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Texas Veterans Commission JOURNAL

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And Much More . . .

TEXAS VETERANS COMMISSION

Headquarters

P.O. Box 12277

Austin, Texas 78711

512/ 463-5538

(FAX) 512/ 475-2395

Texas Veterans Commission
Regional Office

6900 Almeda Road

Houston, TX 77030-4200

713/ 794-3663

(FAX) 713/ 794-3714

Texas Veterans Commission
Regional Office

1400 N. Valley Mills Dr.

Waco, TX 76799

817/ 757-6886

(FAX) 817/ 757-6891



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VETERANS ORGANIZATIONS SERVING TEXAS VETERANS

THE AMERICAN LEGION

Delbert D. Fuhrman, Department Commander

Mike Palmquist, Department Adjutant

VETERANS OF FOREIGN WARS

Alexander Vernon, Department Commander

Glen M. Gardner, Jr., Department Adjutant

AMVETS

Debra Henderson, Department Commander

Cecil Aultman, Executive Director

DISABLED AMERICAN VETERANS

Larry C. Geddie, Department Commander

Dennis R. Nixon, Department Adjutant

AMERICAN EX-POWS

Michael G. Gesino, Sr., Department Commander

Jean Winn, Department Adjutant

PARALYZED VETERANS OF AMERICA

Wilbur "Buddy" Osborne, VARO, Houston, Texas

Dan Lenox, VARO, Waco, Texas

VIETNAM VETERANS OF AMERICA

Texas State Council

P.O. Box 1405

Fritch, Texas 79036

VETERANS OF WORLD WAR I

E.J. Niedermaier, Department Commander

4848 Trew Drive, #114

Dallas, Texas 75228-6864

NON-COMMISSIONED OFFICERS ASSN.

International Headquarters

10635 IH 35 North

San Antonio, Texas 78223

MILITARY ORDER OF THE PURPLE HEART

John Harris, Department Commander

P.O. Box 10714

Fort Worth, Texas 76114-0714

AMERICAN GI FORUM OF THE U.S.

Antonio G. Morales, National Executive Director

2711 West Anderson Ln., Suite 205

Austin, Texas 78757

In addition to the organizations listed above, veterans' assistance is offered in most counties through the local Veterans County Service Office.

\$23 Million in HUD Funds to Help Homeless Veterans

Almost \$23 million in grants from the Department of Housing and Urban Development (HUD) will be awarded to organizations providing services to homeless veterans. The grants are part of HUD's \$600 million "Continuum of Care" program to serve the nation's homeless population.

The Notice of Funding Availability (NOFA) last year inviting organizations to apply for the funds, included references to providing services specifically to homeless veterans.

As a result, a large number of veteran service providers applied for funding and 44 organizations in 17 states and the District of Columbia were awarded grants ranging from \$40,000 to more than \$1.3 million. Twelve of the organizations, receiving almost \$5.2 million, are in California, the state with the nation's largest population of veterans.

The organizations receiving grants provide supportive housing, shelter plus care programs, and single room occupancy for homeless

veterans, estimated to number more than 280,000 nationwide.

In response to concerns raised by veterans' service organizations, HUD created a Veterans Resource Center to help organizations interested in helping homeless veterans apply for grants. The Center, located in Gaithersburg, Maryland, can be contacted by calling toll-free ☎1-800-998-9999.★

Article from VETSNET, February 1997
Veterans' Employment & Training Service
U.S. Department of Labor

TEXAS VETERANS COMMISSION JOURNAL

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Texas Veterans Commission
P.O. Box 12277
Austin, Texas 78711
(512) 463-5538

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Executive Director

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Deputy Director

BILLY G. GREEN
Deputy Administrator

RICHARD M. PRETE
Editor

NANCY J. GAMROTH
Asst. Editor

We thank these contributors:

TVC Staff:
Rex Lloyd
Mike Mendoza
Anthony Moore
Cheryl McClintock
Reylon Belle
Jerry Goode
Vincent Morrison

Others:

Veterans Employment & Training Service
U.S. Department of Labor
U.S. Department of Veterans Affairs
Dan Garcia, Taylor County Service Officer
Texas Attorney General, Dan Morales

Comments concerning veterans' programs or delivery of services may be addressed to:

Texas Veterans Commission
P.O. Box 12277
Austin, Texas 78711

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What You Should Know About Social Security Benefits

Eligibility for benefits commences at age 62 and depends on the number of quarters of work covered by Social Security. The required work credit depends on your date of birth. Work after retirement benefits begin can increase monthly payments. Income beyond a certain level can reduce annual benefits. The annual exemption for 1996 is \$12,500 for people 65 or over and \$8,280 for people under 65. Benefits to workers, their spouses, widows and widowers are reduced if payments begin prior to age 65.

Workers under the age of 65 who have a severe mental or physical disability which prevents them from obtaining substantial gainful employment are entitled to monthly benefits. The disability must be expected to last (or already has lasted) at least 12 months or expected to result in death. Disability payments start on the sixth full month of disability.

Spouses aged 62 or older are entitled to monthly payments if his or her wife or husband is eligible for retirement or disability benefits.

Spouses under the age of 62, widows, widowers, or surviving parents are entitled to monthly payments if they are caring for a child under the age of 16 who is disabled or is receiving benefits based on the earnings of a worker who is deceased or is eligible for retirement or disability benefits.

Widows and widowers age 60 or older are entitled to benefits. Their marriage must have lasted at least nine months (in most cases) before the surviving spouse can receive monthly benefits.

There is a lump sum death payment entitlement to widows, widowers, and certain children if surviving an eligible worker. This payment is usually \$255 and is split among qualifying persons. This benefit must generally be applied for within two years of worker's death.

Widows or widowers aged 50 or older are entitled to monthly payments if they become disabled not later than seven years after their eligible spouse's death or within seven years after a parent's benefits end.

Divorced spouses aged 62 or older, surviving divorced spouses aged 60 or older, and surviving spouses aged 50 or older who are disabled are entitled to monthly payments if they were married to the eligible worker for at least 10 years.

Unmarried divorced spouses aged 62 years or older are entitled to monthly payments if they were divorced from the eligible worker for at least two years. They may receive these payments, regardless of whether the worker actually receives benefits.

Unmarried children, including those who are adopted and stepchildren, who are under the age of 18 or those who are between the ages of 18 and 19 if they are full-time high school students, are entitled to monthly payments if his/her parent is eligible for retirement or disability benefits or deceased. Generally a marriage must have lasted at least one year before the dependents of a retired or disabled worker can receive monthly payments.

Unmarried children, adopted children and stepchildren who are 18 years of age or older and who were severely disabled before age 22 and continue to be disabled are entitled to monthly payments if his or her parent is eligible for retirement or disability benefits or if the parent is deceased.

