity Allowance to partially reduce some of the offset via a graduated monthly payment of up to \$310, but only through FY 2017; and

WHEREAS, military retiree SBP payments currently range between 2.5 and 6.5 percent of the selected base amount. A recommendation by the Military Compensation and Retirement Modernization Commission would offer a new SBP program with substantially higher (a fluctuating 11.25 percent) monthly premiums in order to receive full DIC without offset. The VFW's position is for the full repeal of the SBP-DIC offset, not to subsidize it out of the pockets of military retirees; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to repeal the Survivor's Benefit Plan and Dependency and Indemnity Compensation offset.

CREATE A JOINT MILITARY MEDICAL COMMAND

WHEREAS, Army, Navy and Air Force medical professionals provide the highest level of care to all eligible service members, dependents and retirees, yet a 2006 Defense Department proposal to create a Joint Military Medical Command continues to be ignored due to interservice rivalries and perceived mission and cultural differences between the services; and

WHEREAS, military medicine operates in a joint world, from contingency and humanitarian deployments to meeting the daily healthcare needs of more than 9 million multiservice beneficiaries with 59 inpatient hospitals and 364 clinics; and

WHEREAS, despite the unwillingness of the services to discuss a joint command, some universal medical processes and operations have already merged. Research is aligned under the Army Medical Research and Material Command at Fort Detrick, Md.; all enlisted medics and corpsmen are trained at Fort Sam Houston, Texas; information management and technology, facilities management, contracting and procurement, and logistical and financial support services are being consolidated; and 45 percent of total beneficiaries are now being served by the Defense Health Agency, which activated in 2013 to merge military medicine in six major markets—San Antonio, the National Capitol Region, Hawaii, Colorado Springs, and in Washington State's Pudget Sound and Virginia's Tidewater Region; and

WHEREAS, the military medical communities can no longer afford a parochial attitude, not with a downsized military, reduced defense budgets, threats of new base closure rounds, a continued high operations tempo, and the still unfulfilled requirement to create one interoperable electronic health record between DOD and the Department of Veterans Affairs; and

WHEREAS, the Military Compensation and Retirement Modernization Commission recommendation to elevate the status of a surgeon general inside a newly created Joint Readiness Command merely creates another level of bureaucracy and does not address the need for one joint medical command; and

WHEREAS, the Defense Health Agency has proven that the future of military medicine is in jointness. The services need to stop resisting and start discussing how to get there from here; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to use the Defense Health Agency as a springboard towards creating a Joint Military Medical Command.

PROTECT POW/MIA FULL ACCOUNTING MISSION FUNDING

WHEREAS, the Veterans of Foreign Wars of the United States is deeply committed to achieving the fullest possible accounting of 83,000 missing Americans that include approximately 73,600 from World War II, 7,900 from the Korean War, 1,630 from the Vietnam War, 126 from the Cold War, and 6 post-Vietnam that include Operations Eldorado Canyon (1), Desert Storm (2) and Iraqi Freedom (3); and

WHEREAS, it is hoped that the merger of the former Defense POW/Missing Personnel Office, the Joint POW/MIA Accounting Command, and the Air Force Life Science Equipment Laboratory, into the new Defense POW/MIA Accounting Agency (DPAA) will produce the unity of command necessary to achieve the fullest possible accounting of missing and unaccounted-for Americans; and

WHEREAS, DPAA has strong bipartisan support on Capitol Hill, which will be necessary should additional funding be required to support recovery operations in North Korea, which have been interrupted since 2005 due to U.S. safety and security concerns; and

WHEREAS, without additional funding to meet expanded requirements, DPAA could be forced to postpone or cancel difficult recovery sites in favor of potentially more productive locations, such as mass burials or multi-crewman aircraft crashes. Full funding enables DPAA to efficiently plan, resource and accomplish its worldwide mission to recover, identify and return to their families all missing American service members from all wars and conflicts; now, therefore,

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we call upon Congress to fully fund the requested amounts for the Defense POW/MIA Accounting Agency and all supporting organizations involved in the Full Accounting Mission.

