

119th NATIONAL CONVENTION
COMMANDER-IN-CHIEF RESOLUTIONS

NATIONAL SECURITY & FOREIGN AFFAIRS COMMITTEE
NATIONAL POW/MIA SUBCOMMITTEE

- 401 END SEQUESTRATION
- 402 OPPOSE TRICARE FEE CHANGES
- 403 KEEP DEFENSE BUDGET RELEVANT
- 404 PRESERVE THE ALL-VOLUNTEER FORCE
- 405 LINK MILITARY PAY INCREASES TO PRIVATE-SECTOR INCREASES
- 406 INCREASE AND EXTEND TSP MATCH
- 407 SEXUAL ASSAULT INCIDENT REPORTING AND TREATMENT
- 408 ENSURE DOD COMPLIANCE WITH TAP MANDATE
- 409 ESTABLISH THE ARMED FORCES UNIVERSITY
- 410 SUPPORT STABILITY AND RELIEF FOR MILITARY FAMILIES
- 411 PROVIDE FULL CONCURRENT RECEIPT OF MILITARY RETIREMENT PAY
AND VA DISABILITY COMPENSATION
- 412 REVISE UNFAVORABLE DISCHARGE REVIEW PROCEDURES
- 413 REPEAL SBP/DIC OFFSET
- 414 PROVIDE EQUITY IN BENEFITS TO ALL RESERVE COMPONENT MEMBERS
- 415 SUPPORT THE REPUBLIC OF CHINA ON TAIWAN
- 416 SUPPORT THE REPUBLIC OF KOREA
- 417 SUPPORT THE STATE OF ISRAEL
- 418 PROTECT POW/MIA FULL ACCOUNTING MISSION FUNDING
- 419 CALL FOR MORE UNILATERAL POW/MIA ACTIONS BY VIETNAM

VETERANS SERVICE COMMITTEE

- 601 ADEQUATE DEPARTMENT OF VETERANS AFFAIRS BUDGET
- 602 VA PHARMACEUTICAL CO-PAYMENTS
- 603 COMPETITIVE REIMBURSEMENT RATES FOR VA AND DOD HEALTH CARE
PROGRAMS
- 604 VA MEDICARE AND TRICARE REIMBURSEMENT
- 605 CONSIDER TREATMENT FOR A PRESUMPTIVE SERVICE CONNECTED CONDITION
AS A CLAIM FOR VA COMPENSATION
- 606 EXTENDING GULF WAR PRESUMPTIONS AND HEALTH CARE BEYOND 2021 AND
TO AFGHANISTAN THEATER VETERANS
- 607 NURSING HOME ELIGIBILITY
- 608 TRAUMATIC BRAIN INJURY HEALTH CARE
- 609 PTSD AND MENTAL HEALTH CARE
- 610 VA HEALTH CARE FOR WOMEN VETERANS
- 611 EXPAND VA CAREGIVER BENEFITS
- 612 SUSTAINABLE COMMUNITY CARE OPTIONS FOR VETERANS
- 613 IMPROVE VA & DOD POLICIES AND PROCEDURES FOR HEPATITIS B
- 614 EXTEND SERVICE CONNECTION PRESUMPTION TO BLAST SURVIVORS
- 615 TINNITUS AND HEARING LOSS PRESUMPTIVE SERVICE CONNECTION
- 616 HEARING LOSS COMPENSATION
- 617 VA CLAIMS WORKLOAD
- 618 IMPROVE EDUCATION BENEFITS FOR SURVIVORS

Resolution No. 601

ADEQUATE DEPARTMENT OF VETERANS AFFAIRS BUDGET

WHEREAS, there are about 20 million living veterans; and

WHEREAS, more than 3.3 million men and women have served in support of the Global War on Terrorism; and

WHEREAS, VA anticipates that enrollment in the Veterans Health Administration will grow to nearly 9.5 million veterans and more than 8.76 million of those veterans will be seen by VA for health care service; and

WHEREAS, veterans use VA for numerous other benefit programs including nearly 1 million veterans in education programs, over 132,000 veterans enrolled in Vocational Rehabilitation and Employment, nearly 3 million home loan participants, and over 6 million insurance policies worth more than \$1 trillion dollars; and

WHEREAS, the complexity of conditions that veterans which receive VA health for care will add demands to the system for years to come; and

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

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the Congress of the United States authorize appropriations for the Department of Veterans Affairs which fully fund and maintain the integrity and enhancement of veteran entitlement programs and health care system.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 602

VA PHARMACEUTICAL CO-PAYMENTS

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

WHEREAS, there have been repeated proposals to change VA pharmaceutical co-payments, placing an undue hardship on many veterans; and

WHEREAS, the increase in costs of the benefit would likely place an undue burden on veterans, limit access to earned benefits, and serve to inequitably balance the federal budget on the backs of veterans; and

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

WHEREAS, VA is required by current law to charge veterans for life saving preventive medicines which are cost-free under private sector insurance and other public health care options; now, therefore

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

BE IT FURTHER RESOLVED, that Congress must exempt preventive medicines from VA pharmaceutical co-payment requirements.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 603

**COMPETITIVE REIMBURSEMENT RATES FOR
VA AND DOD HEALTH CARE PROGRAMS**

WHEREAS, the reimbursement private sector health care providers receive from VA's CHAMPVA health care program is less than the reimbursements paid by private health insurance; and

WHEREAS, the reimbursement private sector health care providers receive from the Veteran Choice Program is tied by law to Medicare's allowable charges; and

WHEREAS, the reimbursement private sector health care providers receive from TRICARE is tied by law to Medicare's allowable charges; and

WHEREAS, private medical providers have elected not to participate in CHAMPVA, the Veterans Choice Program, and TRICARE networks because of the limited reimbursement rates; and

WHEREAS, 100 percent disabled veterans and retired military personnel rely on VA and DOD health care programs for their health care needs, and limited reimbursement rates prevent veterans and their dependents from accessing medical treatment and care; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we support legislation and regulations authorizing reimbursement rates for VA and DOD health care programs and other programs, which provide medical care for retired and disabled veterans to be competitive with private health insurance.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 604

VA MEDICARE AND TRICARE REIMBURSEMENT

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

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

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

WHEREAS, VA medical care collections are used to supplement the appropriations VA receives from Congress to deliver efficient and effective health care at a lower cost than private sector health care providers; and

WHEREAS, with the increased demand on its health care system, it is now absolutely essential that VA be authorized to collect federal dollars to supplement its annual appropriations to ensure adequate funding for the Veterans Health Administration; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we support enactment into law of legislation authorizing VA to receive reimbursement for the cost of non-service connected care that is provided to veterans who are enrolled in Medicare or TRICARE.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 605

**CONSIDER TREATMENT FOR A PRESUMPTIVE SERVICE
CONNECTED CONDITION AS A CLAIM FOR VA COMPENSATION**

WHEREAS, many service members have suffered from diseases that are recognized to be presumptive; and