Grandchildren who are under the age of 18 and those who are between the ages of 18 and 19 who are full-time high school students and those who are severely disabled prior to age 22 and continue to be disabled are entitled to payment which are based on the grandparent's earnings in certain circumstances, such as when both natural parents are disabled or deceased.

Parents who are age 62 or older are entitled to monthly payments if they were dependent on the eligible deceased worker for at least one-half of their support.

If a worker is disabled and is 31 years old or older, he must generally have earned at least five years work credit in the ten years immediately preceding the date of disability. If a worker is disabled by blindness, the required credit may have been earned at any time after 1936. The covered worker would not need recent credit to qualify. A person is considered to be legally blind if his vision is no better than 20/200 in his best eye (even with corrective lenses) or if his visual field is 20 degrees or less.

An unfavorable decision can be appealed. A worker generally has 60 days after receipt of a decision to file and submit new evidence for reconsideration. ★

Contributed by Rex A. Lloyd, TVC Staff

ACB Scholarships Offered

The American Council of the Blind (ACB) will award 25 scholarships to outstanding blind students in 1997. All legally blind persons admitted to academic and vocational training programs at the post secondary level for the 1997-98 school year are encouraged to apply for one of these scholarships. To find out more, contact Jessica Beach of ACB at ☎1-800-424-8666.

★ ★ ★

Purple Heart Hall of Honor

A project to establish a Purple Heart Hall of Honor at New Windsor Cantonment State Historic Site in the Hudson Valley, New York, to recognize and honor the more than 800,000 Americans who have been awarded the Purple Heart in service to our country is underway. The project, which has the endorsement of the Military Order of the Purple Heart, General Colin L. Powell (Ret), and others, will be a permanent place of remembrance of the service and sacrifices made by the men and women of the Armed Forces. It will also house a museum for future generations of Americans to visit. This project is civic, educational and national in scope.

The Purple Heart Hall of Honor will be an addition to the Visitor Center with its exhibits on the Cantonment, the last winter encampment of the northern Continental Army. It was here where

General Washington's cease-fire orders took effect April 19, 1783, bringing the Revolutionary War to a successful close. On display in the Visitor Center is an original Badge of Military Merit, one of three awarded for valor by General Washington and one of two that exist today. And, as you may know, the badge was revived in 1932 on the bicentennial of Washington's birth as the Purple Heart medal for America's wounded service personnel.

As projected, the Purple Heart Hall of Honor will have exhibits on the Badge of Military Merit and the Purple Heart medal, a computer bank of Purple Heart medal recipients, and a video, *The Legacy of the Purple Heart*, along with an auditorium, reception area, and other visitor amenities. Renovations of exhibits at Washington's Headquarters in nearby Newburgh will also be made. This is a \$4.6 million effort with funds

to be raised by individual and corporate donations. Donations are tax deductible through the Palisades Interstate Park Commission that has k501-C-3 status and administers the Cantonment, among other state parks and historic sites in the Palisades region of New York and northern New Jersey.

Site Manager, E. Jane Townsend, would like to get as many Purple Heart recipients as possible entered into the computer bank and would like to receive donations from anyone who would care to help fund this project. Americans need to remember our history and to honor all the veterans who have served our country so well and have really asked so very little in return. Forms to request inclusion in the computer bank and to make a donation to the project are available from the Purple Heart Hall of Honor, Administration Bldg., PIPC, Bear Mountain, New York 10911-0427.★

VA Develops New Medical Funding Allocation Plan

On January 14, 1997, the Department of Veterans Affairs (VA) unveiled a new system for allocating its \$17 billion medical care budget.

The new medical care funding allocation plan will correct historic geographic unbalances and ensure equitable access to care for all veterans.

Two years ago, the veterans' health-care system began its transformation from a confederation of individual medical centers and clinics focused on inpatient care to a fully integrated system of health care. Today, 22 management hubs covering defined geographical areas called Veterans Integrated Service Network (VISNs) administer the new patient-centered approach to delivering VA health care.

This transformation called for a reform in the way VA managed its resource allocation. Past allocation systems resulted in overfunded facilities in one part of the country effectively limiting access and the level of services provided to veterans receiving care from under-funded facilities in other parts of the country.

The Veterans Equitable Resource Allocation (VERA) allocates funds to Networks based on a national price for two different types of patients — those with routine health-care needs and those with

special, and generally long-term, health-care needs that are relatively expensive.

The "special care" group includes, but is not limited to, spinal cord injury, nursing home care, chronic mental illness, blind rehabilitation, end-stage renal disease and end-stage AIDS. The price is adjusted to reflect cost-of-living differences — particularly in labor costs — among Networks. Additional adjustments are made to account for differences in support to research and education.

The VERA system also accounts for veterans who receive care in more than one Network during the year. This includes the "snowbirds" who temporarily move to warmer climates in the colder months. Network budgets will be adjusted based on the historical usage patterns and costs for these veterans.

Overall, 16 of VA's 22 VISNs will have increased funding. VA will manage the resource allocation shift by incrementally implementing it in up to three years.

In developing this methodology, VA meets a directive of the Under Secretary for Health in his 1995 "Vision for Change." Since that time, the General Accounting Office and the Congress have also recognized the need for changes in the allocation system.★

VA Medical Care Eligibility Reform

The Department of Veterans Affairs (VA) is implementing new legislation which has simplified and expanded veterans' eligibility for VA medical care. The Veterans' Health Care Eligibility Reform Act of 1996, signed into law October 9, 1996, establishes the same rules for inpatient and outpatient medical care, thereby eliminating the complicated eligibility rules and restrictions previously applied to outpatient care. Eligibility rules for VA nursing home care remain generally the same.

Provisions of the legislation include:

- ◆ Permitting VA to provide preventive healthcare services to eligible veterans, even if the veteran is not currently undergoing treatment.
- ◆ Requiring VA to maintain specialized treatment programs for spinal cord injury, blindness, amputation and mental illness.
- ◆ Expanding VA's authority to contract with community providers for the sharing of healthcare services.
- ◆ Extending VA's authority to treat Vietnam veterans exposed to Agent Orange through 2002, Persian Gulf veterans exposed to environmental hazards in the Persian Gulf through 1998; and veterans exposed to ionizing radiation indefinitely.

The new eligibility rules for hospital and outpatient care

provide that VA shall furnish any needed hospital and outpatient care (to the extent that Congress appropriates funds to provide this care) to veterans receiving compensation for service-connected disabilities; former prisoners of war; World War II veterans; veterans exposed to Agent Orange in Vietnam and environmental hazards in the Persian Gulf; veterans exposed to ionizing radiation; low-income veterans and veterans with a noncompensable service-connected disability who need treatment for their service-connected disability.