CALL FOR MORE UNILATERAL POW/MIA ACTIONS BY VIETNAM

WHEREAS, 2,583 Americans were listed as missing and unaccounted-for at the end of the Vietnam War. As of February 2015, the number of missing is slowly nearing 1,630 due to a combination of increased U.S. Government emphasis, better research and identification technology, stronger diplomatic ties with host governments, and access to aircraft crash and ground battlefield sites; and

WHEREAS, Vietnam had a comprehensive wartime and post-war process to collect and retain information and remains, and according to the National League of POW/MIA Families, this unilateral effort enabled the Vietnamese to locate and return remains to U.S. custody along with records that continue to offer significant potential; and

WHEREAS, onsite joint field operations are also achieving increased results. The process now includes both U.S.-led Joint Excavation Teams and Vietnamese-led Recovery Teams that are assisted by fewer Americans who are experts in their fields of forensic science, EOD and medical. This formula allows a greater number of teams to "increase the pace and scope of field operations," as requested by Vietnam; and

WHEREAS, increased military-to-military relations is also benefiting the Full Accounting Mission. U.S. Navy assets are increasingly allowed to participate in underwater survey and recovery operations, which has long been advocated for by the VFW; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we encourage Vietnam to continue to expand the number and frequency of Vietnamese-led recovery operations; and

BE IT FURTHER RESOLVED, in this cooperative effort, that we urge Vietnam to continue to authorize its officials to locate and release immediately to the United States all records relating to Americans missing from the Vietnam War, and to urge the Vietnamese people to turn over the remains of Americans or information on American burial sites, as well as any reports of live American servicemen.

SECURE AMERICA'S BORDERS

WHEREAS, America's security is threatened by foreign nationals who enter the United States illegally with the intent to do harm, by those who may enter legally but intentionally overstay their work, education or tourist visas, and potentially by U.S. born or naturalized citizens and legal immigrants who could return to the U.S. after receiving military-style training in tactics and weaponry by belligerent countries or nonaligned terrorist organizations; and

WHEREAS, U.S. Customs and Border Protection has increased its workforce to 60,000 to operate 328 sea, land and air Ports of Entry, and to provide a physical monitoring and enforcement presence along America's southern border. Physical barriers are being erected along 700 miles of our 2,000-mile border with Mexico, but such barriers are virtually nonexistent along the 5,500-mile border we share with Canada, or along 12,000 miles of U.S. coastline; and

WHEREAS, increased surveillance, enforcement, intelligence collection assets and economic support to border states helped to reduce violent crime and led to the deportation of almost 316,000 in fiscal year 2014, two-thirds of whom were apprehended while trying to illegally cross into the United States. The other one-third—85 percent of whom had been previously convicted of a crime—were apprehended and deported from inside the country; and

WHEREAS, regarding trained insurgents, the House Foreign Affairs Committee chairman said in February that as many as 20,000 foreign fighters from more than 90 countries now make up the ranks of the Islamic State of Iraq and Syria, to include at least 3,400 from the West and more than 150 Americans. No one has an accurate estimate because of nonexistent travel restrictions into neighboring countries through which people can use as transit points, but clearly more must still be done to secure America's borders, to include eliminating sequestration and its impact on the budgets of those federal agencies tasked with securing America's homeland; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to end sequestration and to fast-track funding so that the Departments of Homeland Security and Justice can expedite all initiatives to secure America's borders from all threats, foreign and domestic; and

BE IT FURTHER RESOLVED, that we insist the U.S. Government continue to aggressively identify and deport illegal aliens who commit crimes.

HALT ROGUE NATION WMD PROGRAMS

WHEREAS, the greatest threat to America is weapons of mass destruction—and the technology by which to make and employ them—in the hands of North Korea and Iran, as well as nonaligned terrorist organizations; and

WHEREAS, the Administration and Congress must remain suspicious of the actions and motives of North Korea and Iran, who repeatedly reject diplomatic attempts to reduce tensions and normalize relations; and

WHEREAS, North Korea continually breaks earlier agreements by conducting underground nuclear detonations, test firing warhead-capable missiles, and by stating it no longer honors the 1953 armistice, which is a direct threat to South Korea. North Korea is also a known exporter of ballistic missiles and its technology to countries unfriendly to the United States, most notably Iran; and

WHEREAS, Iran's nuclear program is a major contention with the West. Current sanctions are crippling Iran's economy, and a new set of escalating sanctions are set to be imposed if Iran does not agree to abandon its nuclear weapons programs by July 6, 2015. The new sanctions would tighten petroleum export loopholes, reduce third country petroleum purchases, penalize foreign financial institutions, and restrict the import of automotive, construction, engineering and mining equipment; and

WHEREAS, nonaligned terrorist organizations, such as al-Qaeda and the Islamic State of Iraq and Syria, continue to demonstrate with deadly consequences their ability to strike regionally and globally without remorse; now therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we call upon the Administration and Congress to do all within their power to halt the nuclear weapons development programs and transfer of nuclear weapons technology and material to rogue nations and nonaligned terrorist organizations; and

BE IT FURTHER RESOLVED, that we support and encourage the U.S. Government to penalize all American companies and corporations that conduct business with North Korea and Iran.