WHEREAS, veterans suffering from diseases which include many types of cancer, as well as diabetes and other chronic diseases, may not be aware that they may be eligible for service connection, even if they are being treated in a VA facility; and

WHEREAS, many VA medical facilities are not currently staffed or equipped to provide appropriate counseling to veterans or their families on how to file a claim for service connected benefits; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to enact legislation requiring that treatment by the Department of Veterans Affairs (VA) for a condition or disease recognized as presumptively service connected will be considered to be an informal claim for service connection for compensation purposes.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 606

EXTENDING GULF WAR PRESUMPTIONS AND HEALTH CARE BEYOND 2021 AND TO AFGHANISTAN THEATER VETERANS

WHEREAS, many service members have served and continue to serve in the Afghanistan theater of operations since the start of Operation Enduring Freedom; and

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

WHEREAS, Afghanistan was not considered part of the Southwest Asia theater of operations during Operation Desert Storm and VA did not include Afghanistan in the Southwest Asia theater of operations after September 11, 2001; and

WHEREAS, veterans of Afghanistan are suffering from similar undiagnosed conditions as those who have served in the Southwest Asia theater of operations; and

WHEREAS, the authority to extend presumptions to all Southwest Asia theater veterans is set to expire on December 31, 2021; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress and the VA to support research to verify whether service members who served in Afghanistan are subjected to the same environmental hazards as those who served in Iraq, so that appropriate benefits, including eligibility for compensation based on undiagnosed illnesses, and medical care eligibility, will be provided retroactive to the beginning of Operation Enduring Freedom; and

BE IT FURTHER RESOLVED, that while research is ongoing, allow veterans who served in the Afghanistan theater of operations access to the Gulf War Registry Health Exam; and

BE IT FURTHER RESOLVED, that VA must permanently extend presumptive disability compensation benefits for Gulf War veterans to ensure all service members who serve in Southwest Asia theater of military operations are afforded this protection.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 607

NURSING HOME ELIGIBILITY

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

WHEREAS, current VA regulations extend VA eligibility for nursing home care to those veterans who are service-connected at 70 percent or above or those seeking nursing home care for a service-connected disability; and

WHEREAS, the demand for VA nursing home care is increasing as the veteran population continues to age; and

WHEREAS, VA nursing home care units are VA hospital-based and provide an intensive and extensive level of nursing home care supported by the clinical specialties and other services within the host hospital; and

WHEREAS, VA nursing home care is considered the “safety net” for VA outpatient services such as residential care, respite care, hospital-based home care, adult day health care, homemaker/home health aid services and other extended care programs; and

WHEREAS, VA, through their own statements, recognizes the difference in eligibility for nursing home care and inpatient hospital care as inconsistent with the principles of sound medical practice, which support continuity of care for veterans; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to establish a standard VA nursing home entitlement for all veterans.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 608

TRAUMATIC BRAIN INJURY HEALTH CARE

WHEREAS, since 2000, 370,688 service members have sustained Traumatic Brain Injury (TBI) including those who served in the wars in Iraq and Afghanistan; and

WHEREAS, veterans with blast injuries, blunt trauma, motor vehicle accidents, and falls are at risk for TBI which often goes unrecognized; and

WHEREAS, even patients with mild TBI (mTBI) may have long-term health consequences; and

WHEREAS, veterans with severe TBI require a lifetime of intensive services to care for their injuries, yet many VA medical facilities are neither properly staffed nor equipped to provide the necessary screening and comprehensive health care services veterans suffering from TBI require; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to provide sufficient funding to the Department of Veterans Affairs to ensure that appropriate screening, diagnostic services, treatment and life-long case management services are available to every veteran suffering from conditions associated with blast injuries, blunt trauma, motor vehicle accidents, and falls are at risk for TBI; and

BE IT FURTHER RESOLVED, that we urge the Secretary of Veterans Affairs to improve research pertaining to screening methods, diagnostic tools, and treatment of conditions associated with blast injuries, blunt trauma, motor vehicle accidents, and falls are at risk for TBI to ensure veterans who have experienced a TBI receive effective health care.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 609

PTSD AND MENTAL HEALTH CARE

WHEREAS, the Department of Veterans Affairs (VA) has indicated that treating Post Traumatic Stress Disorder (PTSD) and providing Mental Health Care among returning war veterans is one of its highest priorities, and the VA operates a nationwide network of nearly 200 specialized PTSD outpatient treatment programs; and

WHEREAS, the early and accurate screening, diagnosis and treatment for PTSD, depression, substance use, and other mental health disorders, yields optimal patient outcomes, and statistics have shown that these conditions, left untreated or poorly treated, can lead to increases in suicide attempts or death by suicide among a host of other negative consequences; and

WHEREAS, a total of 405,915 Iraq, and Afghanistan Veterans were seen for potential PTSD at VA facilities following their return from these overseas deployments as of March 31, 2015; and

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

WHEREAS, available research has not sufficiently evaluated the clinical effectiveness of treatment programs for veterans diagnosed with and/or suffering from the effects of traumatic brain injuries, PTSD, or other mental health conditions, and adequate research into the brain's response to internal and external influences that could result in mental illness has yet to be undertaken; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we strongly urge the Department of Veterans Affairs to continue to adequately staff VA mental health treatment and research programs; and

BE IT FURTHER RESOLVED, that we urge Congress to dedicate adequate resources to address the alarming rate at which Veterans commit suicide.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 610

VA HEALTH CARE FOR WOMEN VETERANS

WHEREAS, more than 447,000 women veterans received VA health care in 2015, which is a 123 percent increase from 2013, and female veterans are higher users of primary and mental health services than their male counterparts; and

WHEREAS, VA estimated that women veterans as a percentage of veterans using VA health care will continue to grow, making it essential that VA continue to staff and equip its medical facilities to meet their specific health care needs; and

WHEREAS, women veterans have reported that VA staff continue to confuse them for spouses or caregivers and even challenge their veteran status; and

WHEREAS, women veterans also reported concerns regarding the gender specific competencies of VA health care professionals; and

WHEREAS, VA reported in 2015 that 66 percent of women veterans are assigned to a Designated Women's Health Provider (DWHP), who have experience and training in women's health care; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we acknowledge VA has improved the care and services it provides women veterans, but we urge VA to continue to monitor and enhance health care services available to women veterans at all VA medical facilities and expand its designated women's health program to mental health care to ensure veterans have access to mental health care providers who understand women-specific mental health conditions; and

BE IT FURTHER RESOLVED, that we urge the Secretary of Veteran Affairs to improve outreach to older women veterans, allow women to choose the gender of their VA health care providers and properly train VA's workforce to treat women veterans with the respect and dignity they have earned and deserve.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 611

EXPAND VA CAREGIVER BENEFITS

WHEREAS, the Department of Veterans Affairs Comprehensive Assistance for Family Caregivers Program provides a monthly stipend, respite care, mental and medical health care, and necessary training and certifications for caregivers of veterans who were severely injured on or after September 11, 2001; and

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

WHEREAS, the VFW believes that severely disabled veterans of all conflicts have made incredible sacrifices, and all family members who care for them are equally deserving of our recognition and support; and