VA may furnish necessary hospital and outpatient care to any other veteran, but only if resources and facilities are available and only if the veteran agrees to pay VA a co-payment.

The legislation also requires VA to establish an annual patient enrollment system, based on established priorities, with the highest priority given to those veterans with service-connected conditions. Effective October 1, 1998, veterans must be enrolled in the plan in order to receive VA medical services. However, veterans seeking care for a VA-rated service-connected condition or veterans with a 50 percent or more VA-rated disability seeking care for any condition may not be denied care because of the enrollment requirement. ★

*Article from U.S. Department of Veterans Affairs
Office of Intergovernmental Affairs
January/February 1997*

National Veterans Golden Age Games

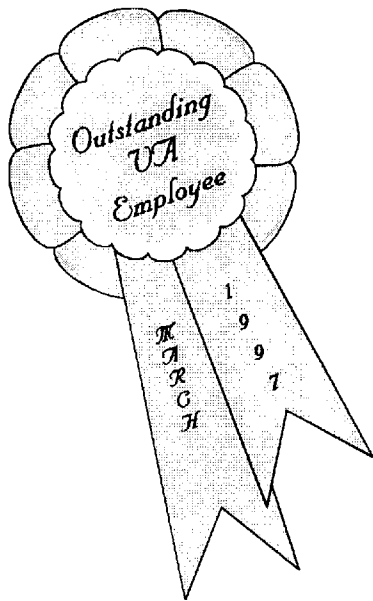
The National Veterans Golden Age Games provides an opportunity for sports and recreational competition for veterans, age 55 and older who are currently receiving care from VA. This year the games will be held July 27 - August 2, 1997, at Fort Leavenworth, Kansas.

Sports and recreation are integral components in VA Rehabilitative Medicine. The National Veterans Golden Age Games Program serves as a showcase for the preventive and therapeutic medical value that sports and recreation provide in the lives of all older Americans. Some of the ways service officers can help the Games be successful are:

- Promote the National Veterans Golden Age Games throughout your area;
- Encourage VA Medical Center Directors to participate in the Games;
- Encourage both inpatient and outpatient participation in the Games;
- Encourage donations to local VA Medical Centers earmarked "to offset veteran participation in Golden Age Games expenses (transportation and lodging)."

It is estimated that the cost per participant is \$30.00 per day for lodging, plus the cost of transportation. Donations can be made through the VA Medical Center, Office of Voluntary Services.

★ ★ ★



Nurse Beck has twenty-one years of nursing experience, with six and one-half of those years at the VA Clinic. She is the chairperson of the Victoria OPC's Infection Control Program and is responsible for the training of clinic personnel in this program. She also conducts training for abuse indicators, safety, and Crash Cart and Code Blue procedures. Her primary responsibility is patient care and education. The enthusiasm displayed during the performance of her duties leaves the veteran with a positive image of the VA Health Care System.

Nurse Beck graduated second in her class from Texas Eastern School of Nursing and has a son who also graduated as a RN from her Alma Mater. Her husband Tom is retired from the United States Air Force. She is active in church choir and enjoys horse-back riding, reading and playing the flute in a community band.

The "Outstanding VA Employee of the Month" for March 1997 is **Grace Beck, RN**, stationed at the **Outpatient Clinic in Victoria, Texas**. Nurse Beck is the **Nurse Manager** at the Victoria facility.

Her professionalism is respected by all who work with her and she is always available to assist the Texas Veterans Commission in our service to veterans. We are proud to recognize Nurse Grace Beck as the "Outstanding VA Employee of the Month" for March 1997.★

NSLI Historical Perspective

The Government first entered the insurance "business" during World War I by insuring vessels and cargo against the risk of loss resulting from wartime activities. Such insurance was not available to owners of merchant vessels through normal marine insurance channels. Accordingly, the War Risk Insurance Act was enacted on September 2, 1914, as a means of providing this necessary coverage.

With the declaration of war between the United States and Germany on April 6, 1917, the need to provide adequate life insurance for service personnel was recognized. At that time, commercial life insurance companies were either excluding payment for any death resulting from wartime military service, or were charging prohibitive rates for such coverage. For this reason, the Government began issuing yearly renewable term life insurance policies known as War Risk Term Insurance. The United States Government Life Insurance (USGLI)

program was established on September 29, 1919, to handle new policy issues and conversions from War Risk Term Insurance.

The National Service Life Insurance (NSLI) and Veterans' Special Life Insurance (VSLI) programs were subsequently enacted to meet the insurance needs of World War II and Korean War military personnel and veterans. Two additional Government-administered programs, Service-Disabled Veterans' Insurance (SDVI) and Veterans' Reopened Insurance (VRI), were established in 1951 and 1965, respectively, to provide coverage for certain classes of disabled veterans.

In 1965, the Servicemen's Group Life Insurance (SGLI) program was established to meet the insurance needs of Vietnam era military personnel. This program differs from previous offerings in that it is administered by the office of Servicemen's Group Life Insurance (OSGLI), through the

Prudential Insurance Company under a group policy issued to the Secretary of the Department of Veterans' Affairs. VA is responsible for supervising the management and administration of the SGLI program, as well as the Veterans' Group Life Insurance (VGLI) program which was established in 1974 to provide term insurance to veterans upon release from service.

The Veterans' Mortgage Life Insurance (VMLI) program was established to provide mortgage life insurance to certain disabled veterans at standard premium rates. From its inception in 1971 until September 1, 1988, VMLI was administered by Bankers Life Insurance Company of Nebraska and VA was responsible for the supervision of the management and administration of this program. On September 1, 1988, the responsibility for the administration of the VMLI program was transferred to VA under authority granted by Congress (PL-100-322).★

Contributed by Mike Mendoza, TVC Staff

Reporting Abuse & Financial Exploitation

As Veteran Counselors and Veteran Service Officers we interview and meet numerous people on a daily basis. These encounters take place in offices, hospitals, nursing homes, state institutions, and occasionally in the homes of our clients. We have recurring contact with the majority of the beneficiaries and this gives us an opportunity to observe changes in their appearance or behavior. Depending upon the persons disabilities, these changes may indicate abuse, neglect or exploitation of an elderly or disabled person.

Texas Law, Chapter 48, Title 2 of the Human Resource Code, requires any person who has knowledge of such situations to report the circumstances to the Texas Department of Human Services, Adult Protection Service. The identity of the person making the report is confidential. There is immunity from civil or criminal liability unless the person making the report acts in bad faith or with malicious intent. Adult Protective Service must start an investigation within 24 hours of the report. To make a report you may call the 24 hour toll-free hotline at ☎1-800-252-5400. To report abuse in a Nursing Home call the Texas Department of Human Services Long Term Care Regulatory at ☎1-800-458-9858.

