



July 2023 Officer Training Seminar

Service Officer presentation

Presentation by: Bob Plummer, Texas District 17 and VFW Post 4816 Service Officer.

VFW membership qualification: Air Force, 31st Tactical Fighter Wing, 431st Munitions Maintenance Squadron, Tuy Hoa Air Base, Vietnam. December 1966 – December 1967.

VFW recognition awards: National Aide-de-Camp 2019-2020

Department of Texas VFW Outstanding Post Service Officer 2019-2020

Post/District Service Officers responsibilities

Excerpted from the VFW National Veterans Service Policy & Procedure

Congress and the Department of Veterans Affairs (VA) regulate organizations and individuals who seek to represent veterans and other claimants before the VA. A person shall not function in any capacity as a VFW representative in a claim or other matter before the Department of Veterans Affairs until such person is officially accredited, through the VFW, by the Department of Veterans Affairs. A person will not be accredited by VA unless the VFW has certified to it that the individual meets the eligibility criteria established by VA. The Director, National Veterans Service, is VFW's certifying official.

The VFW will not certify for accreditation VFW Post, County Council and District Service Officers since they do not require accreditation in the conduct of their normal duties.

Page 14, paragraph 7 forward:

Post/District Service Officers

The primary task of a Post Service Officer (PSO) or District Service Officer is to provide information concerning Federal, State and local benefits for veterans, their families and survivors. In this capacity, Post/District Service Officers may provide applications or other forms to claimants; when requested, may help a claimant complete a form by acting as a recorder. The Post/District Service Officer:

- A. Must have access to a current edition of the VFW Guide for Post Service Officers and shall perform duties in accordance with instructions contained therein.
- B. Be under the general supervision of the Department Service Officer and shall comply with the direction of the Department Service Officer to include participating in scheduled Post/District Service Officer training facilitated by the Department Service Officer.
- C. Will not establish or solicit to establish office hours at VA facilities (not limited, but to include, Regional Benefits Offices, hospitals, Community Based Outpatient Clinics, & Vet Centers).
- D. Must not make direct contact concerning a claim or other matter, with the Department of Veterans Affairs or with any other governmental department or agency without a VA Form 21-0845 Third Party Consent from the claimant to do so. All status updates and other inquiries must be routed through the Department Service Officer. Should a Post/District Service Officer inquire on the status of a claim or other benefits on behalf of a

claimant, the Department Service Officer must only provide their response to the inquiring claimant, as disclosing information about specific claims is a violation of the law.

E. When acting as a recorder, the Post/District Service Officer is simply transcribing information provided by the claimant. At no time should the Post/District Service Officer make suggestions on how to frame information to make it appear more favorable or less harmful to the claimant. Under no circumstances will the Post/District Service Officer take possession of any form, record, or evidence furnished by a claimant for the purposes of filing benefits claims with the Department of Veterans Affairs. **Under no circumstances will the Post/District Service Officer retain any personally identifiable information (PII) concerning the claimant or the claimants' family. Any forms, records, or evidence furnished by the claimant must be immediately returned to the claimant with instructions on how to submit their benefits claim with the Department Service Officer or to the appropriate federal authority.**

F. Under no circumstances should a Post/District Service Officer counsel a claimant on their individual claim. While a Post/District Service Officer provides information concerning various government benefit programs, he/she should not offer any guidance or opinion as to the individual claim itself. General statements about the types of evidence necessary to support a claim can be described; however, a Post/District Service Officer must never discuss the nature or merits of any particular claim. They should never tell a veteran they will receive any specific percentage for a possible disability. That will be determined by the VA.

G. The Order of Business for VFW Posts prescribed in the VFW Ritual requires that the PSO submit a report at each Post business meeting. The report should summarize the activities of the PSO since the last report but should never include any personally identifiable information concerning any veteran, family member of a veteran, a survivor nor any other person living or dead.

H. The VFW Manual of Procedure requires that District Service Officers assist their Post Service Officers. This includes ensuring Post Service Officers located within their District attend District and/or Department Service Officer training.

<https://www.vfw.org/-/media/VFWSite/Files/Assistance/Service-Officer-Policy-and-Procedures.pdf>

VETERAN BENEFITS & ASSISTANCE

What makes up the U.S. Department of Veterans Affairs? It consists of; Veterans Benefits Administration (VBA), Veterans Health Administration (VHA) and National Cemetery Administration (NCA).

Let's start off looking at what the Veterans Benefits Administration (VBA) does. The Veterans Benefits Administration (VBA) provides a variety of benefits and services to servicemembers, veterans, and their families. Below are some major program offices within VBA.

Compensation Service: Oversees the delivery of disability compensation, a tax-free monetary benefit paid to Veterans with disabilities that are the result of a disease, injury, or secondary conditions incurred or aggravated during active military service. This also includes presumptive conditions acknowledged by the VA.

Pension and Fiduciary Service: Provides program oversight that helps wartime Veterans, their families, and survivors with financial challenges by providing supplemental income through Veterans Pension, Death Pension, and Dependency and Indemnity Compensation. Protects the benefits paid to the most vulnerable beneficiaries who, because of disease, injury, or infirmities of advanced age, are unable to manage their VA benefits.

Insurance Service: Maintains life insurance programs that give financial security and peace of mind for Servicemembers, Veterans and their families.

Education Service: Administers VA's education programs that provide education and training benefits to eligible Active Duty, National Guard, and Reserve Service members, Veterans, and dependents.

Loan Guaranty Service: Provides oversight of the VA Guaranteed Home Loan Program that guarantees home loans in varying amounts. Ensure Veteran's rights are protected when purchasing a home under this program. Oversees administration of specially adapted housing grants for certain severely disabled Service members and Veterans so they can adapt or acquire suitable housing.

Office of Transition and Economic Development: Partners within and outside of VA and with numerous federal agencies to advance the economic empowerment and independence of service members, Veterans and their families through increasing access to VA benefits, programs and services that support a seamless transition from military service to civilian life.

Veteran Readiness & Employment (VR&E) Service: Assists Service members and Veterans with service-connected disabilities to prepare for, obtain, and maintain suitable employment; start their own business; or receive independent-living services. Oversees their education and provides career counseling to help guide career paths and ensure the most effective use of VA benefits.

Office of Field Operations: Provides operational oversight to the district offices and 56 regional offices within the United States, Puerto Rico, and the Philippines. OFO also facilitates outreach and public contact services across the administration and ensures quality and training for VBA employees who engage with service members, veterans, and their families through client services such as the National Call Center.

Office of Administrative Review: Responsible for implementing the Veteran Appeals Improvement and Modernization Act of 2017. The Appeals Modernization Act modernizes the current claims and appeals process, includes three review options for disagreements with decisions, requires improved notification of VA decisions, provide earlier claim resolution and ensure veterans receive the earliest effective date possible.

“Service-Connected” disability claims

Now let us discuss “Service-Connected” disability claims. As the words state, “Service-Connected” means a tax-free monetary benefit paid to Veterans who are disabled by an injury, or illness, that was incurred or aggravated during active military service and is documented in the veteran’s military health files. Combat experience is not required for compensation. Note: If the veteran is VA rated 100% Permanent and total (P&T) tell them do not ever submit another VA disability claim, it could open a can of worms.

In addition, the VA assumes that certain diseases are related to qualifying military service. These are called "presumptive conditions" or “presumption of exposure”. Veterans need to be aware that some diagnosed illnesses might cause a secondary illness that they can claim as well with a diagnosis as being a secondary condition. Ask the veteran to consult with their medical provider.

The following are the presumptive illnesses and conditions granted by law.

Agent White, Blue, Purple, Pink, Green & Orange

the *Rainbow herbicides*

VA assumes that certain diseases are related to qualifying military service. These are called "presumptive diseases." VA has recognized certain cancers and other health problems as presumptive diseases related to exposure to Agent Orange or other

herbicides during military service in Vietnam and the Korean DMZ and new locations added PACT Act Aug 2022.

Between January 9, 1962, and May 7, 1975, veterans must have served for any length of time in at least one of these locations:

In the Republic of Vietnam.

Aboard a U.S. military vessel that operated in the inland waterways of Vietnam, or on a vessel operating not more than 12 nautical miles seaward from the demarcation line of the waters of Vietnam and Cambodia. Public Law 116-23 (Blue Water Navy Vietnam Veterans Act of 2019)

Any U.S. or Royal Thai military base in Thailand from January 9, 1962, through June 30, 1976. PACT Act 2022

Laos from December 1, 1965, through September 30, 1969. PACT Act 2022

Cambodia at Mimot or Krek, Kampong Cham Province from April 16, 1969, through April 30, 1969.

Guam or American Samoa or in the territorial waters off Guam or American Samoa from January 9, 1962, through July 31, 1980. PACT Act 2022

Johnston Atoll or on a ship that called at Johnston Atoll from January 1, 1972, through September 30, 1977. PACT Act 2022

You served in or near the Korean DMZ for any length of time between September 1, 1967, and August 31, 1971.

Served on active duty in a regular Air Force unit location where a C-123 aircraft with traces of Agent Orange was assigned and had repeated contact with this aircraft due to your flight, ground, or medical duties.

You were involved in transporting, testing, storing, or other uses of Agent Orange during your military service.

You were assigned as a Reservist to certain flight, ground, or medical crew duties at one of the locations listed here:

Eligible Reserve locations, time periods, and units include: PACT Act 2022

Lockbourne/Rickenbacker Air Force Base in Ohio, 1969 to 1986 (906th and 907th Tactical Air Groups or 355th and 356th Tactical Airlift Squadrons)

Westover Air Force Base in Massachusetts, 1972 to 1982 (731st Tactical Air Squadron and 74th Aeromedical Evacuation Squadron, or 901st Organizational Maintenance Squadron)
PACT Act 2022

Pittsburgh International Airport in Pennsylvania, 1972 to 1982 (758th Airlift Squadron)
PACT Act 2022

Birth defects linked to Agent Orange:

Spina bifida is a spinal cord birth defect. A baby develops spina bifida while still in the womb. In some cases, a parent's past contact with specific chemicals causes this birth defect. If you served in Vietnam or Thailand, or in or near the Korean Demilitarized Zone (DMZ)—and your child has spina bifida or certain other birth defects—your child may be able to get disability benefits.