WHEREAS, it is arbitrary and unjust that veterans who were severely disabled prior to September 11, 2001 are ineligible for the Comprehensive Assistance for Family Caregivers Program; and

WHEREAS, the Department of Defense provides support to family caregivers of members of the armed forces who are catastrophically disabled through its Special Compensation for Assistance with Activities of Daily Living (SCAADL) program, which includes disability caused by illnesses in its eligibility criteria; and

WHEREAS, the VA Comprehensive Assistance for Family Caregivers Program excludes veterans who require home caregiver services as a result of serious illnesses; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to expand eligibility for the VA Comprehensive Assistance for Family Caregivers Program to include veterans of all eras; and

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

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 612

SUSTAINABLE COMMUNITY CARE OPTIONS FOR VETERANS

WHEREAS, members of the Veterans of Foreign Wars of the United States are generally satisfied with the health care they receive from VA and believe the VA health care system must be improved to ensure all veterans have timely access to high quality care; and

WHEREAS, the VFW has collected and evaluated direct feedback from veterans regarding their options, preferences and expectation when receiving health care; and

WHEREAS, the VFW has consistently worked with Congress and VA to improve the health care VA provides our nation's veterans through innovative community care programs to ensure veterans have a seamless experience receiving health care from VA, whether it is at VA medical facilities or through private sector health care providers; and

WHEREAS, VA and Congress have indicated that they intend to reform VA community care programs to expand access to private sector providers for veterans who use the VA health care system; and

WHEREAS, the veteran population is a shifting demographic with evolving health care needs, which necessitates that VA identify new and innovative ways to deliver timely access to high quality, comprehensive, and veteran-centric health care; now, therefore

BE IT RESOLVED, by the VFW, that Congress must establish a single, sustainable and veteran-centric community care program that expands VA's community care authorities and ensures veterans are able to receive the timely, high quality, comprehensive, and veteran-centric health care they have earned and deserve; and

BE IT FURTHER RESOLVED, that VA comply with federal prompt payment requirements and incentivize private sector health care providers to participate in its community care program, while ensuring veterans are not held financially liable for services furnished through such program; and

BE IT FURTHER RESOLVED, that VA must remain the guarantor and coordinator of care for enrolled veterans; and

BE IT FURTHER RESOLVED, that the VFW oppose privatizing the VA health care system or eroding VA's ability to provide direct care to veterans; and

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

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 613

IMPROVE VA & DOD POLICIES AND PROCEDURES FOR HEPATITIS B

WHEREAS, most individuals with chronic Hepatitis B enjoy good health, are symptom free and may not know they have the silent disease; and

WHEREAS, in developed countries like the U.S. chronic Hepatitis B is a preventable, highly-treatable long-term illness where, since 2002, Hepatitis B vaccinations have been required for all incoming U.S. military personnel; and

WHEREAS, the Department of Health & Human Services, in 2011, released our nation's first-ever comprehensive Action Plan for the Prevention, Care and Treatment of Hepatitis B; and

WHEREAS, a 2014 study by the American Association for the Study of Liver Disease concluded that Hepatitis B infection was twice as common in the veteran population as in the general population, and that VA screening for the infection was "suboptimal"; and

WHEREAS, studies by VA and DOD concluded that Hepatitis B infection is more than twice as high for non-Hispanic African Americans, as well as more prevalent for LGBT veterans; and

WHEREAS, the Department of Defense has unjustly discharged or denied the reenlistment requests of military service members with Hepatitis B who are on stable treatment plans, do not exhibit symptoms and are fit for duty; and

WHEREAS, transparency and accessible documentation are among the best means to educate and prevent stigma and discrimination; now therefore

BE IT RESOLVED, that the Veterans of Foreign Wars of the U.S. urges the Department of Veterans Affairs to take steps to improve Hepatitis B screening, follow-up testing and treatment among veterans born between 1945 and 1980; and

BE IT FURTHER RESOLVED, that we urge the Department of Veterans Affairs to take steps to improve Hepatitis B screening, follow-up testing and treatment among minority veterans; and

BE IT FURTHER RESOLVED, that we urge the Department of Defense to codify policies for retention and discharge of military personnel with chronic Hepatitis B infection in order to educate and ensure Hepatitis B policies are documented, transparent, equitable, and updated as medical capabilities, technologies, evidence-based practices, and DOD policy considerations evolve.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 614

EXTEND SERVICE CONNECTION PRESUMPTION TO BLAST SURVIVORS

WHEREAS, the Global War on Terrorism has exposed more than 330,000 service members to diagnosable blast injuries, with thousands more going undiagnosed and untreated; and

WHEREAS, the nature of the conflict these men and women face is frequently guerrilla-style combat where the enemy is widely known to use improvised explosive devices (IEDs); and

WHEREAS, much of the attention has been focused on the apparent physical wounds, there are many unseen effects of blast trauma, which could include brain injuries, long-term hearing and balance issues, chronic pain, air embolisms, and injuries mistaken for personality disorders; and

WHEREAS, some effects associated with blast injuries may not become manifest immediately allowing the service member to return to the field, only to have their ability to fulfill their duty dramatically affected by the long-term effects of the blast; and

WHEREAS many injuries are difficult to diagnose and our men and women in uniform can suffer from these disabilities for many years after the blast; and

WHEREAS, a large number of veterans have been identified as having been diagnosed at VA medical centers with conditions possibly related to blast exposures since the start of the Global War on Terrorism; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to approve a presumption of service connection for conditions associated with blast exposure.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 615

TINNITUS AND HEARING LOSS PRESUMPTIVE SERVICE CONNECTION

WHEREAS, veterans of the armed services who served in combat or in a position (e.g., member of a gun crew on board Navy ships) or certain occupational specialties have a high incidence rate of hearing loss or tinnitus as a direct result of acoustic trauma; and

WHEREAS, veterans, from earlier, were not afforded a comprehensive audiological examination upon entrance and discharge from the military services, but instead were subject to highly inaccurate test methods; and

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

WHEREAS, in 2005 the Institutes of Medicine (IOM) (now referred to as the National Academy of Sciences) released a study that showed that nearly all service members are exposed to acoustic trauma at some point during their military service and that many experience hearing loss and/or tinnitus as a result, often years after service. However, "after the fact, hearing loss or tinnitus incurred as a result of military service cannot be distinguished with certainty from subsequent noise-induced hearing loss..." Given these findings, reasonable doubt must be resolved in favor of veterans who suffered acoustic trauma in service; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, we urge Congress and the Secretary of Veterans Affairs to grant service connection on a presumptive basis for any veteran diagnosed after discharge with hearing loss or tinnitus when the evidence shows that the veteran participated in combat or worked in a position or occupational specialty likely to cause acoustic trauma.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 616

HEARING LOSS COMPENSATION

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

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

WHEREAS, the Department of Veterans Affairs has the authority to grant service connection for disabilities associated with combat-related diseases or injuries even if medically undocumented at the time of service; and