BALLISTIC MISSILE DEFENSE CRITICAL TO NATIONAL SECURITY

WHEREAS, the U.S. State Department says the worldwide proliferation of ballistic missiles almost makes them common battlefield weapons, yet the United States has not fielded a Ballistic Missile Defense (BMD) system that is fully capable of detecting, intercepting, and destroying one or more ballistic missiles aimed against our homeland; and

WHEREAS, even though the Cold War missile threat against the United States has subsided, there are an estimated 6,300 ballistic missiles of different ranges that are not controlled by the U.S., NATO, Russia or China; and

WHEREAS, BMD systems have a proven capability to be able to detect, intercept and destroy ballistic missiles in flight. Despite the growing threat of rogue nations, unstable third world countries and nonaligned terrorist organizations, the United States still has no ballistic missile defense system to protect our country and her citizens from attack; and

WHEREAS, along with satellite assets, the U.S. has operational surveillance radar units deployed in the Pacific and Middle East, is continuing shipborne Aegis BMD testing in the Pacific, and will have an operational Aegis Ashore site in Eastern Europe later this year; and

WHEREAS, U.S.-Israeli partnerships, with respect to the battlefield proven capabilities of the short-range Iron Dome weapons system, and the continued testing of the medium-range David's Sling and long-range Arrow-3, is confirming that a multi-layered defense against everything from short-range mortars, rockets and artillery shells to longerrange cruise missiles and intercontinental ballistic missiles is both technologically and operationally achievable today; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we call upon Congress to fund a fully integrated ballistic missile defense system to protect our country, our deployed military forces, and our allies.

SUPPORT THE REPUBLIC OF CHINA ON TAIWAN

WHEREAS, the Republic of China on Taiwan is a historic democratic ally of the United States, a valuable trading partner, and key link in the Western Pacific defense chain; and

WHEREAS, the Taiwan Relations Act (PL 96-8) codifies the policy of the United States to provide Taiwan with arms of a defensive character to bolster peace and stability in the cross-strait environment; and

WHEREAS, on January 1, 1979, then-President Carter terminated diplomatic relations between the U.S. and Taiwan, and instead established diplomatic relations with the People's Republic of China in an attempt to help maintain peace, security and stability in the Western Pacific. This loss of diplomatic status prevents the President of Taiwan from receiving the same respect and courtesies afforded other Heads of State who visit the U.S.; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the Administration and Congress to strictly adhere to the concepts of the Taiwan Relations Act by approving the sale of state-of-the-art military equipment, weapons and technology to maintain an adequate defense capability; and

BE IT FURTHER RESOLVED, that we call upon the Administration and Congress to support the admission of the Republic of China on Taiwan into the United Nations, and to afford the President of Taiwan the same respect and privileges due other visiting Heads of State.

SUPPORT THE REPUBLIC OF KOREA

WHEREAS, the Republic of Korea is a historic democratic ally of the United States, a valuable trading partner, and a key link in the Northeast Asia defense chain. Numerous treaties are in force with the Republic of Korea concerning economic and technical cooperation, education, maritime matters, trade and commerce, and the Mutual Defense Treaty, that was enacted on November 17, 1954; and

WHEREAS, South Korea's immediate neighbor, however, continues to maintain an extremely large and forward-deployed military force capable of launching no-notice offensive operations against South Korea; and

WHEREAS, North Korea's new "supreme leader," the European-educated Kim Jongun, has expanded upon the same aggressive path established by his father and grandfather. He purged his inner counsel of three defense ministers and four army chiefs of staff—the most prominent of whom was his uncle—and replaced them with officers more loyal to him; and

WHEREAS, North Korea continues to escalate tensions in the region by test launching potentially nuclear-capable missiles and conducting underground nuclear explosions. It is a known exporter of ballistic missiles and its technology to countries unfriendly to the United States, most notably Iran, and it periodically deploys its armed forces along the demilitarized zone and the Joint Security Area in Panmunjom; and

WHEREAS, the continued unpredictability of North Korea makes the presence of U.S. ground and air forces inside South Korea even more critical as a deterrent to aggression; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the U.S. Government to maintain a substantial military presence in the Republic of Korea, and to increase military aid and assistance though modern weaponry and technology to help promote peace and stability in the region.