VA has recognized certain cancers and other health problems as presumptive diseases related to exposure to Agent Orange or other herbicides during military service.

AL amyloidosis: A rare illness that happens when an abnormal protein (called amyloid) enters the body's tissues or organs. These include the organs like the heart, kidneys, or liver.

Bladder cancer: A type of cancer that affects the bladder where urine is stored before it leaves the body. The most common type of bladder cancer starts in the cells that line the inside of the bladder. This is called urothelial or transitional cell carcinoma. Added 2021

Chloracne (or other types of acneiform disease like it): A skin condition that happens soon after exposure to chemicals. It looks like a common form of acne often seen in teenagers. Under our rating regulations, this condition must be at least 10% disabling within 1 year of herbicide exposure.

Chronic B-cell leukemia: A type of cancer that affects white blood cells. These are cells in the body's immune system that help to fight off illnesses and infections.

Diabetes mellitus type 2: An illness that happens when the body can't respond to the hormone insulin the way it should. This leads to high blood sugar levels.

High blood pressure (also called hypertension) PACT Act 2022

Hodgkin's disease: A type of malignant lymphoma (cancer) that causes the lymph nodes, liver, and spleen to grow progressively larger. It also causes red blood cells to decrease more and more over time (called anemia).

Hypothyroidism: A condition that causes the thyroid gland to not produce enough of certain important hormones. Hypothyroidism can cause health problems like obesity, joint pain, infertility, and heart disease. Added 2021.

Ischemic heart disease: A type of heart disease that happens when the heart doesn't get enough blood. This leads to chest pain.

Monoclonal gammopathy of undetermined significance (MGUS) Aug 2022 PACT Act

Multiple myeloma: A type of cancer that affects the plasma cells. These are a type of white blood cells made in the bone marrow that help to fight infection.

Non-Hodgkin's lymphoma: A group of cancers that affect the lymph glands and other lymphatic tissue. These are parts of the immune system that help to fight infection and illness.

Parkinson's disease: A progressive disorder of the nervous system that affects muscle movement—and often worsens over time. The nervous system is the network of nerves and fibers that send messages between the brain and spinal cord and other areas of the body.

Parkinsonism: Any condition that causes a combination of abnormal movements. These include slow movements, trouble speaking, stiff muscles, or tremors. Tremors are rhythmic shaking movements in a part of the body caused by muscle contractions that you can't control. Added 2021

Peripheral neuropathy, early onset: An illness of the nervous system that causes numbness, tingling, and motor (or muscle) weakness. Under our rating regulations, this condition must be at least 10% disabling within 1 year of herbicide exposure. It might also be secondary to Diabetes mellitus type 2

Porphyria cutanea tarda: A rare illness that can make the liver stop working the way it should. It can also cause the skin to thin and blister when exposed to the sun. Under our rating regulations, this condition must be at least 10% disabling within 1 year of herbicide exposure.

Prostate cancer: Cancer of the prostate and one of the most common cancers among men

Respiratory cancers (including lung cancer): Cancers of the organs involved in breathing. These include cancers of the lungs, larynx, trachea, and bronchus.

Some soft tissue sarcomas: A group of different types of cancers in body tissues such as muscle, fat, blood and lymph vessels, and connective tissues. We don't include osteosarcoma, chondrosarcoma, Kaposi's sarcoma, or mesothelioma on our list of presumptive diseases.

Radiation presumptive locations

Cleanup of Enewetak Atoll, from January 1, 1977, through December 31, 1980

Cleanup of the Air Force B-52 bomber carrying nuclear weapons off the coast of Palomares, Spain, from January 17, 1966, through March 31, 1967

Response to the fire onboard an Air Force B-52 bomber carrying nuclear weapons near Thule Air Force Base in Greenland from January 21, 1968, to September 25, 1968

If you took part in any of these efforts, we'll automatically assume (or "presume") that you had exposure to radiation.

The PACT Act, (Sergeant First Class Heath Robinson Honoring Our PACT Act) is a new law that expands VA health care and benefits for Veterans exposed to burn pits and other toxic substances. This law helps us provide generations of Veterans—and their survivors—with the care and benefits they've earned and deserve.

PACT Act Gulf War era and post-9/11 Veteran eligibility Law August 2022

Burn pit and other toxic exposure conditions are now presumptive.

https://www.va.gov/resources/the-pact-act-and-your-va-benefits/?utm_source=bing&utm_medium=paid_search&utm_campaign=ar_pact_fy23_veterans

If you served in any of these locations and time periods, we've determined that you had exposure to burn pits or other toxins. We call this having a presumption of exposure.

On or after September 11, 2001, in any of these locations:

Afghanistan, Djibouti, Egypt, Jordan, Lebanon, Syria, Uzbekistan, Yemen,
The airspace above any of these locations

On or after August 2, 1990, in any of these locations:

Bahrain, Iraq, Kuwait, Oman, Qatar, Saudi Arabia, Somalia, The United Arab Emirates (UAE)

The airspace above any of these locations

These cancers are now presumptive:

Brain cancer

Gastrointestinal cancer of any type

Glioblastoma

Head cancer of any type

Kidney cancer

Lymphatic cancer of any type

Lymphoma of any type

Melanoma

Neck cancer

Pancreatic cancer

Reproductive cancer of any type

Respiratory (breathing-related) cancer of any type:

These illnesses are now presumptive:

Asthma that was diagnosed after service

Chronic bronchitis

Chronic obstructive pulmonary disease (COPD)

Chronic rhinitis

Chronic sinusitis

Constrictive bronchiolitis or obliterative bronchiolitis

Emphysema

Granulomatous disease

Interstitial lung disease (ILD)

Pleuritis

Pulmonary fibrosis

Sarcoidosis

Camp Lejeune water contamination health issues

If you served at either of these locations between August 1, 1953, and December 31, 1987, you may be eligible for disability and health care benefits:

Marine Corps Base Camp Lejeune, or Marine Corps Air Station (MCAS) New River, North Carolina

You may be eligible for disability compensation payments on a presumptive basis if you meet all of these requirements. These requirements apply to Veterans, Reservists, and National Guard members.

Served at Camp Lejeune or MCAS New River, North Carolina, for at least 30 days total between August 1, 1953, and December 31, 1987, and didn't receive a dishonorable discharge when separated from the military.

Must have a diagnosis of 1 or more of these presumptive conditions.

Adult leukemia

Aplastic anemia and other myelodysplastic syndromes

Bladder cancer

Kidney cancer

Liver cancer

Multiple myeloma

Non-Hodgkin's lymphoma

Parkinson's disease

If you meet the service requirements for Camp Lejeune, you may be eligible to enroll in VA health care. If you have any of the 15 covered health conditions listed here, you won't have to pay a copay for care for that condition.

Bladder cancer

Breast cancer

Esophageal cancer

Female infertility

Hepatic steatosis

Kidney cancer

Leukemia

Lung cancer

Miscarriage

Multiple myeloma

Myelodysplastic syndromes

Neurobehavioral effects

Non-Hodgkin's lymphoma

Renal toxicity

Scleroderma

Benefits for former prisoners of war (POWs)

You may be eligible for disability benefits if you have a current illness or injury (known as a condition) that affects your body or mind and you meet both of these requirements.

Both of these must be true:

We believe your time spent as a POW caused your condition, and
At any time following active-duty service, your condition became at least 10% disabling.
We use a disability rating system to measure the severity of your disability.

What conditions do these benefits cover?

These benefits cover conditions that we believe were caused by time spent as a POW (called presumptive disabilities). We've decided to cover these conditions because of studies that have been done on the long-term effects of captivity, deprivation, trauma, and cold injury.

For former POWs held captive for any length of time

Conditions that affect your body, including:

Osteoporosis (if you filed your claim on or after October 10, 2008, and you have a diagnosis of posttraumatic stress disorder, or PTSD)

Lasting damage from frostbite

Posttraumatic osteoarthritis (pain and swelling in your joints that happens when a past injury causes a joint—such as your knee or elbow—to wear out)

A stroke or problems caused by a stroke (such as memory loss, loss of speech, or weakness in an arm or leg)

Hypertensive vascular disease, including hypertensive heart disease, and related problems (such as a stroke, blood clots, or other serious issues)

Conditions that affect your mind, including:

A neuropsychiatric condition

Psychosis

Dysthymic disorder (also called “persistent depressive disorder”)

Any of the anxiety states (such as PTSD)

For former POWs held captive for 30 days or more

Conditions that affect your body, including:

Osteoporosis (if you filed your claim on or after September 28, 2009; no PTSD diagnosis required)

Helminthiasis

Peripheral neuropathy, except where directly related to an illness caused by an infection

Peptic ulcer disease

Chronic dysentery

Irritable bowel syndrome

Cirrhosis of the liver

Any nutritional deficiency, including:

Avitaminosis

Beriberi, including beriberi heart disease

Malnutrition, including optic atrophy connected to malnutrition

Pellagra

Note: Some of these diseases/illnesses listed can leave a lot to be understood. It is suggested to go to the internet and put in a reputable medical facility website and search the word to see what the definition is. Also look for secondary conditions.

The VA insists that any disability claim item must be diagnosed either by the VA doctors or private doctors. Veterans cannot file a claim for something they have not been diagnosed with. In addition, if a veteran had an illness or some other service-related issue and they are not continuing to have treatment for that condition, then the VA might assume that the veteran no longer has that condition. Veterans must show continuity of treatment.

The VA makes it extremely easy for veterans to file their disability claim online at the <https://www.va.gov/> website. It is highly discouraged that veterans use that online method. It is suggested they need another set of eyes and guidance on how to support a disability claim prior to submission to the VA. This should lessen the possibility of a VA denial letter because the veteran did not know how to complete the forms or provide support material.