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

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

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the Secretary of Veterans Affairs to amend the Schedule for Rating Disabilities to provide a minimum compensable evaluation for any service connected hearing loss for which a hearing aid is medically indicated.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 617

VA CLAIMS WORKLOAD

WHEREAS, the Department of Veterans Affairs (VA) has made significant progress in reducing the backlog of claims for compensation, pension, education benefits and appeals, yet submissions and appeals continues to grow; and

WHEREAS, nearly, twenty five (25) percent of rating cases that have been pending for more than 125 days has remained constant for the last two years, more than 180,000 appeals are pending between the BVA and Regional Office and it still takes more than 1,700 days to receive a BVA decision after filing a substantive appeal; and

WHEREAS, VA continues to order redundant and often unnecessary examinations when the evidence of record is sufficient to make a determination, or claimants submit adequate medical records and doctors opinions; and

WHEREAS, Congress has provided increased funding for staffing at VA and improved its oversight. Yet, the attrition of new hires and retirement of journeymen claims processors continues to challenge VA's ability to train and maintain a technically proficient workforce; and

WHEREAS, after dozens of Congressional hearings, numerous studies, changes of VA leadership, altered workflow, amended work processes, erratic IT development, as well as fruitless pilot programs and experimental initiatives, it is clear that there are no easy, simple or quick solutions that lead to the speedy reduction of the backlog; now, therefore

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

BE IT FURTHER RESOLVED, that we continue to advise that Congress exercise its oversight authority and provide the vital resources necessary to sustain a sufficient workforce capable of effectively managing the workload and provide quality and timely service to those claiming benefits or appealing decisions from VA; and

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

Submitted by Commander-in Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 618

IMPROVE EDUCATION BENEFITS FOR SURVIVORS

WHEREAS, the Survivors and Dependents Educational Assistance Program (DEA) provides educational support to eligible dependents (spouse or children) of a service member who died on active duty or a veteran who died or is permanently and totally disabled due to a service-connected disability; and

WHEREAS, while DEA benefits increase annually, they fail to increase at the same rate as tuition; and

WHEREAS, according to the College Board Advocacy and Policy Center, the average cost of attendance, including tuition, fees, and room and board, at a four-year public university is consistently more than twice the rate of reimbursement for DEA; and

WHEREAS, the Veterans of Foreign Wars of the United States worked with Congress to successfully expand the Gunnery Sgt. John David Fry Scholarship to offer Post-9/11 GI Bill benefits to eligible surviving children, and spouses; and

WHEREAS, Congress recently increased the monthly allowance for DEA while also decreasing the amount of months to utilize the benefit; and

WHEREAS, while nothing can repay the enormity of the loss and sacrifice of military survivors, providing a quality educational benefit will provide them the opportunity to build a meaningful and productive future for themselves and their children; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to increase DEA benefits to reflect the rising cost of education, with future increases indexed to reflect the average cost of attendance as reported by the Department of Education.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 619

BURIAL PLOT ALLOWANCE

WHEREAS, the United States Department of Veterans Affairs (VA) pays certain burial benefits at the death of a veteran who dies from a service connected disability. VA pays a different burial benefit and plot allowance on behalf of a wartime veteran who dies from a non-service connected condition; and

WHEREAS, the cost of funeral expenses in the private sector have increased nearly seven times over since 2001 and the current VA benefit is \$2,000 for a service connected death, and \$300 burial and \$749 plot allowance for a qualifying non-service connected death; well below the cost in the private sector; and

WHEREAS, Congress should provide the resources to meet the changing needs of burial benefits and bring burial allowances and plot allowances to the same proportionate level they were when the benefits were joined in 1973; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that Congress increase all burial benefits to what the *Independent Budget* recommends: the service connected burial benefit, non-service connected burial benefit and the plot allowance for those veterans who do not have access to a state or national veterans cemetery within 75 miles should not be less than \$6,160, \$1,918, and \$1,150 respectively; and

BE IT FURTHER RESOLVED, that the service connected burial benefit, non-service connected burial benefit and the plot allowance for those veterans who have access to a state or national veterans cemetery but chose burial in a private cemetery should be no less than \$2,793, \$854, and \$1,150 respectively; and

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

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 620

TOXIC EXPOSURES

WHEREAS, veterans who served in the territorial seas of Vietnam during the Vietnam War are arbitrarily and unjustly denied benefits for illnesses associated with Agent Orange exposure, to include veterans who served on ships presumed to be exposed to Agent Orange but whose service did not fall on the specific presumptive dates; and

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

WHEREAS, those who served on bases in Thailand during the Vietnam War era who suffer from conditions associated with Agent Orange are arbitrarily and unjustly denied service connection; and

WHEREAS, veterans of the Persian Gulf War suffer from an array of conditions and diseases, collectively known as Gulf War illness, while the causes remain unexplained and VA ignores Congress and continues a burdensome claims process; and

WHEREAS, veterans of current conflicts were exposed to numerous environmental hazards, including open air burn pits and the anti-malaria drug mefloquine; and

WHEREAS, veterans stationed at Woomera Air Force Station in Maralinga, South Australia, were exposed to radiation during nuclear weapons testing during the 1950's and 1960's; and

WHEREAS, for decades, veterans and dependents stationed at Fort McClellan, Alabama were exposed to Polychlorinated Biphenyl (PCB), and now suffer from associated conditions; and

WHEREAS, for decades, veterans and family members stationed at Camp Lejeune consumed contaminated water and now suffer from associated conditions. While VA acknowledged this fact, there are differences in what conditions are compensable and those which only receive reimbursement for medical care. Additionally, the requirement to be stationed on the base for 30 days is arbitrary and ignores thousands who graduated from training in less time; and

WHEREAS, the United States military has conducted testing, monitoring, and clean-up operations related to various chemical, biological, radiological, and nuclear weapons resulting in exposure; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to invest adequate resources to study, diagnose, and treat conditions and illnesses associated with toxic exposures; and

BE IT FURTHER RESOLVED, that Congress ensures that the Department of Defense expedites declassification efforts related to exposure events and that the Department of Veterans Affairs extends presumptive service connection to veterans suffering from conditions or illnesses found to be associated with exposure to toxic substances.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 621

DIGITAL CLAIMS PROCESS

WHEREAS, current regulations authorize veteran service organizations (VSOs) activities based on VA paper claims processes; and

WHEREAS, VA now processes compensation and pension claims in a digital environment; and

WHEREAS, VSOs have had to request VA's Office of General Counsel intervention in executing the same principal functions in a digital environment which VSOs previously performed with paper claims; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge VA to update all regulations authorizing VSOs the same advocacy rights in the digital environment as were allowed in the paper-based claims process; and

BE IT FURTHER RESOLVED that the Secretary implement regulations mandating VA accept dates of claim actions when files are electronically transmitted to VA; and

BE IT FURTHER RESOLVED, that the Secretary implement regulations mandating VSOs are granted 48 hours to review rating decisions. During this review period, VA shall not finalize decisions without the VSO electronically certifying that a rating review has been conducted.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 622