SUPPORT THE STATE OF ISRAEL

WHEREAS, the State of Israel is a historic, democratic ally of the United States of America, and a key link in the defense of democratic principles in the Middle East; and

WHEREAS, Israel is surrounded by active enemies, to include Hamas in the Gaza Strip, which has fired more than 15,000 short-range rockets into mostly civilian towns and villages over the past 10 years; Hezbollah in southern Lebanon, which continues to infiltrate Israel through underground tunnels; and Iranian influences on the Palestinian Authority in the West Bank, which continues to escalate tensions through indiscriminate small arms and car bomb attacks. Yet to be determined is the impact of Syria's internal civil war and/or the spillover of its fight with ISIS, the Islamic State of Iraq and Syria; and

WHEREAS, Iran is one of America's and Israel's foremost enemies, and continues to be one of the most serious threats to regional stability due to its conventional military forces, ballistic missiles, nuclear research and proliferation, and as an exporter of terrorism; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the United States Government to continue to support the State of Israel through the sale of state-of-the-art military equipment and technology to help them maintain an adequate defense capability in order to survive as a nation.

ADEQUATE DEPARTMENT OF VETERANS AFFAIRS BUDGET

WHEREAS, there are about 21.6 million living veterans; and

WHEREAS, more than 2 million men and women have served in combat in Iraq and Afghanistan since 9/11/2001; and

WHEREAS, VA anticipates that enrollment in the Veterans Health Administration will grow to nearly 9.2 million veterans; and

WHEREAS, more than 6.6 million of those veterans will be seen by VA for health care services; and

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

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the Congress of the United States 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.

OPPOSE VA PHARMACEUTICAL CO-PAYMENT INCREASES

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

WHEREAS, there have been repeated proposals to raise the pharmaceutical co-payment, placing an undue hardship on many veterans; and

WHEREAS, in 2010, the Secretary of Veterans Affairs, using his statutory authority, raised the pharmaceutical co-payment from \$8 to \$9 for each 30 day supply for priority groups 7 and 8, and authority to raise it again in the future exists; and

WHEREAS, the increase in costs of the benefit would likely cause many veterans to turn away from the VA health care system and would serve to inequitably balance the federal budget through veterans programs; and

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

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we oppose increases in the VA pharmaceutical co-payment.

MAKE CHAMPVA PAYMENTS FAIR TO PROVIDERS

WHEREAS, the fees paid under the CHAMPVA medical insurance to providers of medical services are less than the fees paid by private insurance; and

WHEREAS, these reimbursement rates are subject to a pending rate cut of 24 percent under the Balanced Budget Act of 1997; and

WHEREAS, many private medical providers will not accept CHAMPVA, and TRICARE because of the inequity of payment; and

WHEREAS, the government plans are the only insurance that many 100 percent disabled and retired military personnel have and the proposed reductions will prevent veterans and their dependents from adequate medical treatment and care; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we support legislation and regulations requiring that CHAMPVA, TRICARE and other plans providing medical care for retired and disabled veterans be kept competitive with private insurance providers.

VA MEDICARE REIMBURSEMENT

WHEREAS, the VFW views it as essential that the VA health care system provide qualifying veterans with timely and accessible care; and

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

WHEREAS, a large number of VA's patients are Medicare eligible; and

WHEREAS, VA's ability to deliver health care efficiently, effectively and at lower cost than does the private health care industry ensures that Medicare will be billed at lower rates than private health care providers; and

WHEREAS, the diversion of Medicare eligible veterans from the private sector to VA will result in both lower costs to Medicare and greater reimbursements to VA; and

WHEREAS, 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 VA to collect and retain Medicare reimbursement dollars from care that is provided to non-service connected veterans who are Medicare eligible and who seek care through the Veterans Health Administration.