You will see references to “VSO”, that means Veteran Service Organization. Some VSOs train individuals to meet federal regulatory requirements to become accredited representatives who can represent claimants before the Department of Veterans Affairs. As noted above, **The VFW will not certify for accreditation VFW Post, County Council and District Service Officers since they do not require accreditation in the conduct of their normal duties.**

The VA has a program called “intent to file.” What that means is the veteran can call the VA automated National Call Center at 800-827-1000. After a series of announcements, it will give suggestions why a veteran is calling, at the end of the suggestions it will say, “if you wish to speak to a representative, press zero.” That will connect the veteran with a human.

Ask the veteran to tell the VA agent that they want the agent to file an intent to file with the VA for the veteran. They will get the veteran’s information and submit the notice. In a few weeks, the veteran should receive a letter confirming the intent to file and give the date the claim must be submitted to and in the VA’s system.

As an option, the veteran may file their intent to file on the VA’s website:

<https://www.va.gov/resources/your-intent-to-file-a-va-claim/>

The advantage of the intent to file is that after the claim has been reviewed and a decision has been made in favor of the veteran receiving a service-connected disability percentage, the VA will pay the veteran back to the time that intent to file was posted with the VA. Many times, that program benefits the veterans to receive the necessary treatment records to support their claim(s) by having a year to complete the claim. In addition, it will benefit the veteran by allowing time to order their military personnel and health files from the National Records Center in St. Louis, MO. This can be done online by following this link: <https://vetrecs.archives.gov/VeteranRequest/home.html>

The veteran should not attempt to do this or any VA form on a cell phone, it is best to use a computer so the full website pages can be viewed easily. At some point in the process, the National Records Center form will ask what the veteran is requesting. It is suggested to state “**All military personnel and health files including discharge certificate/DD-214s**”. That way they should get their complete military file.

Many veterans have reported that after they made their records request they received a letter stating their files were destroyed by a fire in the National Records Center. The National Records Center states: “On July 12, 1973, a disastrous fire at the National Personnel Records Center (NPRC) destroyed approximately 16-18 million Official Military Personnel Files (OMPF). The records affected: Personnel and Period Affected Estimated Loss Army Personnel discharged November 1, 1912 to January 1, 1960 80%. Air Force Personnel discharged September 25, 1947 to January 1, 1964. (with names alphabetically after Hubbard, James E.)” If the veteran does not meet that fire criteria, then their files should be available.

Veteran representation with the Veterans Benefits Administration

It is suggested that any veteran/surviving spouse who plans on filing a service-connected disability claim or DIC do not file it by themselves. It is best to obtain the assistance of an

accredited claims benefit advisor. If the veteran may have made a mistake formulating their claim, the accredited claims benefit advisor should catch it and correct it prior to submission. Once a disability claim has been submitted without a claims benefit advisor having assisted the veteran, whatever the veteran did right or did wrong is pretty well carved in stone.

It is the responsibility of the VFW Post/District service officer when asked to assist a veteran guide them through the process and double check their work prior to the veteran/spouse going to an accredited claims benefit advisor to file their claim. An extra set of eyes is very beneficial.

In addition to several Veteran Service Organizations & County Service Offices, we are fortunate to have two Veterans of Foreign Wars accredited State Service Officers. One in Houston and one in Waco. Texas Veterans Commission is contracted with the VFW for veteran claims assistance and representation. Their contact information is:

The Veterans of Foreign Wars
VA Houston Regional Office
6900 Almeda Rd
Houston, TX 77030-4200

Mr. Mike Eshenbaugh is Texas VFW State Service Officer out of the Houston VA Regional Office.

His contact info is: Email terry.eshenbaugh@tvc.texas.gov

Phone: 713-383-2750

To book a face-to-face appointment with Mike, click this link:

<https://a.flexbooker.com/widget/246f1c0a-8310-433a-8d24-fde73bd74ed6#chooseLocation>

Select:  (SED) Houston VA Regional Office (HRO) - (In-Person ONLY)

6900 Almeda Road, Houston, Texas, 77030

Next select (SED) Office – VFW 45 minutes

This is an in-person appointment for VFW assistance.

Then it will take you to Mike's calendar with the day of the week and date. Where you don't see any times listed, click on next week or look for the times available below the date block. Click on a time that works for you. Complete the form and click book appointment. You will receive confirmation.

Take a copy of your DD-214(s) and support documents for your claim.

Take your VFW membership card.

The Veterans of Foreign Wars
VA Waco Regional Office
701 Clay Avenue
Waco, Texas 76799-0001

Ms. Katina Cryer is the Texas VFW State Service Officer out of the Waco VA Regional Office.

Her contact info is: Email katina.cryer@va.gov

Phone: 254-299-9959

To book a face-to-face appointment with Katina, click this link:

<https://a.flexbooker.com/widget/f268fe64-c503-44d5-8bd7-e71d6d27cce5#chooseLocation>

Select:  (NWD) Waco VA Regional Office (WRO) (In Person ONLY)

One Veterans Plaza, 701 Clay Avenue, Waco, Texas, 76799

Next select (NWD) Office – VFW 45 minutes

This is an in-person appointment for VFW assistance.

Then it will take you to Katina’s calendar with the day of the week and date. Where you don’t see any times listed, click on next week or look for the times available below the date block.

Click on a time that works for you. Complete the form and click book appointment. You will receive confirmation.

Take a copy of your DD-214(s) and support documents for your claim.

Take your VFW membership card.

It is suggested if it would be difficult to travel to the respective VA Regional Office, ask the veteran to please book a phone appointment with Mike or Katina.

Veterans will be required to give their permission for any VSO to represent them in all matters VA. Veterans can only have one VSO named as their representative at a time. If the veteran wishes to change VSO, the new VSO of choice will make that change for them.

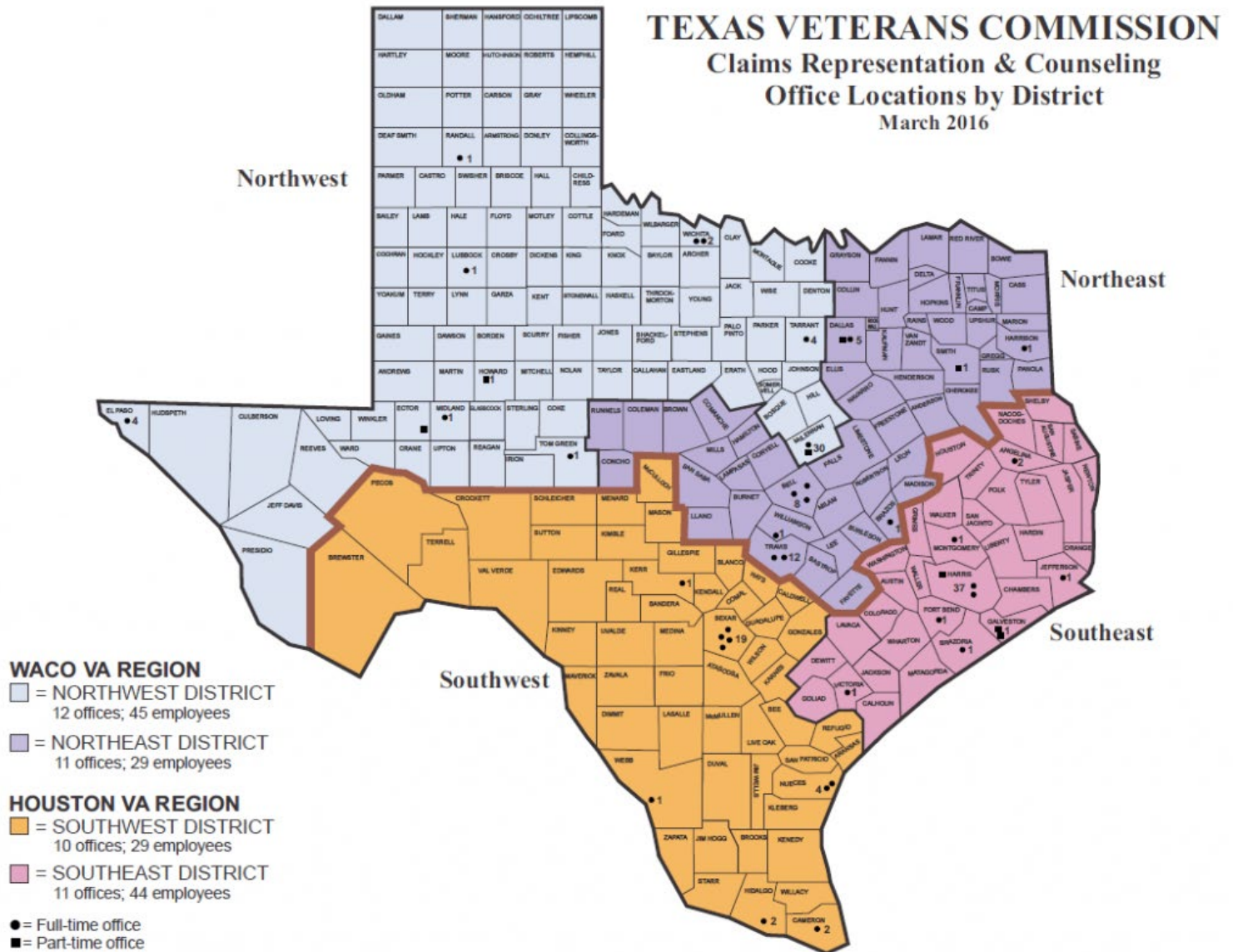
If a veteran already has the Veterans of Foreign Wars as their representative for the VA and they can’t meet with the VFW State Service Officer, they can go to a Texas Veterans Commission office or their County Veteran Service Office for assistance and the veteran will still retain the VFW as their representative. Have them to be sure to ask the VSO not to change the VA form 21-22 from the VFW to any VSO.