NATIONAL SERVICE LIFE INSURANCE

WHEREAS, VA has established life insurance designed to support veterans whom might otherwise be uninsurable due to service connected disabilities; and

WHEREAS, by statute premium rates are based on the American Experience Table of Mortality which was created in the 1860s to set insurance rates accordingly with mortality rates at the time; and

WHEREAS, private health insurance companies more commonly use the Commissioners Standard Ordinary Table which has been adjusted for current mortality rates; and

WHEREAS, VA life insurance rates are now no longer competitive with private insurance company rates; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to pass legislation authorizing VA to use the most commonly used life mortality table in order to make VA National Service Life Insurance competitive with private health insurance policies.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 623

VA AUTOMOTIVE ALLOWANCE

WHEREAS, the Department of Veterans Affairs will issue only one certificate of eligibility for financial assistance in the purchase of a new or used automobile or other conveyance; and

WHEREAS, the Department of Veterans Affairs will provide or assist in providing eligible veterans with a second automobile or other conveyance when the first vehicle purchased with VA financial assistance is destroyed as a result of any natural catastrophe, the destruction was not the veterans fault or the veteran does not receive compensation for the loss from a property insurer; and

WHEREAS, current technology, design and safety advances have reached such a level that automobiles and conveyances are superior to every model produced in the last 50 years; and

WHEREAS, it is impractical to assume veterans who require such assistance would not benefit from better design and equipment changes to make it easier to accomplish daily tasks, attend medical or other appointments and experience an overall better quality of life; and

WHEREAS, veterans who require such assistance are unduly penalized by the narrow scope of this program by virtue of the nature of its being a "one time" benefit; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress and the Secretary of Veterans Affairs to remove the unreasonable restrictions of a once in a lifetime grant; and

BE IT FURTHER RESOLVED, that the Secretary of Veterans Affairs authorize veterans, or their duly authorized representatives who are already in receipt of the automotive allowance, those with applications pending, and any future qualified applicant be allowed to reapply for this essential benefit at the end of the sales or lease contract or every 5 years, whichever is greater, so as to maintain a practical quality of life and benefit from current safety and technology standards.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 624

HOMELESS VETERANS PRIORITIES

WHEREAS, homelessness among veterans has significantly decreased due to coordinated efforts across multiple agencies of government and the ambitious goal of the Department of Veterans Affairs to eliminate homelessness among veterans; and

WHEREAS, a growing number of female veterans experience homelessness, many of whom have dependents in their care; and

WHEREAS, local and state homeless veteran agencies and programs are federally funded by the Department of Veteran Affairs (VA) Grant and Per Diem program and the Department of Labor (DOL) Homeless Veterans Reintegration program; and

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

WHEREAS, the VA acknowledges its obligation to maintain comprehensive assistance to veterans who are experiencing homelessness or at risk of homelessness to the best of its capabilities; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the President and Congress to continue to address veterans' homelessness by increasing the availability of affordable housing, expanding educational and employment opportunities and training and providing gender-specific services; and

BE IT FURTHER RESOLVED, that VA should periodically adjust Grant and Per Diem program rates for inflation to ensure sufficient operation of homeless veteran assistance programs; and

BE IT FURTHER RESOLVED, that VA compensation and non-service connected pension should not be considered countable income by the Department of Housing and Urban Development in determining program eligibility.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 625

ENSURE VETERAN SUCCESS IN EDUCATION

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

WHEREAS, the Veterans of Foreign Wars of the United States has worked to secure and preserve quality education benefits for all generations of veterans; and

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

WHEREAS, despite significant improvements to consumer resources for student veterans, inconsistent access to quality consumer information and financial hardships continue to drive perceptions in Washington that student-veterans are not succeeding in higher education; and

WHEREAS, many combat veterans do not fully qualify for the Post-9/11 GI Bill benefit; and

WHEREAS, certain schools and programs seek to circumvent benefit guidelines in order to reap significant financial benefit; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to ensure proper oversight of VA's educational benefit programs by developing quality metrics with which to demonstrate student veteran success in higher education, and close financial loopholes through which certain academic programs can exploit GI Bill reimbursement models; and

BE IT FURTHER RESOLVED, that Congress ensure veterans receive equitable access to benefits like in-state tuition and quality pre-enrollment educational information to ensure veterans are academically and financially prepared to succeed in higher education; and

BE IT FURTHER RESOLVED, that the Veterans of Foreign Wars of the United States work to extend full GI Bill benefits for all combat veterans and preserve quality GI Bill benefits for all current conflict veterans and future conflict veterans to ensure they have access to quality education assistance programs.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 626

VOCATIONAL REHABILITATION AND EMPLOYMENT PROGRAM ELIGIBILITY

WHEREAS, the period of eligibility for VA Vocational Rehabilitation and Employment (VR&E) benefits is 12 years from the date of separation from the military or the date the veteran was first notified by VA of a service-connected disability rating; and

WHEREAS, many veterans do not understand their eligibility to VR&E services and the benefits of the program until later in life when they become so disabled that their disabilities create an employment barrier; and

WHEREAS, VR&E lacks quality performance measures that measure rehabilitation based on the long-term effects of disability and the likelihood that a disability may require further rehabilitation; and

WHEREAS, VR&E can take more than 90 days from enrollment to the start of services; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to change the eligibility delimiting date for VA Vocational Rehabilitation and Employment program by eliminating the 12-year-delimiting date for eligibility to Chapter 31 benefits and allow all veterans with employment impediments or problems with independent living to qualify for VR&E services for life; and

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

BE IT FURTHER RESOLVED, that VA streamlines eligibility and entitlement to VR&E programs to provide more timely intervention and assistance to all disabled veterans.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 627

SUPPORT VETERANS EMPLOYMENT AND TRAINING PROGRAMS

WHEREAS, the Veterans of Foreign Wars recognizes that it is in the best interest of our nation to have a strong and viable veterans employment and training system; and

WHEREAS, Congress has recognized that veterans of all eras, especially recently separated service members and veterans with service connected disabilities find it difficult to obtain meaningful employment and careers; and

WHEREAS, while there are certain employment and educational programs in place for veterans such programs must have a proactive, long-term career focus; and

WHEREAS, programs designed to encourage federal employment of veterans, assist veterans in finding employment in their communities, and encourage federal contractors to hire veterans demand reasonable funding and responsible oversight to ensure success; and

WHEREAS, state agencies who receive federal funding are not held to the same veteran hiring standards as the federal government; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we support viable and effective veterans employment and training systems, such as the Jobs for Veterans State Grant (JVSG) program and other Department of Labor Veterans Employment and Training Service (VETS) programs; and

BE IT FURTHER RESOLVED, that we urge Congress to change the eligibility delimiting date for VA Vocational Rehabilitation and Employment program by eliminating the 12-year-delimiting date for eligibility to Chapter 31 benefits and allow all veterans with employment impediments or problems with independent living to qualify for VR&E services for life; and

BE IT FURTHER RESOLVED, that we urge Congress to improve and enforce federal veteran-hiring mandates for contractors who do business with the federal government as outlined in Title 38 USC 4212; and