CONSIDER TREATMENT FOR A PRESUMPTIVE SERVICE CONNECTED CONDITION 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 VA facility; and

WHEREAS, many VA medical 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 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 (VA) for a condition or disease recognized as presumptively service connected will be considered to be an informal claim for service connection for compensation purposes.

EXTENDING GULF WAR PRESUMPTIONS AND HEALTH CARE TO AFGHANISTAN THEATER VETERANS

WHEREAS, many service members have served in Operation Enduring Freedom; and

WHEREAS, these veterans have served under circumstances similar to those serving in Operation Iraqi Freedom, Operation New Dawn, and the first Persian Gulf War; and

WHEREAS, Afghanistan was not considered part of the Southwest Asia theater of operations during Operation Desert Storm and the VA did not include Afghanistan; and

WHEREAS, veterans of Afghanistan are suffering from similar undiagnosed conditions as those who have served in Iraq; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress and the VA must 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 while research is ongoing, allow veterans of Operation Enduring Freedom access to the Gulf War Registry Health Exam.

NURSING HOME ELIGIBILITY

WHEREAS, the Veterans of Foreign Wars of the United States has called upon Congress to enact legislation to regulate and expand eligibility for VA health care and provide all veterans with mandated access to the full continuum of VA health care services which include nursing home 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 nursing home 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 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 VA nursing home entitlement for all veterans.

TRAUMATIC BRAIN INJURY HEALTH CARE

WHEREAS, since 2000, more than 313,816 service members have sustained Traumatic Brain Injury (TBI) including those that served in Operations Iraqi Freedom, Enduring Freedom and New Dawn; 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 mildly injured TBI patients may have long-term mental and physical health consequences; and

WHEREAS, there has been universal recognition that veterans with severe TBI will need a lifetime of intensive services to care for their injuries and many VA medical facilities are not currently staffed or equipped to provide the necessary and appropriate screening, or quality health care services to veterans suffering from TBI; 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 lifelong case management services are available to every veteran suffering from TBI; and

BE IT FURTHER RESOLVED, that we urge the Secretary of Veterans Affairs to increase research pertaining to, screening methods, diagnostic tools, and more effective treatments for traumatic brain injury patients to ensure that TBI veterans are receiving quality standardized treatment and rehabilitation care available.

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 suicides among a host of other negative consequences; and

WHEREAS, a total number of Iraq, Afghanistan, and Operation New Dawn veterans diagnosed with PTSD as of September 2014 is 378,300; 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, and adequate research into the brain's response to internal and external influences that could result in mental illness has yet to be undertaken; and

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

WHEREAS, VA statistics show that approximately 22 Veterans commit suicide every day, exposing a national crisis; 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 commit suicide.

VA SERVICES FOR WOMEN VETERANS

WHEREAS, the number of women joining the armed forces of our country continues to increase every year; and

WHEREAS, the most recent figures indicate, 583,580 women veterans were enrolled within the VA health care population, and 57 percent of Iraq and Afghanistan female veterans have received VA care, and female veterans use more primary and mental health services than their male counterparts; and

WHEREAS, the number of enrolled women veterans is expected to double in the next two to four years making it essential that VA continue to staff and equip its facilities to meet their specific health care needs; and

WHEREAS, VA has made a push to increase the gender specific awareness and training for its medical staff and health care providers; and

WHEREAS, many VA facilities are providing gender-specific health care services to include counseling and care for Post Traumatic Stress Disorder (PTSD) whether due to combat, Military Sexual Trauma (MST), or another form of trauma; and

WHEREAS, VA has hired and trained full-time Women Veteran Program Managers who are charged with improving care and access for women veterans; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we acknowledge that VA has improved its medical staff gender-specific training as well as the care and services provided to women veterans, but we urge VA to continue to monitor and enhance their health care services available to women veterans at all VA facilities by improving privacy and security within medical facilities and providing adequate mental health care services to include ongoing training of individuals specifically assigned to meet the needs of women to include care for MST and PTSD; and place the highest priority on women veterans programs; and

BE IT FURTHER RESOLVED, that we urge the Secretary of Veteran Affairs to improve outreach and expand programs for women veterans to close critical gaps, allow women to choose their VA healthcare provider and continue to offer a full-range of services designed to meet their current and future needs.