We are fortunate to have the State of Texas agency, Texas Veterans Commission (TVC) to direct veterans for claim filing assistance. A veteran can go to the TVC website and find

the closest Claims Benefit Office. The link is:
<https://www.tvc.texas.gov/claims/appointments/> and click on claims.

TVC Claims Benefit Advisors are in most VA outpatient clinics, VA hospitals and military installations.

See the map for the Texas Veterans Commission office locations. Unfortunately, it is hard to read the map but gives an idea based on the colors of the offices below left of the map.



Suggestions to formulate a VA Service-Connected disability claim plan.

I am not a lawyer or medical professional, I offer these suggestions based on VFW OTS seminars and direction from the current and past two VFW State Service Officers in the Houston VA Regional Office, Mike Eshenbaugh, Rick Pallanez and Julio Harros. In addition, guidance from Texas Veterans Commission, Conroe VA outpatient clinic, claims benefit advisor Ms. Tracy Jordan.

I do not suggest I know everything. Things I don't know, I do know where to get guidance. It is a constant learning process. <https://www.va.gov/> can be very helpful.

Navigating the VBA is complex and can be frustrating to say the least. VBA is always changing. The VBA does not make VA laws, the laws are made by Congress. The VBA is charged with developing implementation of the laws imposed upon them. The VBA follows 38 Congressional Federal Register, Schedule for Rating Disabilities among other topics. It is a massive system.

Suggestions to offer a veteran who wants to file a VA service-connected disability claim should include the following.

The first suggestion is to order their military personnel and health files if they don't have them. As noted above this is the online link to the National Records Center: <https://vetrecs.archives.gov/VeteranRequest/home.html> It will most probably take several months to receive them.

Suggest the veteran make a fresh folder and label it VA. Suggest they put everything military and VA in that one place. Hopefully they will do it so they don't stumble around trying to locate their documents.

If they have any military awards like CIB, combat action ribbon, Commendation medal, Purple Heart or higher award(s), make a copy of the award certificates. Suggest they never submit or give anybody their original and only copy of anything. They might never get it back. Having the copies of the certificates might assist in proving where they were stationed and what their military job was. They should have either the certificate or at least orders for the award. Suggest they compare it to their DD-214. Those certificates or orders for them and DD-214 should be submitted along with the veteran's claim.

Ask them to make a written list of potential items they plan on filing a claim for. Suggest that they speak to their spouse, the spouse might know of things the veteran has forgotten. They might have illnesses related to service and might have been treated in the military. If so, hopefully their military health records will document that. They might have to wait on receipt of military records if they don't have them.

Regardless of the veteran's issues were documented in the service or are presumptive conditions that they have been receiving treatment for, it would be a good idea that the veteran speak to their primary care physician about the veteran's desire to file a VA disability claim. They could take the presumptive conditions list that covers their service period and location to show their doctor.

Have the veteran get their medical records documenting the issues and records of treatment for it. That could be VA or private doctor records. Typically, law only requires a medical provider to maintain active records for 7 years after the patient stops going to that provider. With the technology available, some medical providers keep records of patients in an electronic file and may not purge them. It is worth asking their doctor's front office staff if they haven't been seen at their office in several years.

Private Medical Evidence

The Department of Veterans Affairs encourages all Veterans to submit their private medical records for consideration during the processing of their benefits claim. VA values evidence from their private treatment providers because they are familiar with the veteran's medical history, often over a long period of time. VA appreciates the trusted and special relationship between private treatment providers and their Veteran/patients.

The VA has forms that a non-VA doctor can complete to document a veteran's condition and diagnosis. The forms are called Disability Benefit Questionnaire (DBQ).

The VA states "All clinician information blocks at the bottom of the forms must be completed. Also, the clinician filling out the form must sign and date it. We reserve the right to confirm the authenticity of ALL DBQs. Information is subject to verification through computer matching programs with other agencies or any other means deemed appropriate." The DBQs offered are listed. The blue hyperlink will give the form.

Cardiovascular

- [Artery and Vein Conditions](#)
- [Heart Conditions](#)
- [Hypertension](#)

Dental & Oral

- [Oral and Dental](#)

Dermatological

- [Scars](#)
- [Skin Diseases](#)

Endocrinological

- [Diabetes Mellitus](#)
- [Endocrine \(Other than Thyroid, Parathyroid or Diabetes Mellitus\)](#)
- [Thyroid and Parathyroid](#)

Eye, Nose, Throat

- [Ear \(including Vestibular and Infectious\)](#)
- [Loss of Sense of Smell and or Taste](#)
- [Sinusitis, Rhinitis and Other Conditions of the Nose, Throat, Larynx and Pharynx](#)

Gastrointestinal

- [Esophageal Disorders](#)
- [Gallbladder & Pancreas](#)
- [Hernias \(Including Abdominal, Inguinal and Femoral Hernias\)](#)
- [Intestinal \(Infectious\)](#)
- [Intestinal \(other than surgical or infectious\)](#)
- [Intestinal \(surgical\)](#)
- [Liver Conditions](#)
- [Peritoneal Adhesions](#)
- [Rectum & Anus](#)
- [Stomach and Duodenum](#)

Genitourinary

- [Kidney Conditions](#)
- [Male Reproductive Organ Conditions \(Including Prostate Cancer\)](#)
- [Urinary Tract Conditions](#)

Gynecological

- [Breast](#)
- [Gynecological Conditions](#)

Hematologic & Lymphatic

- [Hematologic and Lymphatic Conditions, Including Leukemia](#)

Infectious Diseases

- [HIV-Related Illnesses](#)

- [Infectious Diseases \(other than HIV-related illness chronic fatigue syndrome and tuberculosis\)](#)
- [Persian Gulf/ Afghanistan Infectious Diseases](#)
- [Tuberculosis](#)

Musculoskeletal

- [Amputations](#)
- [Ankle](#)
- [Back \(Thoracolumbar Spine\)](#)
- [Bones and Other Skeletal Conditions](#)
- [Elbow & Forearm](#)
- [Foot Conditions Including Flatfoot \(Pes Planus\)](#)
- [Hand and Finger](#)
- [Hip and Thigh](#)
- [Knee and Lower Leg](#)
- [Muscle Injuries](#)
- [Neck \(Cervical Spine\)](#)
- [Osteomyelitis](#)
- [Shoulder and/or Arm](#)
- [Temporomandibular Disorders](#)
- [Wrist](#)

Neurological

- [ALS \(Lou Gehrig's Disease\)](#)
- [Central Nervous System and Neuromuscular Diseases](#)
- [Cranial Nerve Conditions](#)
- [Diabetic Peripheral Neuropathy](#)
- [Fibromyalgia](#)
- [Headaches \(including Migraines\)](#)
- [Multiple Sclerosis \(MS\)](#)
- [Narcolepsy](#)
- [Parkinson's Disease](#)
- [Peripheral Nerves](#)
- [Seizure Disorders \(Epilepsy\)](#)

Nutrition

- [Nutritional Deficiencies](#)

Ophthalmological

- [Eye Conditions](#)

Psychological

- [Eating Disorders](#)
- [Mental Disorders](#)
- [PTSD Review](#)

Respiratory

- [Respiratory Conditions \(other than tuberculosis and sleep apnea\)](#)
- [Sleep Apnea](#)

Rheumatological

- [Arthritis](#)
- [Chronic Fatigue Syndrome](#)
- [Systemic Lupus Erythematosus \(SLE\) and other Autoimmune Diseases](#)

Spina Bifida (natural child of a Veteran exposed to herbicides)

- [Spina Bifida](#)

Ask the veteran to request when the medical provider has completed the DBA to let the veteran know it is ready and ask the veteran to let the medical provider know they will stop by and pick it up vs where some forms might say send to the VA.

If the veteran is in the VA healthcare system and is registered with VA online program



or <https://www.va.gov/> they can download their VA healthcare records using the Blue Button Medical Reports feature. That is just one of the features of the online program. Other features are: veterans can order refills on medications, see appointments, communicate via VA's secure messaging (their email program) with their primary care doctor and departments.

When they do get their records, military files, private doctors/clinics/hospitals etc.; have them put them in chronological order by provider. Have them go through them page by page looking for notes about the issue they will be claiming. Once they find them, have them put those papers aside. When finished, have them make copies and put the original papers back in the group for safe keeping. Then go through the copies and attempt to eliminate anything that is not relative to the issue(s) they will be claiming.

Providing the VA with too much unrelated or duplicate information puts a tremendous, wasted workload on the VA rating specialists. If someone submits a packet of papers 1 inch thick, there is no way a VA rating person will have time to read them. Keep it simple and prove the disability condition.

The veteran can include a personal statement on their claim items. Those are very beneficial when supporting claims for example, tinnitus, hearing loss, MST, and PTSD. Although they might be service-connected claim items it does not mean they are recorded in the veteran's military records. When writing any statement, veterans should follow the basic journalism process of listing the "Five Ws", "Who, What, When, Where Why" and then How.

In addition, in their statement they should list it all chronologically. Also, do not use any military acronyms or abbreviations. Spell it all out so a 15-year-old would be able to understand what is written. It is suggested after the veteran has written their first pass on the statement, let it sit a day or two then read it over and add or remove comments as seen fit.

The VA likes to see what they call a Nexus letter. A "nexus" is a link or connection between two or more things. Thus the purpose of a Nexus Letter is to clearly connect a veteran's current medical condition to another service-connected condition or to circumstances directly related to military service. Nexus Letters are letters from a veteran's current physician(s) stating their medical opinion regarding the service-connection of a veteran's condition(s).

Nexus Letters are essential for any condition on a VA Disability Claim that is not automatically considered service-connected. Conditions are automatically considered service-connected if:

- A) There is ample evidence that it occurred during the veteran's service or
- B) It is on the VA Presumptive List and the veteran meets the qualifications for the list.

Unfortunately, most VA medical professionals are reluctant to write a Nexus letter for a veteran who is under their care. Some say it is a conflict of interest. Some non-VA medical professionals become paranoid when they hear Veterans Administration disability claim.