BE IT FURTHER RESOLVED, that federal veteran hiring initiatives and programs must be held accountable for the effectiveness of the services provided and funding should be adjusted to reflect abilities in creating long-term meaningful careers for veterans, and state agencies that receive federal funding must be held to the same standards and report to Congress on the success of veteran hiring initiatives.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 628

VETERAN ENTREPRENEURSHIP

WHEREAS, government reports consistently indicate that many federal agencies fail to reach their three-percent contracting goal for disabled veterans; and

WHEREAS, many veterans and disabled veterans lack access to the necessary capital to invest in small business opportunities; and

WHEREAS, the federal government has failed to deliver adequate tools to veterans, offering the opportunity to fulfill the three-percent federal contracting mandate; and

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

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that Congress expand entrepreneurial education and networking programs for veterans via veterans small business centers and other entrepreneurship programs funded through the Small Business Administration in order to help achieve the federal government's three-percent veterans contracting goal; and

BE IT FURTHER RESOLVED that Congress expand veteran's and disabled veteran's access to capital by expanding direct loan programs through the Small Business Administration in order to help achieve the federal government's three-percent veterans contracting goal; but such programs should never come at the expense of other earned veterans' benefits; and

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

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 401

END SEQUESTRATION

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

WHEREAS, sequestration began in the second half of FY 2013, and its impact on the military — which accounts for half of the government's total discretionary budget — was immediate. In order to meet mandatory spending cuts without impacting combat operations in Afghanistan, the four services had to slash training, as well as furlough its civilian workforce; and

WHEREAS, occurring simultaneously was a planned \$487 billion reduction in Pentagon spending over a 10-year period; and

WHEREAS, three Bipartisan Budget Agreements have since been signed to temporarily suspend the sequester; and

WHEREAS, meanwhile, the world has become far more dangerous and unpredictable in the seven years since sequestration was created; and

WHEREAS, the cuts have not only reduced and degraded quality of life programs for military personnel and their families, but have negatively impacted readiness and modernization programs, to the point of jeopardizing the military's ability to respond when and where needed. Sequestration also impacts other federal agencies, most notably the Department of Homeland Security and its many subsidiary units, plus sequester limits budgets requests and subsequent appropriations for the Department of Veterans Affairs; and

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

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

Submitted by Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 402

OPPOSE TRICARE FEE CHANGES

WHEREAS, the FY17 National Defense Authorization Act made significant changes to the TRICARE military health benefit program by eliminating Tricare Standard and Extra, creating the new TRICARE Select Plan, adding enrollment fees for individuals joining the service after Jan.1, 2018 and for military retirees starting in 2021; and

WHEREAS, the changes mandated by the NDAA were further compounded by a change in costs instituted by the Defense Health Agency for both the new Select and the Prime plans. The changes included a complete change in the cost-share methodology for the new Tricare Select plan, which changed the beneficiary costs from a percentage of individual-services-used to an averaged, flat-rate co-payment and increased Tricare Prime fees; and

WHEREAS, the FY18 NDAA added additional costs by raising mail order and retail pharmacy fees for all Tricare beneficiaries, including Tricare For Life members. The additional costs included raising the costs of a 90-day mail order supply of generic medications from a \$0 co-pay to a \$7 per prescription co-pay, adding significant out-of-pocket costs to beneficiaries on maintenance medications for chronic conditions; and

WHEREAS, the FY18 NDAA also allowed the Secretary of Defense to enter into a contract with the Office of Personnel Management (OPM) to administer a replacement program for the Tricare Retiree Dental Program starting Jan. 1, 2019. While the new plan will provide Tricare beneficiaries with additional dental insurance carriers and plan options and will also include the addition of vision coverage for retirees and Active Duty Service Member Families, the increased options will likely come with increased costs and reduced availability of providers; and

WHEREAS, military health coverage is expensive, yet so is the upfront personal investment someone makes to voluntarily commit to a full military career. Any real or perceived erosion of benefits for career-minded personnel will undermine long-term retention; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we oppose all Tricare fee increases as well as any additional fee increases or major modifications to the earned benefit of military healthcare. DOD should reform its healthcare programs by eliminating institutional inefficiencies before promising military retirees that better service will ensue after their participation fees are increased.

Submitted by the Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 403

KEEP DEFENSE BUDGET RELEVANT

WHEREAS, America's Number #1 priority is to defend herself and her citizens, yet continued efforts jeopardize the Defense Department's ability to properly train, equip and field a military that can defeat all enemies, as well as protect vital U.S. interests around the globe; and

WHEREAS, the fact the U.S. spends more on defense than the next 8 or 10 countries combined is a false narrative. With the exception of China and Russia, all the other countries are focused on homeland and/or shared theater defense alliances, whereas the U.S. has a worldwide commitment to project power, reliability and leadership; and

WHEREAS, defense spending for fiscal year 2017 was approximately 15 percent of the total federal budget — the lowest since before World War II and just 3.1 percent of the Gross Domestic Product (GDP) — but accounts for nearly half of all discretionary spending, which makes DOD a consistent target for lawmakers trying to reduce overall federal spending, at the risk of making America less safe; and

WHEREAS, the military shrinks in terms of installations, manpower and material at the end of every war, but bringing the troops home has yet to make the world any less dangerous, our enemies any more predictable, or reduce the world's reliance on the United States to lead every contingency or humanitarian operation. Nor has our nation's war against international terrorism ended; and

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

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

Submitted by Commander-in-Chief
To Committee on NATIONAL SECURITY AND FOREIGN AFFAIRS

Resolution No. 404

PRESERVE THE ALL-VOLUNTEER FORCE

WHEREAS, America's All-Volunteer Force engaged in a 15-year, two-front war, that nobody prior to 9/11 would have thought possible without reinstating the draft. It has done so despite multiple combat tours and significant military recruiting and retention challenges, and it continues to operate in an extremely dangerous and unpredictable world; and

WHEREAS, the troops are concerned. They are concerned that elected and appointed officials don't understand what it's like to serve in an All-Volunteer Force that has been tasked to do so much for so long. The troops are concerned whether there will be a place for them should they want to make the military a career. They are concerned about quality of life programs, their families, and the future of the GI Bill and its transferability provision. And their leaders are very concerned about potential burnout in a military that is continually tasked to do more with less human and fiscal resources; and

WHEREAS, worldwide commitments and challenges have increased, to include keeping approximately 15,000 American troops in Afghanistan, conducting thousands of airstrikes against radical forces aligned with the Islamic State of Iraq and Syria, increasing rotations to Eastern Europe, heightened engagement in Africa, and redeploying almost 9,000 service members back into Iraq; and

WHEREAS, substandard training levels, pilot and maintenance shortages, outdated equipment, the inability to fund new programs, the use of authorities to activate Reserve component members without providing traditional benefits, and cuts to morale and welfare programs are the direct result of a military struggling to survive a budget crisis that will only continue to grow the longer Congress is unable to end the sequester and provide a stable, consistent defense budget. The cumulative impact of lower pay and a higher operations tempo has a direct influence on morale, which in combination with a better civilian economy, has impacted both recruiting and retention, and threatens the continued existence and viability of the All-Volunteer Force; now, therefore