INCREASE ACCESS, CHOICE, AND VALUE OF HEALTH CARE FOR VETERANS, SERVICE MEMBERS, AND THEIR FAMILIES

WHEREAS, P.L. 111-148, the "Patient Protection and Affordable Care Act," extended the eligibility age for dependent children being carried on their parents' health insurance policies to 26 years old; and

WHEREAS, the extension was subsequently provided to dependent children of military personnel (those on TRICARE) by P.L. 111-383, the "National Defense Authorization Act (NDAA) for FY 2011"; and

WHEREAS, the only qualified dependents that are not covered under a parent's health insurance policy are those of 100 percent service-connected disabled veterans covered under The Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA); and

WHEREAS, the government plans are the only insurance that many 100 percent disabled and retired military personnel have and the proposed reductions will prevent their dependents from adequate medical treatment and care; and

WHEREAS, CHAMPVA, TRICARE, and other health care plans that are provided to veterans, service members and their families have deteriorated relative to the access, choice, and value civilians receive in the private sector; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we support policies requiring that CHAMPVA, TRICARE and any other plans providing medical care to veterans, service members, and their families be kept competitive with private insurance providers; and

BE IT FURTHER RESOLVED, by the Veterans of Foreign Wars of the United States, that we support policies requiring that the dependent children of 100 percent service-connected disabled veterans are afforded the same health care access as the dependents of non-veterans.

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 on or after September 11, 2001; and

WHEREAS, no such comprehensive program exists for the caregivers of veterans of other eras; and

WHEREAS, the VFW believes that severely disabled 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, it is arbitrary and unjust that veterans who were severely disabled prior to September 11, 2001 are ineligible for the Comprehensive Assistance for Family Caregivers Program; 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 (SCAADL) 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 expand eligibility for the VA Comprehensive Assistance for Family Caregivers Program to include veterans of all eras; and

BE IT FURTHER RESOLVED, that we urge Congress to fully align the VA Comprehensive Assistance for Family Caregivers Program with the DOD SCAADL program by including in its eligibility criteria veterans who require caregiver services as a result of serious illnesses incurred in the line of duty.

EXTEND SERVICE CONNECTION PRESUMPTION TO BLAST SURVIVORS

WHEREAS, the Global War on Terrorism has placed tens of thousands of service members in harm's way; and

WHEREAS, the nature of the conflict these men and women face is frequently guerrilla-style combat where the enemy is widely known to use improvised explosive devices (IEDs); 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 our men and women in uniform can suffer from these disabilities for many years after the blast; and

WHEREAS, a large number of veterans have been identified as having been evaluated or treated for a condition possibly related to a Traumatic Brain Injury (TBI) at a VA medical center from the start of OIF/OEF/OND; 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 the conditions associated with Traumatic Brain Injury (TBI).

TINNITUS AND HEARING LOSS PRESUMPTIVE 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 ships) or certain occupational specialties have a high incidence rate of hearing loss or tinnitus as a direct result of acoustic trauma; and

WHEREAS, many pre-service and discharge examinations, particularly for World War II and Korean Conflict veterans, were usually accomplished with the highly inaccurate whispered-voice test; and

WHEREAS, veterans, in those cases, were not afforded a comprehensive audio logical examination upon entrance and discharge from the military services; and

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

WHEREAS, in 2005 the Institutes of Medicine (IOM) 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; 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.

HEARING LOSS COMPENSATION

WHEREAS, veterans of the armed services who served in combat have a high incident rate of hearing loss usually associated with acoustical trauma; and

WHEREAS, in the practice of granting disability compensation there is a long-standing precedent that ratings not be offset by the function artificially restored by prosthesis; and

WHEREAS, the Department of Veterans Affairs 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, many veterans have incurred extreme hardships through undocumented acoustic trauma related to combat service or occupational duty; and

WHEREAS, hearing aids are considered a prosthetic device necessary for good quality of life; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, 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.