Fortunately, a medical examiner contracted by the VA to evaluate a veteran related to their claim might in so many words create a Nexus letter in their report. If the veteran offers military records of treatment in the service and continuity of treatment and general treatment letter from their doctor after the service, the medical evaluator should take those facts into consideration. In their report to the VA they will generate their medical opinion. Hopefully the doctor will write "at least a 50 percent or more likelihood, that the veteran's condition was caused or aggravated by their military service."

What we hope we do not see in a VA decision letter after an evaluation is: “it is less likely than not that the veteran’s condition is due to...”, which means that it is 50 percent or less likely that the veteran’s condition is due to their service. That means the VA will deny the claim.

For filing a claim for tinnitus and hearing loss, those are two different claim items that should be listed on the VA claim form separately. MST (military sexual trauma) and PTSD (posttraumatic stress disorder) have different claim form numbers. The VA claim form numbers are listed at the end of this document for reference of the most popular form numbers.

Claims for tinnitus and hearing loss are two items that are considered a hazardous noise Military Occupational Specialty. Even if the veteran’s MOS fits that hazardous noise type job, the veteran still needs to write up their statement explaining how and when they were exposed to the hazardous noise and how it impacted them then and over the years later. If they get their military health records, they may have been given a discharge physical or had audiology tests during their service and hopefully they listed the tinnitus and hearing decline. In addition, the veteran might see something in their medical records they were treated for and still have that illness or condition and still are receiving treatment for today.

Speaking of MST and PTSD. If a veteran submits a claim for MST or PTSD without having a diagnosis, it could most probably be denied. The successful way to handle an MST or PTSD claims is to suggest the veteran contact the VA outpatient clinic or VA hospital closest to them. If they are in the VA healthcare system or even if they are not, have them start by calling the facility they use or closest facility to them and request an appointment with the mental health department. Typically, their first contact in the mental health department will be with a licensed social worker. The social worker will interview the veteran and hopefully give them an appointment to be assisted by a mental health professional. The professional will outline a plan of treatment and possible medication. Without getting too deep into the treatment, hopefully the veteran will find help. After a few months of working with the mental health professional, the mental health professional might tell the veteran that their opinion is the veteran does have MST, PTSD or anxiety. At that point the veteran might consider filing their claim. This is another example of when the intent to file is an advantage.

If the veteran is or has been diagnosed and treated by a non-VA mental health professional that is sufficient to be considered just as it would be using a VA mental health professional. Once all the above tasks are completed, the service officer should sit and review the veteran’s claim material with them. When that is accomplished, the veteran should be ready to book their appointment with a claims benefit advisor and file their claims. Yes, it is a lot of work but the benefits are well worth achieving. Like the old saying, “how do you eat an elephant”? Answer is “one bite at a time”.

Caution, your conversations or communication with the veteran you are assisting must remain completely confidential. Never talk about a veteran and their issues to anybody.

One thing many people don't understand is that the veteran does not have to be a VFW member for a service officer to assist them. We can assist any veteran or surviving spouse anywhere.

A suggestion is to always wear a hat/ball cap reflecting your military status when out and about. When spotted, that normally starts a conversation with us. Or be on the lookout for another veteran with a military hat on. I always ask what branch of service they were in, where and when did they serve and what was their MOS. Depending on the era of their service, I quiz them if they might be receiving any VA disability compensation. I tell them about presumptive conditions of the era they served in. I offer them my VFW business card to contact me if they wish to set up a time to meet up and have more time to talk. Funny thing is I've had veterans call me a few years since I first met them. They ask me if I remember that we met at XXX place. While we speak, I look them up in my contacts and see my previous notes. I pick them up from there to assist them.

What I do is enter the veteran in my contacts, date and where we met, some minor notes on our first visit. Notes will expand as there is more activity with them. I do not make any notes of a confidential nature. After I meet with a vet and have their contact info, I never hound them, I put the plate of food in front of them, it is up to them to eat. If they show resistance, I suggest doing it for their family's sake.

After the veteran has submitted their claim(s), the process becomes very slow. With the volume of disability claims being submitted and those already in the system, the VA already short staffed, it might be several months until something happens.

Although a veteran might have provided medical support for a condition or illness, after filing the claim they will be contacted by one of the VA contracted evaluation companies.

Typically, the medical evaluation company will call the veteran and discuss a possible date for the veteran to go to their facility for an evaluation. Then the veteran will receive an express envelope at their mailing address. It will confirm the appointment and will include a directional map to the facility. If for any reason an emergency comes up and the veteran is unable to attend the appointment, have them call the evaluation facility and advise them and request a reschedule. Get the person's name and note the date and time the call was placed.

If a veteran misses their appointment the VA will consider them a **no-show** and will normally deny the claim.

The VA paper in this link describes the VA claim exam process:

<https://benefits.va.gov/COMPENSATION/docs/claimexam-faq.pdf>

After the medical evaluation is completed, the attending physician will have to submit their report to the VA within a week. Then the claim goes in the stack for review and decision.

The status of a veteran's claim can be seen on the <https://www.va.gov/> website. If the veteran has not registered for access to the site, they should.

Sign in to see your claim or appeal status.

Sign in with your existing **Login.gov**, **ID.me**, **DS Logon**, or **My HealtheVet** account. If you don't have any of these accounts, you can create a free **Login.gov** or **ID.me** account now.

<https://www.va.gov/claim-or-appeal-status/#:~:text=Sign%20in%20or%20create%20an%20account>

A word of caution on VA forms. If a veteran is looking for a VA form, instruct them to only use the VA's link to forms: <https://www.va.gov/find-forms/>

There are several sites who might produce a form when a search is performed. The veteran might use it and complete the form. Then they click on print. Then the site pops up a message like "to print this form send us XX Dollars". The VA does not charge for forms! In addition, the VA form site will offer the most current form date (bottom left of the form). If a form is not the latest version when submitted to the VA, it will cause the form to be rejected. Theoretically the veteran could lose months by the time a correct form is resubmitted and the VA puts eyes on it. Most VA forms are fillable online. That way nobody should struggle with trying to read someone's poor penmanship.

And once again, suggest the veteran use a computer to work on the forms vs a cell phone.

Ask the veteran to print the instructions and the forms that they will use and read them over so they know what information they need to list on the form. They can pencil it in on what they printed then complete the form online and print it.

When the veteran feels they are ready to submit their claim, it would be very beneficial if the service officer who is working with them reviewed everything prior to filing the claim.

Some veterans say they don't know how nor have had exposure to computers in their working career. I suggest they ask a relative to assist them.

After the VA has arrived at a decision, they will send the veteran the decision packet in snail mail. It will fully explain their decision, either in favor of or deny the claim. Many veterans do not understand when they see a 0% (zero) disability granted for a claim item, it means that the VA has granted service-connection, but the results of evaluation are not

sufficient to grant at least 10% disability. If the condition is worsening and it is documented with medical reports, the veteran may consider filing for an increase on that or those items.

Another issue we see is as an example, the veteran received a few disabilities and add them up and find that they think the VA is wrong. The VA has what they call combined rating chart. Every claim packet will refer to it. This is what it looks like. Work a couple examples to see how it functions, even if we don't agree with it.

**Table I-Combined Ratings Table
[10 combined with 10 is 19]**

Examples of Combining Two Disabilities

If a Veteran has a 50 percent disability and a 30 percent disability, the combined value will be found to be 65 percent, but the 65 percent must be converted to 70 percent to represent the final degree of disability.

Similarly, with a disability of 40 percent, and another disability of 20 percent, the combined value is found to be 52 percent, but the 52 percent must be converted to the nearest degree divisible by 10, which is 50 percent.

Example of Combining Three Disabilities

If there are three disabilities ratable at 60 percent, 40 percent, and 20 percent, respectively, the combined value for the first two will be found opposite 60 and under 40 and is 76 percent. This 76 will be found in the left column, then the 20 rating in the top row. The intersection of these two ratings is 81. Thus, the final rating will be rounded to 80%

Current amount below	10%	20%	30%	40%	50%	60%	70%	80%	90%
19	27	35	43	51	60	68	76	84	92
20	28	36	44	52	60	68	76	84	92
21	29	37	45	53	61	68	76	84	92
22	30	38	45	53	61	69	77	84	92
23	31	38	46	54	62	69	77	85	92
24	32	39	47	54	62	70	77	85	92
25	33	40	48	55	63	70	78	85	93
26	33	41	48	56	63	70	78	85	93
27	34	42	49	56	64	71	78	85	93
28	35	42	50	57	64	71	78	86	93
29	36	43	50	57	65	72	79	86	93
30	37	44	51	58	65	72	79	86	93
31	38	45	52	59	66	72	79	86	93

Current amount below	10%	20%	30%	40%	50%	60%	70%	80%	90%
32	39	46	52	59	66	73	80	86	93
33	40	46	53	60	67	73	80	87	93
34	41	47	54	60	67	74	80	87	93
35	42	48	55	61	68	74	81	87	94
36	42	49	55	62	68	74	81	87	94
37	43	50	56	62	69	75	81	87	94
38	44	50	57	63	69	75	81	88	94
39	45	51	57	63	70	76	82	88	94
40	46	52	58	64	70	76	82	88	94
41	47	53	59	65	71	76	82	88	94
42	48	54	59	65	71	77	83	88	94
43	49	54	60	66	72	77	83	89	94
44	50	55	61	66	72	78	83	89	94
45	51	56	62	67	73	78	84	89	95
46	51	57	62	68	73	78	84	89	95
47	52	58	63	68	74	79	84	89	95
48	53	58	64	69	74	79	84	90	95
49	54	59	64	69	75	80	85	90	95
50	55	60	65	70	75	80	85	90	95
51	56	61	66	71	76	80	85	90	95
52	57	62	66	71	76	81	86	90	95
53	58	62	67	72	77	81	86	91	95
54	59	63	68	72	77	82	86	91	95
55	60	64	69	73	78	82	87	91	96
56	60	65	69	74	78	82	87	91	96
57	61	66	70	74	79	83	87	91	96
58	62	66	71	75	79	83	87	92	96
59	63	67	71	75	80	84	88	92	96
60	64	68	72	76	80	84	88	92	96
61	65	69	73	77	81	84	88	92	96
62	66	70	73	77	81	85	89	92	96
63	67	70	74	78	82	85	89	93	96
64	68	71	75	78	82	86	89	93	96
65	69	72	76	79	83	86	90	93	97
66	69	73	76	80	83	86	90	93	97
67	70	74	77	80	84	87	90	93	97
68	71	74	78	81	84	87	90	94	97
69	72	75	78	81	85	88	91	94	97
70	73	76	79	82	85	88	91	94	97
71	74	77	80	83	86	88	91	94	97
72	75	78	80	83	86	89	92	94	97
73	76	78	81	84	87	89	92	95	97
74	77	79	82	84	87	90	92	95	97
75	78	80	83	85	88	90	93	95	98