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

Submitted by the Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 405

LINK MILITARY PAY INCREASES TO PRIVATE-SECTOR INCREASES

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

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

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

WHEREAS, over the objections of the VFW but with the approval of Congress, the “slow the growth” initiative resulted in military pay raises of 1 percent in FY 2014 and 2015, and 1.3 percent in FY 2016, with the cumulative result being less than the ECI; and

WHEREAS, the 2.1 percent raise in FY 2017 and 2.4 percent raise in FY18 were improvements and the proposed FY 2019 2.6 percent pay raise would be the largest pay raise in nine years; and

WHEREAS, changes to military pay and benefits is the top concern of military service members and their families. Continued efforts to slow the growth of military compensation, combined with a better civilian job market, and a sustained intense operational tempo have already impacted recruiting and retention, which jeopardizes the continued existence and viability of the All-Volunteer Force; and

WHEREAS, the Department of Defense is already facing a shortage in key fields, such as pilots and maintenance personnel, and must develop competitive pay and benefit scales to recruit emerging talent in high-tech fields, such as cyber; now, therefore

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

Submitted by Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 406

INCREASE AND EXTEND TSP MATCH

WHEREAS, the new military retirement system will benefit all for their service, not just the 17 percent of service members who currently stay 20 years or longer. This recruiting initiative is needed to attract new generations of qualified service members who might otherwise not consider military service because it provides no match to portable 401k-style plans that virtually all civilian employers offer; and

WHEREAS, beginning in January 1, 2018, the government began automatically contributing 1 percent of base pay to a new service member's Thrift Savings Plan (TSP) account beginning the third month of service, then up to 4 percent more through a government match beginning in Year 3 through 26 years of service, for a total of 5 percent. However, the Military Compensation and Military Retirement Commission recommended a total government contribution of 6 percent — the 1 percent automatic and up to a 5-percent match — without the arbitrary 26-year sunset clause; and

WHEREAS, the Pentagon's FY 2017 budget submission proposed increasing the government's contribution to the full 6 percent, and carry the match through retirement, but would delay starting the match until Year 5; and

WHEREAS, those serving prior to January 1, 2018 with less than 12 years' service will have a one-time opportunity in 2018 to opt into the new system or remain in the legacy system, based on their own individual circumstances; and

WHEREAS, for those who join after January 1, 2018, and who stay the requisite 20 years, the new retirement program will reduce future retiree pay from 50 to 40 percent of base pay, but overall net worth could be considerably higher due to a one-time, mid-career continuation bonus, and compound interest on increased TSP accounts, which can be rolled over into other investment plans and bequeathed entirely to heirs, whereas just a maximum 55 percent of retiree pay can go to surviving spouses; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we will work with Congress to increase the government's TSP contribution to a total of 6 percent beginning in Year 3 of service, and extend the match throughout an individual's military career.

Submitted by the Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 407

SEXUAL ASSAULT INCIDENT REPORTING AND TREATMENT

WHEREAS, the Defense Department's annual report on Sexual Assault in the Military Services indicated that 6,172 service members reported being sexually assaulted in fiscal year 2016. The Department of Veterans Affairs also reports that 25 percent of female veterans and one percent of male veterans respond "yes," that they experienced a Military Sexual Trauma (MST), defined as sexual assault or repeated, threatening sexual harassment experienced during military service, when screened by their VA provider; and

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

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

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

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

Submitted by Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 408

ENSURE DOD COMPLIANCE WITH TAP MANDATE

WHEREAS, Congress has mandated Transition Assistance Program (TAP) pre-separation counseling for all service members in order to ease the difficult transition from service into civilian life by offering job-search assistance, advice on available educational and healthcare programs, and other earned benefits; and

WHEREAS, a recent GAO report indicated the Department of Defense (DOD) reporting on TAP performance did not account for 48 percent of National Guard and Reserve members and 12 percent of active duty servicemembers, significantly reducing the actual percentage of force participation from the publicly reported 94 percent to as low as 47 percent; and

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

WHEREAS, recent VFW survey data shows that over half of all veterans who receive assistance through our Benefits Delivery at Discharge program reported that they did not have an opportunity to participate in any of the voluntary transition tracks; and

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

WHEREAS, Department of Defense has worked with its partner agencies to make TAP resources available in public-facing environments; now therefore

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

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

Submitted by Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 409

ESTABLISH THE ARMED FORCES UNIVERSITY

WHEREAS, approximately 77 percent of the Active Duty force and 76 percent of the Reserve component have not obtained a bachelor's degree or higher; and

WHEREAS, research conducted by the VFW-SVA Legislative Fellowship demonstrated the persistent problems in obtaining comparable compensation for veterans who enter the civilian workforce without easily-transferrable skills; and

WHEREAS, the American Council on Education recommends, but cannot require, equivalent college credit be awarded for military training. And where there is considerable discrepancy amongst institutions on the awarding of these credits to service members and veterans, with some schools awarding as little as 1 credit; and

WHEREAS, the lack of coordination between the existing military educational and training programs results in inconsistent awarding of credits, certificates, and licenses across the services, even among individuals in comparable career fields who complete the same training; and

WHEREAS, since 2009, the Department of Veterans Affairs (VA) has spent more than \$55 billion in Post-9/11 GI Bill funds alone for the educational needs of approximately 1.5 million Veterans and their dependents, and VA has requested an additional \$11 billion for education benefits for FY 19, demonstrating a clear need for education services; and

WHEREAS, since 1972, the Community College of the Air Force (CCAF) has conferred college degrees accredited by the Southern Association of Colleges and Schools to better prepare Airmen to compete in the civilian workforce; and

WHEREAS, the Air University Associate to Baccalaureate Cooperative program, begun in 2007, partners CCAF with 59 universities, articulating the transferability of credits for persistence purposes; and

WHEREAS, the Congressional Research Service showed that extending the CCAF model across all armed services could be a cost-effective method in improving the preparedness of today's military to enter the workforce; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to establish the Armed Forces University for the purpose of conferring accredited college degrees on military-trained personnel to improve preparedness for the civilian workforce.

Submitted by Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 410

SUPPORT STABILITY AND RELIEF FOR MILITARY FAMILIES

WHEREAS, approximately half of the total force is married--with approximately 5.1% of active duty marriages being dual-military--and 41% have children; and

WHEREAS, family stability and resiliency is a key aspect of service member readiness and retention; and

WHEREAS, the operations tempo, compounded by the impacts of sequestration on everything from quality of life programs to permanent change of station timelines, have created unsustainable stress levels for service members and their families; and

WHEREAS, persistent issues, such as military spouse employment challenges, gaps in support for relocating and transitioning service members with children in the Exceptional Family Member Program, and reliable childcare continue to degrade morale and retention; and

WHEREAS, military policies are often out-of-date and do not address the needs of the current force with regards to work-life balance; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we call upon the Department of Defense and Congress to review and strengthen programs and policies that support military family readiness and meet our nation's obligations to those who serve and those who serve alongside them.