VA CLAIMS WORKLOAD

WHEREAS, the Department of Veterans Affairs (VA) has a workload of 1.75 million claims for compensation, pension, education benefits and appeals; and

WHEREAS, due to the increasing complexity of claims, the need for compliance to Court of Veterans Appeals decisions claims, and the continued increase in the number of claims received each year the workload has remained unacceptably high; and

WHEREAS, because of substantial number of claims and appeals cases, 47.1 percent of rating cases have been pending for more than 125 days and take, on average, 186 days to complete. Appeals have increased to over 292,000 and pend, on average, over 1,000 days at a regional office before being shipped to the Board of Veterans Appeals; and

WHEREAS, VA continues to order unnecessary examinations even when claimants submit adequate medical records and doctors opinions; and

WHEREAS, decades of staffing shortages and neglect within VA contributed to current backlogs and decreased timeliness; and

WHEREAS, Congress in recent years has provided increased funding for staffing at VA and improved oversight. Yet, the attrition 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, after decades of study, Congressional hearings, changes of VA leadership, altered workflow, amended work processes, sporadic IT development as well as countless pilot programs and experimental initiatives, it is clear that there are no easy, simple or quick solutions that lead to the rapid reduction of the backlog; now, therefore

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

BE IT FURTHER RESOLVED, that we urge Congress to continue to exercise its oversight capacity and provide the resources necessary to hire, train and sustain a workforce sufficient to overcome the workload and provide quality and timely service to those claiming benefits or appealing decisions from VA; and

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

IMPROVE EDUCATION BENEFITS FOR SURVIVORS

WHEREAS, the Survivors and Dependents Educational Assistance Program (DEA) 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 estimated at \$18,391 for the 2013-2014 academic year, while the DEA benefit for the same period is \$9,027; and

WHEREAS, the Veterans of Foreign Wars of the U.S. 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, 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 DEA 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.

BURIAL PLOT ALLOWANCE

WHEREAS, the United States Department of Veterans Affairs (VA) 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 nearly seven times over since 2001 and the current VA benefit is \$2,000 for a service connected death, and \$700 burial and \$700 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 service connected burial benefit, non-service connected burial benefit and the plot allowance for those veterans who do not have access to a state or national veterans cemetery should be increased to \$6,160, \$1,918, and \$1,150 respectively; and

BE IT FURTHER RESOLVED, that the service connected burial benefit, nonservice connected burial benefit and the plot allowance for those veterans who have access to a state or national veterans cemetery but chose burial in a private cemetery should be increased to \$2,793, \$854, and \$1,150 respectively; and

BE IT FURTHER RESOLVED, that Congress should provide the resources required to meet burial needs of all veterans who have served their country so honorably and faithfully.

TOXIC EXPOSURES

WHEREAS, veterans who served on the ground and inland waterways during the Vietnam War are granted presumptive service connection for conditions associated with Agent Orange exposure, yet Blue Water Navy veterans are still arbitrarily and unjustly denied such presumption; and

WHEREAS, veterans who served along the Korean demilitarized zone before and after the April 1968 to August 1971 dates of presumptive exposure to Agent Orange suffer from conditions associated with Agent Orange exposure and are often denied service connection by the Department of Veterans Affairs; and

WHEREAS, many Air Force Reserve veterans who operated repurposed C-123 aircraft that had been used to spray Agent Orange during the Vietnam War now suffer from conditions associated with Agent Orange exposure; and

WHEREAS, more than 200,000 veterans of the Persian Gulf War suffer from an array of conditions and diseases, collectively known as Gulf War illness, while the causes remain unexplained and effective treatments undetermined; and

WHEREAS, veterans of the wars in Iraq and Afghanistan were exposed to numerous environmental hazards, including open air burn pits and the anti-malaria drug mefloquine, the full effects of which are still unknown; and

WHEREAS, for decades, veterans and dependents stationed at Fort McClellan, Alabama were exposed to soil, air and drinking water contaminated by Polychlorinated Biphenyl (PCB), and now suffer from conditions associated with PCB exposure; and

WHEREAS, the effects of toxic exposures on the descendants of veterans remains largely unknown; 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 Congress ensures that the Department of Veterans Affairs extends presumptive service connection to veterans suffering from any conditions or illnesses found to be associated with exposure to toxic substances in the line of duty.

HOMELESS VETERANS 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 by 2015; and

WHEREAS, a growing number of female veterans experiencing 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 Veteran Affairs (VA) Grant and Per Diem program and the Department of Labor (DOL) Homeless Veterans Reintegration program; and

WHEREAS, programs such as VA's Supportive Services for Veteran Familes (SSVF) and the joint Housing and Urban Development and VA's Supportive Housing (HUD-VASH) program are showing signs of success in reducing homelessness; 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 genderspecific services; and

BE IT FURTHER RESOLVED, that VA 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 in determining program eligibility.