The suspected abuse situation must be fully evaluated before reaching a conclusion. There are various indicators to gauge before making a report. These indicators encompass physical and mental abuse, clues from family members or caregivers, and evidence of financial exploitation. These indicators do not signify abuse per se but are clues and are thus helpful in assessing the client's situation. We file claims for veterans and family members and are well aware of their disabilities. The symptoms and conditions of their disabilities must be distinguished from the indicators of abuse. The effects of cancer could compare to physical abuses, which would include pallor, sunken eyes and cheeks, dehydration, malnourishment, bruises and ulcerations. Knowledge and a complete

review of the facts will aid in reaching a proper conclusion.

Physical indicators of abuse are clues that may be helpful in assessing the client's well being. The indicators discussed in this article are not all inclusive; other indicators may be present. These are the most obvious within the confines of our duties. A few of the indicators in the previous paragraph need clarification. Bruises are usually on both upper arms and are a mixture of new and old bruises. Ulcerations are sores caused by pressure points when the person is in one position for extended period of time. These sores do not easily heal. There may be poor skin hygiene and soiled clothing. Patches of hair may be missing or there could be hemorrhaging below the scalp. Other clues are cuts, lacerations, puncture wounds, welts, cigarette burns, chemical burns, friction burns and skin discolorations. There may be other injuries hidden beneath the clothing. The actual physical assessment should be accomplished by a physician or trained health practitioner. Counselors working in VA health facilities have immediate access to medical opinions. Whether a physician or trained health practitioner is available, the situation must be reported since the veteran could be in danger of further harm. The Adult Protection Service will take the necessary steps to evaluate the victim's situation.

In order for behavioral indicators to be valid, the indicators must be compared with the past performance of the involved person. Veterans experience many of these indicators because of their military and combat experiences. The behavioral indicators in themselves do not indicate abuse or neglect. These clues justify asking more questions and seeking additional information. Behavioral indicators include fear, withdrawal, depression, helplessness, resignation, implausible stories, confusion or disorientation, anger, denial, nonresponsiveness and anxiety. These indicators must be observed over a period of time since a particular event

not associated with abuse or neglect could trigger these indicators. Usually signs of physical abuse or financial exploitation will also be present.

Occasionally a family member, custodian or caregiver will accompany the veteran or family member to the office. This individual could provide clues of abuse or neglect to the veteran or family member. The client may not be given a chance to speak for him or herself. The veteran may not be given the chance to meet with you and others without their presence. The individual could have aggressive behavior which results in threats, insults and harassment to you or the client. There could also be signs of alcoholism or drug usage on the part of the responsible party. The veteran may be blamed for action he or she can't help, such as incontinence or confusion as deliberate acts. Obvious absence of assistance, attitudes of indifference, or anger toward the dependent person are vital signs to observe. There may be conflicting accounts of incidents by the family, caregiver and the victim. Usually there are signs of physical or mental abuse in association with these indicators.

Financial exploitation is always a possibility when the elderly or mentally infirmed is receiving a government benefit. There are many indicators of financial abuse and caution is advised when evaluating a possible abuse. A sure sign of financial abuse is if the veteran can't write and suddenly his checks and documents have signatures. It could also be a recent acquaintance expressing gushy undying affection for a 100% service-connected veteran who has been alone for a period of time. Suspicion should be aroused if a caregiver is more interested in the money the veteran receives than health care he or she may be entitled to, such as prosthetics or home health benefits. A custodian may refuse to spend money on the health care of a veteran in an emergency. A prime example is if a

(See Reporting Abuse . . . on Page 7)

What's New on the Internet?

DFAS Web Page

Retirees with access to the Internet can get the latest pay news from the Defense Finance and Accounting Service by accessing the DFAS home page, DFAS Lane. The World Wide Web address is <http://www.dfas.mil>

The daily update serves as a resource for DFAS customers and employees. The site houses the latest information on center initiatives as well as customer service information. The service is divided into eight sections:

- *Welcome* is a message from DFAS directory Richard F. Keevey and an introduction to DFAS Lane.
- *What's News* displays news releases, messages, speeches, additions to DFAS Lane and stories from the center's magazine, *DFAS: The DoD Accounting Firm*.
- In *Money Matters*, current military and civilian pay charts are available as well as general information on military, civilian, retired annuitant, garnishment and involuntary allotment pay.
- *Director's Initiatives* discusses the center's priorities.
- *People, Offices and Systems* gives information on DFAS key players, organizational breakdowns and computer systems.
- *Reference Library* has the DFAS acronym list, government information locator list, key forms and regulations.
- *Your Turn* is an interactive forum led by the DFAS director. Each issue of DFAS Lane offers a discussion topic for DFAS and its customers such as, "How to Cut Costs While Maintaining Superior Customer Service."
- *Link* provides links and addresses to other web sites of interest to DFAS Lane users.

Retiree comments on DFAS Lane can be e-mailed to DFAS's Cleveland Center at: dfaslane@cleveland.dfas.mil★

Info on Veterans Preference Available on the Internet

Veterans seeking federal government jobs can now determine if they are eligible for veterans preference on the Department of Labor's internet address.

By answering a series of "yes" or "no" questions, veterans can determine if they qualify for five or 10-point preferences, learn about special veterans' hiring authority authorized by the Office of Personnel Management (OPM), and how to file a complaint if they believe they have been denied veterans' preference.

The program also has connecting links to OPM hiring regulations authorizing legislation and personnel available to assist veterans in all aspects of employment.

Two versions of this program are available: an internet version which can be browsed on the World Wide Web and a PC version which can be downloaded, copied and run on any MS-Dos personal computer. The Internet address for the veterans' preference program is: <http://www.dol.gov/dol/vets/public/programs/programs/preference/main.htm>. It also appears under "What's New" on the Labor Department's home page.

By law, veterans who are disabled or who serve on active duty in the Armed Forces during specified time periods or in military campaigns are

entitled to preference over non-veterans in both federal hiring practices and in retention during reductions in force (RIFs).

Preference applies in hiring from civil service examinations, for most excepted service jobs and when agencies make temporary appointments or use direct hire and delegated examining authorities from OPM. Preference does not apply to promotions or other in-service employment actions.

The veterans' preference program was produced jointly by the Labor Department's Veterans' Employment and Training Service and the Office of the Assistant Secretary for Policy.★

Reporting Abuse . . . (Continued from Page 6)

veteran needs emergency care at night or weekend but the custodian brings the veteran to the clinic the next working day. The excuse could be that it's too expensive or it's VA's responsibility to provide care. There are other examples but these are the most common within our profession.