Current amount below	10%	20%	30%	40%	50%	60%	70%	80%	90%
76	78	81	83	86	88	90	93	95	98
77	79	82	84	86	89	91	93	95	98
78	80	82	85	87	89	91	93	96	98
79	81	83	85	87	90	92	94	96	98
80	82	84	86	88	90	92	94	96	98
81	83	85	87	89	91	92	94	96	98
82	84	86	87	89	91	93	95	96	98
83	85	86	88	90	92	93	95	97	98
84	86	87	89	90	92	94	95	97	98
85	87	88	90	91	93	94	96	97	99
86	87	89	90	92	93	94	96	97	99
87	88	90	91	92	94	95	96	97	99
88	89	90	92	93	94	95	96	98	99
89	90	91	92	93	95	96	97	98	99
90	91	92	93	94	95	96	97	98	99
91	92	93	94	95	96	96	97	98	99
92	93	94	94	95	96	97	98	98	99
93	94	94	95	96	97	97	98	99	99
94	95	95	96	96	97	98	98	99	99

95% rolls to 100%

After the VA grants a service-connected disability decision in the veteran’s favor, these are most of the benefits available to veterans by disability percentage granted.

0% to 20%

- Certificate of Eligibility for home loan guarantee.
- Home loan guarantee fee exemption.
- VA Priority Medical treatment card.
- Vocational Rehabilitation and Counseling under Title 38 USC Chapter 31 (must be at least 10%)
- Service-Disabled Veterans Insurance (Maximum of \$10,000 coverage), must file within 2 years from date of NEW service connection. Only applies to those under 65 years of age. And VALife insurance program arrived in January 2023 for Veterans with Service-connection. See this link:
<https://www.benefits.va.gov/insurance/valife.asp>.
- 10 point Civil Service preference (10 points added to Civil Service test score).
- Clothing allowance for veterans who use or wear a prosthetic or orthopedic appliance (artificial limb, braces, wheelchair) or use prescribed medications for a skin condition which tend to wear, tear, or soil clothing.

- Temporary total evaluation (100%) based on hospitalization for a service-connected disability necessitating at least 1 month of convalescence or immobilization by cast, without surgery of one or more major joints.

30%

In addition to the above:

- Additional allowance for dependent (spouse, child(ren), stepchild(ren), helpless child(ren), full-time students between the ages of 18 and 23 and parent(s). VA form 21-686c
- Additional allowance for a spouse who is a patient in a nursing home or helpless or blind or so near helpless or blind as to require the regular aid and attendance of another person.
- Non-competitive Federal employment.

40%

In addition to the above:

- Automobile grant and/or special adaptive equipment for an automobile provided there is loss or permanent loss of use of one or both feet, loss or permanent loss of one or both hands or permanent impaired vision of both eyes with central visual acuity of 20/200 or less in better eye.
- Special adaptive equipment may also be applied for if there is ankylosis of one or both knees or one or both hips.

50%

In addition to the above:

- VA medical outpatient treatment for any condition except dental.
- Preventative health care services.
- Hospital care and medical services in non-VA facilities under an authorized fee basis agreement. (Apply at your nearest VA medical facility)
- Medication copayments are charged for each 30 day or less supply of medication provided on an outpatient basis for nonservice-connected conditions. Medications for service connected granted issues are provided by the VA free. Exemptions from this co-payment requirement are provided for veterans service-connected 50% or more, former POWs, and for veterans whose income is less than the established dollar threshold. Also exempt from the medication copayment are veterans receiving medication for the treatment of conditions related to Agent Orange, ionizing radiation, Persian Gulf, military sexual trauma, and certain cancers of the head and neck recent combat veterans are exempt from medication copayments for two years following discharge when being treated for conditions related to their military service. (You can furnish your VA primary care doctor with prescriptions from your

private primary doctor and the VA will provide them if you are 50%+ rated and the medicine is in the VA formulary).

60% to 90%

In addition to the above:

- Increased compensation (100%) based on individual unemployability (veterans who are unable to obtain or maintain substantially gainful employment due to service-connected disability).

100%

In addition to the above:

- Dental treatment.
- Waiver of National Service Life premiums.
- Veterans' employment preference for spouse.
- Specialty Adaptive Housing for veterans who have loss or permanent loss of use of both lower extremities, OR blindness in both eyes having light perception only plus loss or permanent loss of use of one lower extremity OR the loss or permanent loss of use of one of one lower extremity with loss or permanent loss of use of one upper extremity OR the loss or permanent loss of use of one extremity together with an organic disease which affects the function of balance and propulsion as to preclude locomotion without the aid of braces, crutches, canes or wheelchair.
- Special Home Adaptation Grant (for veterans who don't qualify for Specially Adapted Housing) may be applied for if the veteran is permanently and totally disabled due to blindness in both eyes with visual acuity of 5/200 or less or the loss OR permanent loss of use of BOTH HANDS.

Military Commissary and Exchange Privileges: Go to VA.gov site, use the search box at the top right, search for Commissary and exchange privileges for Veterans for eligibility and requirements.

- For those who are VA 100% disabled, they and their spouse may apply for the commissary ID card. The ID card will allow you on any military base and use the commissary/exchange. You can login to va.gov, go to the big white box, bottom right of page, Records, download your benefit letters, and print your letter.
- Requirements for the commissary ID card are: For veteran: 2 forms of photo id, DD-214 and 100% VA award letter. For spouse: Copy of marriage certificate, birth certificate, social security card and Photo ID.

In the Houston area veterans can go to Joint Base Ellington Field, Visitor Center and apply. Appointments required.

Or go to 36th Sustainment Brigade, U.S. Armed Forces Reserve Ctr
Rankin ID Card Office (AFRC),
900 West Rankin Road Attn: RAPIDS Site 620854, Houston. Phone 281-874-6882

100% Permanent and Total

In addition to the above:

- Civilian Health and Medical Program for dependents and survivors (CHAMPVA).
- Survivors and dependents education assistance under Title 38 USC Chapter 35. If you received a disability rating of 100% Permanent and Total, or your rating has increased to 100% Permanent and Total, your children and spouse may qualify for Dependents' Educational Assistance benefits. This benefit may be used for pursuit of an undergraduate or graduate degree, courses leading to a certificate or diploma from business, technical or vocational schools, apprenticeship, and on-the-job training programs. Benefits for correspondence courses are available to spouses only. The program provides up to 45 months of education or training.

STATE & LOCAL BENEFITS

0% to 10%

- Employment & Reemployment
- Veterans Preference
- Texas Veterans Land Program (to include State Homes and Veterans Cemetery Program)
- Free Recordings of Discharges
- Educational Assistance (Hazelwood Act – 181 days of active military service)
- Home property tax reduction for Veterans (10% minimum disability)
- No Cost Medical Records
- Can have “veteran” put on Texas driver’s license.

40 to 50%

In addition to the above:

- Special License Plates disabled veteran (DV) (50%+ rated or 40% due to amputation of lower extremity), each vehicle. Reduced registration fee on primary vehicle. Vehicle registration must be in the name of the veteran. Available to Veteran and spouse.
- Parking Privileges, handicapped. Free parking at Houston airports, go to cash lane on leaving, must have Disabled Vet plates on vehicle. **Effective Sept 1, 2021**, Texas DV license plates recipients will have to hang the ADA placard to be able to park of ADA parking spaces.

- Effective Dec 1, 2021 the DMV will require every recipient to get the ADA placard application signed by their doctor, DMV will no longer issue it automatically. Order two placards.
- Housing Assistance Program (50%)
- Home Improvement Program (50%)
- Hunting and Fishing Licenses, Disabled Veteran “Texas Super Combo” (Type 502) (50%)
- The U.S. Park Pass, A free, lifetime pass – available to U.S. citizens or permanent residents of the United States that have been medically determined to have a permanent disability (does not have to be a 100% disability). The Passport provides only free admission to state parks, and does not exempt anyone from payment of other charges, such as camping fees, etc.

50%

Veteran Toll Road Discounts with DV plates.

Harris County Toll Road Authority

[https://www.hctra.org/FAQs/What is the Harris County Toll Road Authority Veteran Discount Tolling Program](https://www.hctra.org/FAQs/What%20is%20the%20Harris%20County%20Toll%20Road%20Authority%20Veteran%20Discount%20Tolling%20Program)

Qualified Veterans Use of METRO HOT Lanes (Metropolitan Transit Authority of Harris County, Texas)

<https://www.ridemetro.org/pages/VeteransHOVandHOTLanes.aspx>

Fort Bend County Toll Road Authority (FBCTRA)

<http://www.fbctra.com/veterans/>

Central Texas Regional Mobility Authority

<https://www.mobilityauthority.com/veterans>

60%

In addition to the above:

- Free Driver’s License for Disabled Veterans.

100%

In addition to the above:

- Section 11.131 of the Tax Code requires an exemption of the total appraised value of homesteads of Texas veterans who received 100% compensation from the U.S.

Department of Veterans Affairs due to a 100 percent disability rating or determination of individual unemployability by the U.S. Department of Veterans Affairs.