ENSURE VETERAN SUCCESS IN EDUCATION

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

WHEREAS, the Veterans of Foreign Wars of the United States helped secure robust education benefits for today's veterans through the passage of the Post-9/11 G.I. Bill, offering a free in-state public education to veterans who qualify; and

WHEREAS, VA enrolled nearly one million veterans across all G.I. Bill programs in the past academic year; and

WHEREAS, the VFW successfully worked with Congress to offer reasonable in-state tuition protections for recently transitioned service members and dependents; 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, the Military Compensation and Retirement Modernization Commission made several recommendations to streamline veterans' education programs; now, therefore

BE IT RESOLVED, that the Veterans of Foreign Wars of the United States, urge Congress to ensure proper oversight of VA's educational benefit programs by developing quality metrics with which to demonstrate student veteran success in higher education; and

BE IT FURTHER RESOLVED, that Congress ensure veterans receive equitable access to benefits like in-state tuition 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 the Veterans of Foreign Wars of the United States work to preserve quality GI Bill benefits for all current conflict veterans and future conflict veterans to ensure they continue to have access to quality education assistance programs.

VOCATIONAL REHABILITATION AND EMPLOYMENT PROGRAM ELIGIBILITY

WHEREAS, the period of eligibility for VA Vocational Rehabilitation and Employment (VR&E) 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 VA Vocational Rehabilitation 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 services for life; and

BE IT FURTHER RESOLVED, that the VA must restructure performance measures to emphasize long-term rehabilitation versus the current short-term indicators of success. Furthermore, VR&E should continually follow up with veterans considered to be rehabilitated to ensure that the rehabilitation and employment placement plans have been successful; 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.

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 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 systems, such as the Joint Veterans Service Grant (JVSG) program and other Department of Labor Veterans Employment and Training Service (VETS) 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; and

BE IT FURTHER RESOLVED, that if Department of Labor cannot ensure consistent, quality delivery of veterans' employment programs, that such programs be moved under the purview of the Department of Veterans Affairs.

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, offering the opportunity to fulfill the three-percent federal contracting mandate; and

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

WHEREAS, the verification process through which the Department of Veterans Affairs verifies veteran-owned businesses to do business with VA and other federal agencies has failed to adequately verify veteran business owners; 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 veterans small business centers and other entrepreneurship programs funded through the Small Business Administration in order to help achieve the federal government's three-percent veterans contracting goal; 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 in order to help achieve the federal government's threepercent veterans contracting goal; and

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

SUSTAINABLE NON-VA HEALTH CARE OPTIONS FOR VETERANS

WHEREAS, in Spring 2014, whistleblowers exposed rampant wrong-doing at medical facilities across the VA health care system, through which veterans were alleged to have died on secret waiting lists while waiting for VA care and resulted in the resignation of a VA secretary and his top deputies; and

WHEREAS, the Veterans of Foreign Wars of the United States worked with Congress to pass the Veterans Access, Choice, and Accountability Act of 2014, establishing the Veterans Choice Program, which offers veterans the opportunity to obtain health care through non-VA providers if VA care is not accessible; and

WHEREAS, the VFW has consistently worked with Congress and VA to improve the health care VA provides our nation's veterans through innovative programs like the Patient-Centered Community Care Program to ensure non-VA health care providers receive appropriate and prompt payment for services furnished under VA's purchased care model and ensure veterans are not adversely affected by VA's inability to make such payments; and

WHEREAS, VFW members are generally satisfied with the care they receive from VA and believe the VA health care system must be preserved, but have consistently demanded timely access to high-quality health care, whether it be at VA or through non-VA health care providers; and

WHEREAS, the veterans population is a shifting demographic with evolving health care needs, which necessitates that VA identify new and innovative ways to deliver highquality health care to the veterans it serves when it is unable to provide such care at VA medical facilities; now, therefore

BE IT RESOLVED, by the VFW, that Congress must establish standardized, sustainable and veteran-centric non-VA health care options for veterans, leveraging VA's full range of non-VA care authorities and programs to ensure veterans receive the timely, high-quality and geographically accessible health care they have earned and deserve; and

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

BE IT FUTHER RESOLVED, that VA must remain the guarantor and coordinator of care for enrolled veterans and provide them a full continuum of care; and

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