VA is also interested in the misuse of VA funds since the intent is to assist in daily living. VA will temporarily suspend benefits until it can be determined that the funds are being properly utilized. If the funds are being exploited, VA may

establish a custodian or change the custodian to correct the situation.

As Veteran Counselors and Veteran Service Officers we have the responsibility to defeat all unjust claims. We also have a moral and legal responsibility to report abuses that are being committed to the veteran or family member. If your not sure of what action to take, contact your supervisor or the adult protective service for advice. Don't let a bad situation get worse.★

Contributed by Anthony Moore, TVC Staff

Unauthorized Medical Claim

I. ELIGIBILITY

The unauthorized claims procedure allows the veteran, the veteran's representative, the hospital or clinic, etc., which provided the services, or persons other than the veteran who paid for the services from their personal funds to present a claim for payment of a medical service (inpatient, outpatient, travel) that was not authorized in advance. There are three criteria for payment of medical claims--all of which must be met before an unauthorized claim can be approved for payment. The three criteria are:

A. Care must have been rendered for:

1. Veterans adjudicated service-connected disability, or
2. An adjunct condition, or
3. For any condition of a veteran rated as P & T (permanent and total) due to a service-connected disability, or
4. For any condition in the case of a veteran who is found to be in need of vocational rehabilitation and for whom an objective has been selected or who is pursuing a course of vocational rehabilitation training and is medically determined to be in need of care of treatment for any reasons enumerated in CFR 17.47 (j) as follows:
 - a. To make possible his or her entrance into a course of training, or
 - b. To prevent interruption of a course of training, or
 - c. To achieve the goals of the program, or
 - d. To hasten the return to a course of training when a veteran is in interrupted or leave status, when cessation of instruction has become necessary because of illness, injury, or dental condition, or
 - e. To hasten the return to a rehabilitation program of a veteran in interrupted or leave status, or
 - f. Secure and adjust to employment during the period of employment assistance, or
 - g. To enable the veteran to achieve maximum independence in daily living, and
 - h. A medical emergency must have existed, and
 - i. VA facilities were not feasibly available.

II. FILING OF CLAIMS

A. Claims for payment or reimbursement of the expenses of services not previously authorized should be filed as follows:

1. Claims for the expenses of care or services rendered in the United States, including the Territories or possessions of the United States, should be filed with the Clinic Director of the VA facility designated as a clinic of jurisdiction which serves the area in which the care or services were rendered;
2. Claims for services rendered in the Republic of the Philippines should be filed with the VA Regional Office, Manila;
3. Claims for services rendered in Canada should be filed

with the VA Medical Center, White River Junction, Vermont;

4. Claims for services rendered in the Commonwealth of Puerto Rico should be filed with the VA Medical and Regional Office Center, San Juan, Puerto Rico; and
5. Effective October 1, 1994, foreign claim authorization and payments are being handled at the CHAMPVA Center, Denver, Colorado.

B. Who may file a claim:

1. The veteran or his representative, or
2. The provider of care, or
3. Any individual who paid for the services from his own personal funds.

C. A claim may be filed either before or after the provider of care has been paid.

D. Claims shall include the following information:

1. The claimant shall specify the amount claimed and furnish bills, vouchers, invoices, or receipts or other documentary evidence establishing that such amount was paid or is owed; and
2. The claimant shall provide an explanation of the circumstances necessitating the use of non-VA medical care, services, or supplies instead of VA care, services, or supplies, and
3. The claimant shall furnish other evidence or statements as are deemed necessary and requested for adjudication of the claim.

E. The claim process is initiated by submission of VA Form 10-583 (Claim for Payment of Cost of Unauthorized Medical Services). If a VA Form 10-583 is not submitted, the claim should be returned with a letter explaining the specific criteria for approval of an unauthorized claim. The claimant should be provided VA Form 10-583 in the event he/she would like to submit a claim. Instructions on the claim form are self-explanatory.

F. Claims for payment or reimbursement of the expenses of medical care for services not previously authorized must be filed within the following time limits:

1. Within two years after the date the care or services were rendered (Note: In the case of continuous care, payment will not be made for any part of the care rendered more than two years prior to filing claim.); or
2. In the case of care or services rendered prior to VA adjudication allowing service-connection:
 - a. The claim must be filed within two years of the date the veteran was notified by VA of the award of service-connection;

(See Medical Claim . . . on Page 9)

VA Issues 2.25 Million ID Cards

Card Includes Bar Code and Magnetic Stripe

Last November, the U.S. Department of Veterans Affairs (VA) rolled out its new Veterans Universal Access Identification Card. The embossed plastic card includes a digitized black and white photo image, a Code 39 bar code, and a magnetic stripe as well as human-readable printed information. Around 2.25 million veterans will use the card to access healthcare at VA medical centers.

Both the bar code and magnetic strip contain the veteran's social security number. Since 1970, the SSN has functioned as an ID number at VA. The mag stripe also includes date of birth, period and information on a veteran's service-related disability. Some cards will be marked "service connected" or "POW" in human-readable characters beneath the photo. Vets who were injured on active duty or who were POWs receive priority care at VA.

When the card is scanned or read, demographic information in a hospital's

information system will be automatically transferred to the registration workstation.

Previously, the registering clerk would manually enter the last four numbers of the SSN. This would often pull up more than 10 different records, according to Chaz Kastel, Chief of Medical Administration Services at the Ralph H. Johnson Veterans Affairs Medical Center in Charleston, South Carolina. His medical center was one of six that tested the card between February and September 1996.

The digitized photograph captured at the time of issuance will also be stored in the patient's record, allowing VA to transmit photos to other government agencies to aid in identification of missing or unknown persons. Long term plans call for using the cards in a variety of automated systems to help VA improve service, reduce costs and fight abuse.

DataCard won the card contract, worth \$7.2 million according to a VA spokesperson. It calls for delivery of 300 ID card systems including 8,300 readers and 2,250,000 ID cards. The system includes the company's QuikWorks image capture station and the DataCard 280 series card personalization system. Clerical staff will swipe veterans' cards through DataCard 110 card readers to instantly retrieve up-to-date patient information from a central database. There are plans to implement the cards with providers and other authorized personnel to control access to confidential patient information.