- File with your county property appraisal district. In addition, normally any disability 10% and above allows for a reduction in property tax. See your appraisal district's web site and file the form with them. You will need a copy of your disability award letter.
- Surviving spouse of 100% disabled veteran. An individual must have been married to a disabled veteran at the time of the veteran's death and the disabled veteran must have qualified for the 100 percent or totally disabled veteran exemption prior to he or she passed away. The property must have been the residence homestead of the surviving spouse when the disabled veteran died and remain the residence homestead of the surviving spouse. File with your county property appraisal district.

The State of Texas offers Disabled Veteran - Surviving Spouse license plates. If your spouse qualified for Disabled Veteran license plates at the time of death and you remain unmarried.

Veterans Health Administration (VHA)

The Veterans Health Administration is America's largest integrated health care system, providing care at 1,298 health care facilities, including 171 medical centers and 1,113 outpatient sites of care of varying complexity (VHA outpatient clinics), serving 9 million enrolled Veterans each year.

The VA states: Am I eligible for free VA health care as a post-9/11 combat Veteran?

We're extending and expanding VA health care eligibility based on the PACT Act, 2022. We encourage you to apply, no matter your separation date. Your eligibility depends on your service history and other factors.

If you meet the requirements listed here, you can get free VA health care for any condition related to your service for up to 10 years from the date of your most recent discharge or separation. You can also enroll at any time during this period and get any care you need, but you may owe a copay for some care.

At least one of these must be true of your active-duty service:

You served in a theater of combat operations during a period of war after the Persian Gulf War, or

You served in combat against a hostile force during a period of hostilities after November 11, 1998

And this must be true for you:

You were discharged or released on or after October 1, 2013

We encourage you to enroll now so we can provide any care you may need now or in the future. Enrollment is free.

Regardless of a veteran's income, private healthcare benefits or Medicare: If they are qualified to enroll in the VA healthcare system, it is encouraged. When enrolled in the VA healthcare system, it is not mandatory they use it all the time. Concerns are what if the veteran loses their private healthcare? With the VA healthcare as an option, they are not going to experience a catastrophic dilemma.

For simplicity, the VA healthcare enrollment form 10-10EZ, page 2, section VI shows:

Section VI - Financial Disclosure: ONLY NOT SERVICE-CONNECTED AND 0% NONCOMPENSABLE SERVICE-CONNECTED VETERANS MUST COMPLETE THIS SECTION TO DETERMINE ELIGIBILITY FOR VA HEALTH CARE ENROLLMENT AND/OR CARE OR SERVICES.

Financial Disclosure Requirements Do Not Apply To:

- a former Prisoner of War; or
- those in receipt of a Purple Heart; or
- a recently discharged Combat Veteran; or
- those discharged for a disability incurred or aggravated in the line of duty; or
- those receiving VA Service-Connected disability compensation; or
- those receiving VA pension; or
- those in receipt of Medicaid benefits; or
- those who served in an Agent Orange exposure location Between January 9, 1962, and May 7, 1975, veterans must have served for any length of time in at least one of these locations:

In the Republic of Vietnam.

Aboard a U.S. military vessel that operated in the inland waterways of Vietnam, or on a vessel operating not more than 12 nautical miles seaward from the demarcation line of the waters of Vietnam and Cambodia. Public Law 116-23 (Blue Water Navy Vietnam Veterans Act of 2019); or

- those who served in SW Asia during the Gulf War between August 2, 1990 and November 11, 1998; or

- those who served at least 30 days at Camp Lejeune between August 1, 1953 and December 31, 1987.

“You are not required to disclose your financial information; however, VA is not currently enrolling new applicants who decline to provide their financial information unless they have other qualifying eligibility factors. If a financial assessment is not used to determine your priority for enrollment you may choose not to disclose your information.

However, if a financial assessment is used to determine your eligibility for cost-free medication, travel assistance or waiver of the travel deductible and you do not disclose your financial information, you will not be eligible for these benefits”.

It can be misunderstood by not reading and comprehending that in one place the VA form states, “Financial Disclosure Requirements Do Not Apply To:” and the paragraph 1 says “You are not required to disclose your financial information; however, VA is not currently enrolling new applicants who decline to provide their financial information unless they have other qualifying eligibility factors.”

That means if a veteran meets the items listed under the financial disclosure exemptions, they do not have to provide financial disclosures. It is suggested the veteran make copies of their VA disability award even if they received a zero percentage and attach them to the VA application. When the veteran presents the completed VA form, a copy of their DD-214, a form of identification and copies of their disability rating to the customer service person at the VA outpatient clinic or at the Hospital eligibility/admissions counter, it would be wise to show the clerk their attachments. It is also beneficial they take page two of the VA form instructions just in the VA employee might not be too experienced and demands the financial information. You might have to request the intervention of a supervisor.

Obviously if the veteran has not received a VA disability rating percentage, then they have to provide their financial information.

On these exempted locations:

- those who served in an Agent Orange exposure location Between January 9, 1962, and May 7, 1975, Vietnam.
- veterans must have served for any length of time in at least one of these locations
- those who served in SW Asia during the Gulf War between August 2, 1990 and November 11, 1998; or
- those who served at least 30 days at Camp Lejeune between August 1, 1953 and December 31, 1987.

Any U.S. or Royal Thai military base in Thailand from January 9, 1962, through June 30, 1976

Laos from December 1, 1965, through September 30, 1969

Cambodia at Mimot or Krek, Kampong Cham Province from April 16, 1969, through April 30, 1969

Guam or American Samoa or in the territorial waters off of Guam or American Samoa from January 9, 1962, through July 30, 1980

Johnston Atoll or on a ship that called at Johnston Atoll from January 1, 1972, through September 30, 1977

A DD-214 will not necessarily list or prove service in Agent Orange exposure locations above. A boots on the ground in Vietnam veteran's DD-214 should show in the awards section Vietnam Service and Vietnam Campaign Medal. On the other locations, the veteran's options will be if they can produce Permanent Change of Station orders, an award certificate that mentions where the award was earned or maybe some sort of clear photo of them in front of a military installation, so the veteran's name is clearly on their uniform and the name and location of the military installation appear. Then they will have to provide proof of where that military installation is or was.

If they can't provide concrete proof, they will have to complete the financial portion of the VA enrollment form.

Once enrolled in the VA healthcare system the veteran will be placed in a "Priority Group".

The VA states; If you qualify for more than one priority group, we'll assign you to the highest one.

Priority group 1

We may assign you to priority group 1 if any of these descriptions are true:

- You have a service-connected disability that we've rated as 50% or more disabling, or
- You have a service-connected disability that we've concluded makes you unable to work (also called unemployable), or
- You received the Medal of Honor (MOH)

Priority group 2

We may assign you to priority group 2 if you have a service-connected disability that we've rated as 30% or 40% disabling.

Priority group 3

We may assign you to priority group 3 if any of these descriptions are true:

You're a former prisoner of war (POW), or

You received the Purple Heart medal, or

You were discharged for a disability that was caused by—or got worse because of—your active-duty service, or

You have a service-connected disability that we've rated as 10% or 20% disabling, or

You were awarded special eligibility classification under Title 38, U.S.C § 1151, "benefits for individuals disabled by treatment or vocational rehabilitation."

Priority group 4

We may assign you to priority group 4 if either of these descriptions is true:

You're receiving VA aid and attendance or housebound benefits, or

You have received a VA determination of being catastrophically disabled.

Priority group 5

We may assign you to priority group 5 if any of these descriptions are true:

You don't have a service-connected disability, or you have a non-compensable service-connected disability that we've rated as 0% disabling, and you have an annual income level that's below our adjusted income limits (based on your resident zip code), or

You're receiving VA pension benefits, or

You're eligible for Medicaid programs.

Priority group 6

We may assign you to priority group 6 if any of these descriptions are true:

You have a compensable service-connected disability that we've rated as 0% disabling, or

You were exposed to ionizing radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki, or

You participated in Project 112/SHAD, or

You served in the Republic of Vietnam between January 9, 1962, and May 7, 1975, or

You served in the Persian Gulf War between August 2, 1990, and November 11, 1998, or

You served on active duty at Camp Lejeune for at least 30 days between August 1, 1953, and December 31, 1987

We may also assign you to priority group 6 if you meet all of these requirements:

You're currently or newly enrolled in VA health care, and

You served in a theater of combat operations after November 11, 1998, and

You were discharged less than 10 years ago.

Note: As a returning combat Veteran, you're eligible for these enhanced benefits for 10 years after discharge. At the end of this enhanced enrollment period, we'll assign you to the highest priority group you qualify for at that time.

Priority group 7

We may assign you to priority group 7 if both of these descriptions are true for you:

Your gross household income is below the geographically adjusted income limits (GMT) for where you live, and

You agree to pay copays.

Review current copay rates.

Priority group 8

We may assign you to priority group 8 if both of these descriptions are true for you:

Your gross household income is above VA income limits and geographically adjusted income limits for where you live, and

You agree to pay copays.

Review current copay rates.

If you're assigned to priority group 8, your eligibility for VA health care benefits will depend on which subpriority group we place you in.

Typically, new enrollees in the VA healthcare system need to check the box on the 10-10EZ form block: WOULD YOU LIKE FOR VA TO CONTACT YOU TO SCHEDULE YOUR FIRST APPOINTMENT? Check the yes box.

When checked the VA will schedule blood lab draw then the VA will schedule an appointment with the primary care physician for a face-to-face appointment. In that appointment the medical provider will go over the blood lab report and ask the veteran what issues they might be having.

The VA recently had this in one of their newsletters on appointments: Appointments: Ask These Questions. Get the most out of your visit.

<https://www.myhealth.va.gov/mhv-portal-web/web/myhealthvet/ss20170507-talk-with-your-doc-simple-steps-to-be-involved>

We are all guilty of going to a medical appointment with things in our mind to discuss. But many times we get in our vehicle to leave and remember one or two things we forgot to discuss. Go prepared with your written list of questions or list of issues to discuss.