Including dependents, nearly one-third of the nation's population are potentially eligible for VA benefits. VA's medical facilities constitute the largest medical system in the country with facilities in all 50 states, including hospitals, nursing homes, domiciliaries, outpatient clinics and regional benefit offices.★

The "Outstanding VA Employee of the Month" selected for April 1997 is **Florine Sasser, Claims Clerk at the VA Medical Center Compensation and Pension Clinic in Houston, Texas.**

Florine started her career at the Medical Center in Houston as a File Clerk in April 1982. In 1988, she moved to the position of Clerk at the Outpatient Clinic. This is where she began to excel, as she is very people orientated. In 1990, she moved to the Compensation and Pension Clinic. Her duties include scheduling Compensation and Pension exams, Aid & Attendance exams, the special exams, i.e., Agent Orange, Ionized Radiation, POW, and Persian GulfWar exams.

Every year since 1991, Florine has been recognized by VA for her special achievements. She is the recipient of five Special Achievement Awards and one Outstanding Achievement Award.

Florine has always been an asset to the Compensation and Pension Clinic, as well as the Texas Veterans Commission in making referrals to us. The VA staff and the Texas Veterans Commission staff alike find her manner friendly and professional. The Texas Veterans Commission is proud to name Florine Sasser as the "Outstanding VA Employee of the Month" for April 1997.★



Attorney General Letter

In February, 1997, Mr. Samuel Bier, TVC Chairman, received a letter regarding written legal opinions affecting veterans in the State of Texas from the Texas Attorney General Dan Morales. General Morales issued Opinion No. DM-422 regarding veterans' employment preference. The General also issued Letter Opinion No. 96-090, which responded to the Texas Higher Education Coordinating Board's request concerning Persian Gulf War veterans' eligibility for exemption from dues, fees and other charges at a state institution of higher learning. The General also responded to a request for clarification of Letter Opinion No. 96-090 made by the Texas Veterans Commission and to a request by former State Representative Doyle Willis for reaffirmation of intent of a law written by Willis requiring separate and distinct offices for county veteran services officers. As a result of that request, the General issued Letter Opinion 96-127.

Below is an excerpt from the Attorney General's letter to Mr. Bier, dated February 21, 1997.

Dear Mr. Bier:

In 1996 my office was asked by the Commissioner of the Texas Department of Mental Health and Mental Retardation to clarify questions regarding a state law which requires that veterans be given hiring and retention preferences for state employment. In response to that request, we issued Attorney General Opinion No. DM-422. The opinion recognized that, while the language emphasized in the law makes clear that the preference established is by no means absolute and cannot be used to grant preference over more qualified employees who are not veterans, it underscores that veterans are to be preferred when selection and retention choices are among similarly qualified and similarly situated employees.

Also, late last year my office provided an official Attorney General's Letter Opinion to the Texas Higher Education Coordinating Board regarding Persian Gulf War veterans' eligibility for exemption from dues, fees and other charges at a state institution of higher learning. Specifically, the Coordinating Board asked my office to interpret whether Section 54.203(a) of the Education Code applies to individuals from reserve components of our armed forces who served in the Persian Gulf War and were honorably separated from active duty but not discharged from the reserve. This section exempts certain honorably discharged veterans from paying various fees to an institution of higher education.

In Letter Opinion No. 96-090 we responded to the Coordinating Board that Persian Gulf War reservists who have been honorably separated from active duty are eligible for the exemption. The reservist must, of course, satisfy other requirements, such as residency, to actually receive the exemption.

In September we were asked by the Texas Veterans Commission to determine if our interpretation in Letter Opinion No. 96-090 applied to all veterans covered by Section 54.203(a)(4) of the Education Code. That section reads as follows:

(4) all persons who were honorably discharged from the armed forces of the United States after serving on active military duty, excluding training, for more than 180 days and who served a portion of their active duty during:

(A) the Cold War which began on the date of the

termination of the national emergency cited in Subdivision (3) of this subsection;

- (B) the Vietnam era which began on December 21, 1961, and ended on May 7, 1975;
- (C) the Grenada and Lebanon era which began on August 24, 1982, and ended on July 31, 1984;
- (D) the Panama era which began on December 20, 1989, and ended on January 21, 1990;
- (E) the Persian Gulf War which began on August 2, 1990, and ends on the date thereafter prescribed by Presidential proclamation or September 1, 1997, whichever occurs first; or
- (F) any future national emergency declared in accordance with federal law.

In its request, the Veterans Commission explained that the Coordinating Board had interpreted Letter Opinion No. 96-090 to apply only to Persian Gulf War veterans. In Letter Opinion No. 96-097, we responded to the question raised by the Veterans Commission by concluding that "All veterans honorably separated from active duty during the periods enumerated in section 54.203(a)(4) of the Education Code, and not only those who fall under section 54.203(a)(4)(E), are eligible..." We believe all veterans honorably separated from active duty during the periods enumerated in Section 54.203(a)(4) are eligible for the exemptions even if they remain active as reservists, so long as they meet the statutory requirements.

In another matter affecting Texas veterans, my office was asked by then State Representative Doyle Willis to reaffirm the intent of a law he wrote and passed requiring "separate and distinct" offices for certain county veteran service officers. Specifically, he asked whether it was appropriate for a certain county commissioners court to house its veterans service office with its Department of Housing and Human Services. In the request, we were asked to determine the extent the legislature intended the Veterans County Service Office ("VCSO") to be separate and distinct from other county offices. In considering this question, we looked at Section 434.032 of the Government Code which provides:

(a) In a county with the population of 200,000 or more, the

(See "Attorney General Letter" . . . on Page 13)

Disabled Veterans' Families Can Receive Aid for Training Under the Provisions of Chapter 35

Education and training benefits are available to children, spouses or surviving spouses of veterans who died of service-connected disability or veterans who are rated 100 percent, permanent and total from a service-connected disability, or who were permanently and totally disabled from service-connected disability at the time of death.

For the purpose of benefit, permanent and total disability excludes total ratings or other temporary ratings but does not exclude total ratings based on individual unemployability if permanent. Education and training benefits also are available to the spouse or children of a member of the Armed Forces who is currently rated by the secretary of the parent service concerned to be in the following categories for a total of more than 90 days:

- ◆ Missing in action;
- ◆ Captured in line of duty by a hostile force; or

- ◆ Forcibly detained or interned in line of duty by a foreign government.

Entitlement ceases as soon as official notice is given that the member of the Armed Forces is no longer listed in the above categories.

There is no limit to the number of children in each family eligible for training benefits. Each child will be allowed a maximum of 45 months training except that any training received under any other law administered by the Department of Veterans Affairs will be deducted from the total entitlement, except where a child has also earned entitlement to his own right under the Montgomery GI Bill. Entitlement utilized cannot exceed 48 months.

Spouse and surviving spouse will be allowed training to a maximum of 45 months. The period of eligibility cannot exceed 10 years. However, where it is found that a spouse or surviving spouse was prevented by a physical or mental

disability, not the result of his/her own willful misconduct, from initiating or pursuing a program of education during the eligibility period, an extension may be granted.

Training for a child generally must be completed by age 26. There are certain exceptions to the maximum age limitation but under no circumstances will any training be afforded beyond the child's 31st birthday. Marriage by a child is not a bar to educational benefits.

A spouse's entitlement ceases upon termination of the relationship to the veteran by divorce. However, if enrolled at the time of the termination of his/her relationship, he/she could continue until the end of the semester or to the end of the course, or until 12 weeks have expired, whichever is earlier, if the spouse is without fault. A surviving spouse's entitlement terminates on the last day of attendance in school before remarriage.★

*Contributed by Dan Garcia
Taylor County Service Officer*

Attorney General Letter . . . (Continued from Page 12)

commissioners court shall maintain a veterans county service office. The office must be:

- (1) separate and distinct from other county offices; and
- (2) staffed by at least one full-time employee.

Since 1963 all counties have been authorized to maintain and operate a VCSO. The commissioners' court of a county may determine whether such an office is a public necessity for those residents who have served in the armed forces to obtain the benefits to which they are entitled. In 1985, however, all counties with a population of 200,000 or more were mandated by the legislature to maintain and operate a VCSO "separate and distinct from other county offices..."

Prior to the enactment of the mandatory statute, some counties were combining

their Veterans Service Office with their welfare (or other county related) offices. Research of legislative history reveals that House Bill 895 by Willis, enacted by the 69th Legislature, added the language to state law that made it mandatory for a VCSO to be "separate and distinct" from other county offices. Testimony at the legislative committee hearing on House Bill 895 revealed that one county, for example, placed the VCSO under its public assistance department and added to the duties of the Veterans County Service Officer, making the officer responsible for attending to the needs of recipients of public assistance, as well as veterans.

During those proceedings a committee member observed that with the type of office space provided, no one could find the VCSO, and that having a separate and distinct office would help locate it. The author of the bill stated that a

person should be able to look up the VCSO in the telephone book. Thus, the legislature adopted the requirement of a "separate and distinct" VCSO to maintain its unique identity and to enable veterans to locate it by name.

As a result of our research, we believe that section 434.032(a)(1) requires that the VCSO be administratively and physically distinct from other county offices in order to assist veterans in identifying and locating it. Accordingly, Letter Opinion No. 96-127 concludes: "A Veterans County Service Office in a county with a population of 200,000 or more must be located in an office that is "separate and distinct" from other county offices. The Veterans County Service Officer should have a sufficient degree of physical separation from other county departments and officials to enable veterans to identify and locate him or her."★

GI Bill Benefits Opening for VEAP Plan Enrollees

Tens of thousands of service members who enrolled in VEAP, a veterans education program offered to people who entered the military from 1977 to 1985, soon will be able to buy into the more generous Montgomery GI Bill.

VEAP participants on active duty as of October 9, 1996, the day President Clinton signed Public Law 104-275, can more than double the value of their veterans education benefits, if some benefits remain.

More than 70,000 active duty members might be eligible. But government lawyers still are grappling with how to interpret the term "VEAP participant" as it appears in the law. The decision will determine how many VEAP enrollees still are under that program. One group clearly will remain under VEAP: 100,000 program enrollees who separated from the service or retired before October 9, 1996.

VEAP, the post-Vietnam era Veterans Educational Assistance Program, was offered to persons who entered service for the first time from January 1, 1997 to June 30, 1985.

Enrollees contributed up to \$2,700 to a special VEAP account while on active duty. When they tap the account to pay for their education, the government adds \$2 in benefits for every \$1 withdrawn. The maximum value of the government-provided benefit, therefore, is \$5,400. Combined with the member's contributions, a full VEAP participant

has \$8,100 to spend on 36 months of college or trade school.

The package pales in comparison to the Vietnam-era G.I. bill. Only one of four VEAP eligibles enrolled. For more than nine years, however, it was the only education benefit offered to military volunteers. Representative C.V. Montgomery (D-MS) sponsored a better veterans education package, but it didn't help 175,000 VEAP enrollees. The Montgomery GI Bill was offered only to persons who entered service on or after July 1, 1985.

This year the House Veterans Affairs Committee decided to make amends allowing at least some service careerists to close out their VEAP accounts and buy into the Montgomery plan. That too requires member contributions. But in return for only \$1,200, participants get up \$15,403 in benefits. (The figure reflects an October 1 increase in G.I. Bill benefits).

According to the Defense Manpower Data Center, roughly 75,000 VEAP enrollees remain on active duty. Most have more than 10 years service but fewer than 20. But how many are VEAP "participants" and referred to in the law? The quirky nature of VEAP has forced the Pentagon and VA to turn to the legal staffs for a decision.

Here's why: Under VEAP, money contributed by members goes into a VA-

administered account—and there it sits. It earns no interest. But the same rules allow service members to withdraw any and all money contributed to VEAP, and invest instead in stocks, bonds or interest-bearing accounts. If they still want to use VEAP benefits, members can replenish their accounts before separation or retirement.

Service education officials have been advising VEAP enrollees to do just that for years. But, are VEAP enrollees with zero account balances still VEAP participants?

Indeed, as Congress put finishing touches on the VA legislation, word spread among some VEAP enrollees that they should return a token amount to their accounts to ensure eligibility. It must have spread fast. Only 3,300 VEAP enrollees, about four percent, had empty accounts according to government data.

Staffers on the House committee where the legislation originated said they told the Pentagon to interpret the legislation broadly, so as many active duty members as possible have a chance to use the Montgomery G.I. Bill.

If that happens, the Air Force believes it has about 32,000 eligibles. Rough estimates for the other services are Army, 24,000; Navy, 14,000; Marine Corps, 2,000; and the Coast Guard a few hundred. ★

Protection of Rating Evaluations

The Department of Veterans Affairs (VA) is in the process of revising sections of the Rating Schedule.

It should be kept in mind that Public Law 102-86 provides that rating evaluations cannot be reduced solely because of changes in the Rating Schedule. To reduce an evaluation, sustained improvement in the veteran's disability must be shown to have occurred.

If a claim for increased evaluation is reviewed after a change in rating criteria, the rating specialist is obligated to determine whether the current evaluation would be continued under the prior criteria. That evaluation cannot be reduced unless the veteran's condition improved enough to have required reduction under the prior criteria. The disability would be rated under the new criteria if a higher evaluation will result. ★

Contributed by Jerry Goode, TVC Staff

Veterans Benefit Improvement Act of 1996 (S-1711)

Survivors' Benefits

The new bill was activated on January 7, 1997, and will allow the surviving spouse an entire monthly compensation or pension payment for the month in which the veteran dies.