Getting our business in order

After assisting several surviving spouses with issues from deceased veteran's lack of preparation, I have put this together to hopefully assist veterans and their spouse now vs later. I call it "Ready to go".

Are all properties in both names on the property deed and with respective appraisal districts?

Are all vehicles registered with both names?

Are both names on all bank accounts? Typically, the bank will lock that account if there is only one person as the account holder and no others on the account and they pass away. How long can your spouse survive without access to funds from bank accounts?

Are both names on stock accounts retirement accounts etc., are beneficiaries on all of them and up to date?

Do you or your spouse carry an "In case of emergency" contact card or paper in your wallet?

Do you have all life insurance policies in one place? Are the beneficiaries current?

Do you, your spouse or other family members carry a Social Security card on their person? If so, remove it to a safe place with the important papers. The only time anybody will ask for it is maybe if you start employment with a new company.

Do you have a lawyer? Do you both have wills? If you have minor children, is their future addressed in your wills?

Do you use a financial planner, if so notify them of veteran or spouse passing.

Do you and your spouse have statutory durable power of attorney?

Do you and your spouse have durable power of attorney for health care and living wills? Obviously, the will has to be probated with the respective court by your lawyer. If you and spouse are on a Medicare health plan, contact your plan and ask for their forms for both you and your spouse to complete their form for durable power of attorney for health care and living wills. If one of you are in the hospital, Medicare won't talk to the other about anything involving the hospitalized spouse without that form on file with them.

Do you have a list of all VA disability compensation items you are granted? If not, you can download that on the <https://www.va.gov/> website.

Do you have a list of all your prescribed medicines?

Do you have a list of the names of websites, logins, passwords and actual site address of those you use?

Do you know your surviving spouse may be qualified for “DIC”, Survivors Pension, and/or Accrued Benefits? Formal form name “DEPENDENCY AND INDEMNITY COMPENSATION, SURVIVORS PENSION, AND/OR ACCRUED BENEFITS”? Do you know the form for “DIC” is VA form 21P-534EZ and it is suggested you fill it out **now** since you know most of the information required on the form? If you wish to do it, go to <https://www.va.gov/vaforms/> on the interweb and put in the form number above and it will provide the latest version of the form.

You can fill it out online, save it to your computer and print it out. Don't attempt to do it on your phone. Put a note attached to it stating if you pass away, to go to the above link and search the form and fill out the latest version and complete it with info from your completed copy. If the VA receives an out-of-date form, they will bounce it back. That could result in lost months of revenue. There is no time limit to file for DIC. If submitted a year or more after a veteran passing away, the effective date will be the date the VA enters the form in their system.

If your spouse is listed on your VA records and you are receiving a little extra money for having a spouse; if your spouse passes away you must notify the VA as soon as you can to stop those extra payment amounts. Call 800-827-1000.

List your VA representative organization and phone number. Surviving spouse will have to be represented by an accredited veteran organization, Texas Veterans Commission or similar. Surviving spouse will submit the DIC benefit form to their new representative. Surviving spouse does not have to use your former representative.

If you have pending VA claims or appeals, check the form of Dependency and Indemnity Compensation (DIC) box; Accrued Benefits on the form.

Do you know the VA guidelines state we must be 100% disabled for 10 years and regardless of what we die from, the spouse may be qualified for “DIC”?

Do you know under 10 years at 100% disabled, we must die from an issue that we are receiving disability compensation (noted on the death certificate) for, or something that is secondary to it (noted on the death certificate) for the spouse to be qualified for “DIC”, or a presumptive condition. Currently spousal DIC is about \$1,562.74 month tax free. (Dec 2022 Cost of living increase).

Do you know that if a surviving spouse is granted “DIC” based on your reason(s) for death, and veteran was 100% disabled at time of death, most counties will grant the spouse 100% property tax exemption when they apply with the county appraisal district? Go to your va.gov account and print your 100% VA disability letter now and put it with your important papers. That will be proof you were 100% prior to death.

Are you and your family fully aware of all the presumptive conditions listed above?

For those who might have to be in hospice, ensure the hospice manager is informed of any VA disabilities you have and hopefully they will note one of them as a major factor in the cause of death or primary reason should you pass away under hospice care.

Do you know your death must be reported:

Prior to death reporting, make sure the surviving spouse downloads any VA health files or benefit information using myhealthEvet “Blue Button”. As soon as the death is reported to the VA, those accounts will be locked, nobody can access them outside of the VA.

If you or your spouse are receiving VA service-connected disability payments, VA pension or caregivers stipend; notify the Veterans Administration and advise them of the veteran or spouse passing. Phone 800.827.1000

Get the person’s name or id and record the date and time so should it come up that they claim they were not notified; survivor can prove they did call.

Furnish: Deceased’s name, social security number and date of death.

If the veteran was in the VA healthcare system, It is a good idea to notify the VA healthcare as well. It should be done in writing to the veteran’s VA Hospital/Medical Center, attention Decedent Affairs Dept. Enclose a copy of the veteran’s death certificate and your contact information should it be necessary to contact you. Imagin a how a spouse feels who continues to receive your VA appointment reminders after you are gone.

Social Security Admin. Phone 800.772.1213

Typically, the funeral home will report the veteran’s passing. I suggest confirming with the funeral home if they will as policy, report it. If they don’t then the surviving spouse or family member needs to call Social Security. Furnish the funeral home with a copy of the veteran’s DD-214(s).

When a family member has to call, again get the person’s name or id and record the date and time so should it come up that they claim they were not notified; survivor can prove they did call.

Military retirees, You can contact the Casualty Assistance Officer for guidance or other assistance they provide. See website address below

<https://www.military.com/benefits/survivor-benefits/casualty-assistance-officer.html>

Defense Finance and Accounting Service “DFAS” must be notified of the retiree’s passing.

See website address: <https://www.dfas.mil/customerservice/Customerservice-2/>

Please follow the steps below to report the death as soon as possible.

What You Need

- Retiree’s name, social security number and date of death
- Manner of death: natural, suicide, accident, homicide
- Retiree's marital status upon death
- Names, address of retiree's designated beneficiaries or next of kin living and deceased

Did the retiree participate in the military Survivor Benefit Plan?

Get the person’s name or id and record the date and time so should it come up that they claim they were not notified; survivor can prove they did call.

Upon notification of death, DFAS will stop monthly payments to prevent overpayment.

Within 7-10 business days after reporting the death to DFAS, you should receive a letter containing the following documents:

- SF1174 Claim for Unpaid Compensation of Deceased Member of the Uniformed Service
- Annuity account forms and instructions (if the decedent was enrolled in the Survivor Benefit Plan or the Retired Serviceman's Family Protection Plan)

Complete the forms you received with your letter and return them with a copy of the retiree’s Death Certificate that includes cause of death to:

Defense Finance and Accounting Service

U.S. Military Retired Pay

8899 E 56th Street

Indianapolis IN 46249-1200

DFAS 800-321-1080. M - F, 8 a.m. to 5 p.m. ET

If you need assistance completing your DFAS claim forms, please call them.

Do you know you should have a couple of spare copies of your DD-214 in your folder?

Do you know that you and your spouse may be eligible to be buried in a VA National Cemetery? Do you know you can obtain preapproval? (VA form 40-10007)?

Have you and your spouse visited a funeral home to discuss funeral planning?

Reference item, Texas Funeral Service Commission, Facts About Funerals, link:

<http://tfsc.texas.gov/files/News/Facts%20About%20Funerals%20English.pdf>

Do you know part of the expense of a funeral home may be reimbursable from the VA?

Do you know most probably your spouse/family member should get at least 10 – 15 copies of a death certificate just to be on the safe side?

If you elect to have either an Honor Guard or Patriot Guard Riders or both at the cemetery, be aware those members are volunteering their time and expenses. It is customary but not required to offer a monetary thank you for their personal out of pocket expenses to honor your veteran.

Do you have an accordion type large expandable folder for all important papers to be kept in a safe place?

Does your spouse or family members know where your important papers are kept?

Make sure review all documents in the folder with your spouse/family member.

Remember, the Veterans Administration consists of 3 different administrations:

VA Benefit Administration, VA Healthcare Administration and VA National Cemetery Administration. Don't assume they talk to each other.

The Veterans Administration website <https://www.va.gov/> can be our friend!

If you are reluctant to do this; at least do it for your spouse/family. Think of the worries you will remove from a spouse after you pass.

Once again, never search the internet for a VA form. Always use the VA form website <https://www.va.gov/find-forms/>

The most common VA forms are:

- 10-3542 Medical appointment mileage form
- 20-0995 Decision Review Request, supplemental claim, new evidence.
- 20-0996 Decision review request, no new evidence
- 20-10206 Freedom of Information act (FOIA)
- 20-10207 Priority Processing Request
- 20-10208 Document Evidence Submission
- 21-0781 Statement in support of claim for service connection for post-traumatic stress disorder (PTSD)
- 21-0781A Statement in Support of Claim for Service Connection for PTSD Secondary to Personal Assault
- 21-0966 Intent to file open, not ready to file claim.
- 21-4138 Statement in Support of Claim
- 21-4142 Authorization to disclose information to the Department of Veterans Affairs.
- 21-4142a Release for medical provider info
- 21-526EZ Initial claim form ready to file

21-686c Add or remove dependent(s)
21-8940 Unemployability
21P-0847 Request for substitution of claimant upon death of claimant.
21P-530EZ Application for Burial Benefits
21P-534EZ Application for DIC surviving spouse.
28-10212 Chapter 31 request for assistance
DD 293 Review of discharge
VA101828 Decision review request: Board of appeal (Notice of disagreement)
VA40-10007 Application for Pre-Need Determination of Eligibility for Burial in a VA
National Cemetery.

All of the above forms are fillable online. Take advantage of that feature.

In ending:

We all know nobody has left this world alive.

We are never too young or too healthy not to be ready.

This is a generic paper, applies equally to both spouses/family members.