Increase in Accrued Benefit Payable to Surviving Spouse

This bill would authorize an increase in payments of accrued benefits for survivors from one year to two years in the case of a veteran dying prior to adjudication of the claim. The reason for this is that the provision recognizes the increased amount of time it takes the VA to process a claim.

Expansion of Vietnam Era

The new dates for the Vietnam Era is from February 28, 1961 to May 7, 1975. The reason for this is the American Forces began participating in combat field operations with South Vietnamese Forces. The bill further included eligibility for Agent Orange Benefits to those serving in Vietnam on or after January 9, 1962, the date in which the use of herbicides began. ★

Contributed by Vincent Morrison, TVC Staff

"TOWN HALL" MEETING CONCERNING GULF WAR ILLNESSES

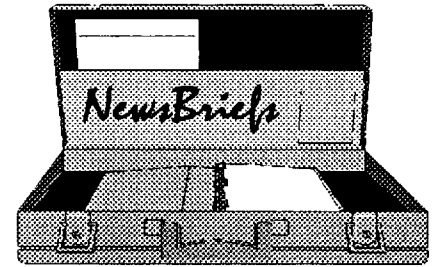
The U.S. Department of Defense
will hold "Town Hall" meeting
concerning
Persian Gulf War Illnesses

★ ★ ★

April 29, 1997
7:00 p.m.
VFW Post 5076
1906 East Miller Rd.
Garland, Texas

★ ★ ★

For further information, contact:
Charlie Cannon at ☎(972) 278-5821



BVA AWARDING 12 \$2,000 SCHOLARSHIPS

The Blinded Veterans Association will award 12 \$2,000 scholarships for the 1997-98 academic year under its Kathern F. Gruber Scholarship Program.

Dependent children and spouses of blinded U.S. military veterans are eligible. The veteran, who need not be a BVA member, must be legally blind; the blindness may be service-connected or nonservice-connected.

Applications may be obtained from: Kathern F. Gruber Scholarship Program, Blinded Veterans Association, 477 H St., NW, Washington, DC 20001-2694. Completed applications and supporting materials must be returned to the BVA no later than April 18, 1997. Scholarships are limited to four per individual. ★

NOTES FROM CHAMPVA

Participants of CHAMPVA should be aware that as of February 1, 1997, when requesting reimbursement for prescriptions, they are required to submit the actual receipt for the cost of the prescription. The address for claims is: CHAMPVA Center, P.O. Box 65023, Denver, Colorado 80206-5023. You may contact the center toll-free at ☎1-800-733-8387. ★

SBP NOTE

If you have ever been a participant in the Survivor Benefit Plan, contact the Defense Finance Accounting Service-Cleveland Center in writing immediately upon your beneficiary's death, your remarriage or divorce or when you acquire another child.

If you had no spouse or child when you retired, you may elect SBP coverage within the first year after gaining either.

Send a copy of the appropriate document to DFAS-CL/FR, P.O. Box 99191, Cleveland Ohio 44199-1126. You may also contact the Cleveland Center toll-free at ☎(1-800-321-1080; or by FAX at 1-800-469-6559. DFAS is also on the Internet. See related article on Page 7 of this *Journal*. ★

**FOR
IMMEDIATE
RELEASE**



Discount Point Limitation

According to _____, Veterans County Service Officer for _____ County, the Department of Veterans Affairs (VA) has published final regulations that limit to two the number of discount points that may be included in VA interest rate reduction refinancing loans. Such loans are used to refinance and lower the interest rate on existing VA-guaranteed home loans.

The rule helps ensure veterans are not overcharged with excessive points and protects the government against the danger of overinflated loans. According to VA officials, the high number of points added to the loan might have resulted in a new loan amount substantially in excess of the value of the property.

When trying to sell the property, veterans in many cases found they were not able to get a high enough sales price to pay off the loan balance, placing VA at a financial risk.

While some loans may have reduced veterans' interest rates and created lower payments, the reductions were not as much as they would have been had veterans not been charged excessive points.

Early last year, VA became aware that some refinancings showed unusually high discount points in relation to the interest rate charged, and asked lenders to comply voluntarily with the two-point limitation, followed by an interim final rule making the ceiling mandatory on a temporary basis. The final rule became permanent with the January 24 publication.

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1997 Spring Conference Schedule

HOUSTON

April 1 - 3, 1997

Adam's Mark Hotel
2900 Briarpark Drive
Houston, Texas 77042
(713) 978-7400

Room Rate: \$55.00 - Single
\$70.00 - Double

Cut Off Date: March 17, 1997

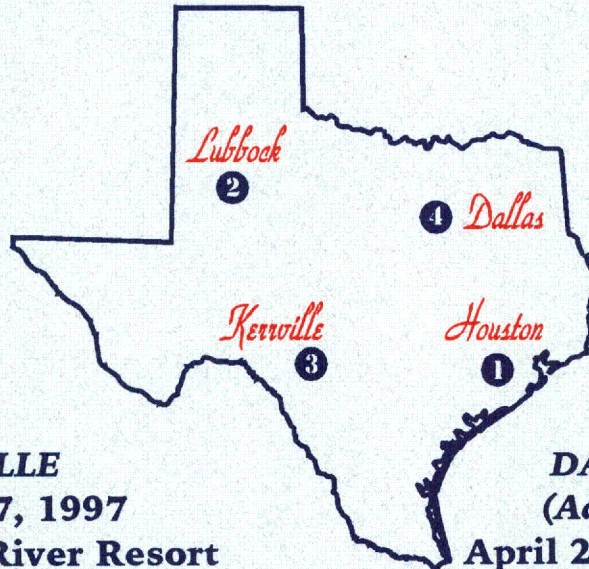
LUBBOCK

April 9-11, 1997

Barcelona Court
5215 South Loop 289
Lubbock, Texas 79424
(806) 794-5353

Room Rate: \$55.00 - Single
\$65.00 - Double

Cut Off Date: March 25, 1997



KERRVILLE

April 15 - 17, 1997

Inn of the Hills River Resort
1001 Junction Highway
Kerrville, Texas 78028
(210) 895-5000

Room Rate: \$55.00 - Single
\$63.00 - Double

Cut Off Date: March 24, 1997

DALLAS

(Addison)

April 22-24, 1997

Harvey Hotel - Addison
14315 Midway Road
Dallas, Texas 75244
(972) 980-8877

Room Rate: \$55.00 - Single
\$75.00 - Double

Cut Off Date: April 1, 1997

The above dates are actual meeting dates
and do NOT include any travel dates.

Texas Veterans Commission
P.O. Box 12277
Austin, Texas 78711
(512) 463-5538
(FAX) 512-475-2395

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