Submitted by the Commander-in-Chief
To the Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 411

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

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

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

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

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

Submitted by Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 412

REVISE UNFAVORABLE DISCHARGE REVIEW PROCEDURES

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

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

WHEREAS, many veterans who received unfavorable discharges could have been suffering from the effects of undiagnosed and untreated Post-Traumatic Stress Disorder, Traumatic Brain Injuries and mental health conditions resulting from sexual trauma as the result of their military service; and

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

WHEREAS, discharge review boards can now consider medical evidence from VA and civilian providers and are to review cases with liberal consideration of whether a veteran's mental health condition contributed to the circumstances resulting in the veterans' discharge; now, therefore

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

Submitted by Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 413

REPEAL SBP/DIC OFFSET

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

WHEREAS, similar to life insurance, SBP is purchased by a military retiree and is intended to provide up to 55 percent of his/her retirement pay to a surviving spouse. DIC is a modest indemnity compensation benefit of \$1,283 per month that the VA pays to surviving spouses whose loved ones died from a service-connected wound, illness or injury. Despite the two payments being paid for two different reasons from two different federal departments, all monthly SBP retirement payments are first offset by the \$1,283 DIC payment; and

WHEREAS, with few exceptions, the surviving spouses of other federal program retirees have no offset penalty, whereas approximately 63,000 surviving military spouses are affected by this aptly termed "Widow's Tax." Congress recognized the offset as unfair and in the FY 2008 National Defense Authorization Act (NDAA) created a Special Survivor Indemnity Allowance (SSIA) to partially reduce some of the offset via a graduated monthly payment of up to \$310, but funding was only authorized through FY 2017. The FY 2018 NDAA made the SSIA permanent, but did so by raising co-pays for military healthcare beneficiary prescriptions and without resolving the complete offset issue; and

WHEREAS, military retiree SBP payments currently range between 2.5 and 6.5 percent of the selected base amount. A recommendation by the Military Compensation and Retirement Modernization Commission would offer a new SBP program with substantially higher (11.25 percent) monthly premiums in order to receive full DIC without offset; and

WHEREAS, while the VFW concurs with the Commission's goal to eliminate the offset, we disagree with its funding method. The VFW's position is for the full repeal of the SBP-DIC offset, not to subsidize it out of the pockets of military retirees, who on the top end already sacrifice 6.5 percent of their monthly pay—for 360 consecutive months and reached the age of 70—just to ensure their surviving spouses will receive 55 percent of their retirement pay; now, therefore

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

Submitted by the Commander-in-Chief
To the Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 414

PROVIDE EQUITY IN BENEFITS TO ALL RESERVE COMPONENT MEMBERS

WHEREAS, America's reliance on its Reserve Component (RC) has been unprecedented in our nation's history. According to the Defense Department, more than 900,000 RC members have served on active duty since 9/11, contributing a quarter of all ground forces deployed into Iraq and Afghanistan over the past 13 years, and half of all Air Force airlift, and with a third of them serving multiple tours; and

WHEREAS, the Department of Defense's new "total force" concept, relies on the intentional integration of RC forces across the full spectrum of conflict, including all current and future homeland defense, domestic disaster, and overseas steady state and contingency operations, as an operational reserve, as opposed to the traditional strategic reserve; and

WHEREAS, Reserve Component members have been and are currently being activated under authorities, such as 12304b and 12301h, which do not provide them with the benefits comparable to their active duty counterparts or other reserve members activated under different authorities, although they may be deployed to the same location, with the same mission; and

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

WHEREAS, RC retirees are normally eligible to receive military retirement pay at age 60, but a 2008 National Defense Authorization Clause, lowered their retirement pay eligibility age by three months for every 90 days served on active duty in an eligible status after Jan. 29, 2008. And the FY 2015 NDAA amended the earlier language by including a carryover clause for RC members activated after Sept. 30, 2014. But the new law did not extend the carryover provision back to Jan. 29, 2008, or grandfather any early retirement credits back to 9/11; and

WHEREAS, there exist other significant discrepancies in the policies, available programs, and eligibility for benefits between the Active and Reserve Components; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to eliminate the discrepancies that discount the dedication and sacrifice of our Reserve Component members serving at home and abroad.

Submitted by Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 415

SUPPORT THE REPUBLIC OF CHINA ON TAIWAN

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

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

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

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

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

Submitted by Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 416

SUPPORT THE REPUBLIC OF KOREA

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

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

WHEREAS, North Korea continues to escalate tensions in the region by test launching potentially nuclear-capable missiles, including a missile capable of reaching the United States, and conducting six underground nuclear explosions since 2006. It is a known exporter of ballistic missiles and its technology to countries unfriendly to the United States, most notably Iran, and it periodically deploys its armed forces along the demilitarized zone and the Joint Security Area in Panmunjom; and

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

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

Submitted by Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 417

SUPPORT THE STATE OF ISRAEL

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

WHEREAS, Israel has been a beacon of stability and the foundation of Middle Eastern regional security for the past 60 years, despite the repeated targeting by hostile actors wishing to infringe upon its sovereignty; and

WHEREAS, peace between Israelis and Palestinians remains of strategic interest to the United States and other partners within the region; and

WHEREAS, Israel has been one of our nation's regional strongest partners in the ongoing fight against the Islamic State of Iraq and Syria (ISIS); now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the United States Government to continue to support the State of Israel both diplomatically and militarily, and continue to work with them to ensure and promote regional stability in the Middle-East, and elsewhere.

Submitted by Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 418

PROTECT POW/MIA FULL ACCOUNTING MISSION FUNDING

WHEREAS, the Veterans of Foreign Wars of the United States is deeply committed to achieving the fullest possible accounting of 83,000 missing Americans that include approximately 73,000 from World War II, 7,700 from the Korean War, 1,600 from the Vietnam War, 126 from the Cold War, and 6 post-Vietnam that include Operations Eldorado Canyon (1), Desert Storm (2) and Iraqi Freedom (3); and

WHEREAS, public-private partnerships are expanding the overall mission's ability to be at more sites, including previously unreachable sites, as is increasing the number of DPAA field offices into areas closer to major battlefields; and

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

WHEREAS, it is critical that DPAA remain fully funded. Recovering fallen Americans from long-ago battlefields is demanding and often dangerous work for investigation and recovery teams, but it is the most sacred of missions. It is our government's fulfillment of a soldier's pledge to never leave a fallen comrade on the battlefield, which is a promise that spans all generations; and

WHEREAS, without full and reliable funding, DPAA has been forced to postpone, restrict, or cancel recovery missions and delay recovery of difficult sites in favor of more productive locations, such as mass burials or multi-crewman aircraft crashes, in order to meet their legally required number of annual recoveries. Full funding enables DPAA to efficiently plan, resource and accomplish its worldwide mission to recover, identify and return to their families all missing American service members from all wars and conflicts; and

WHEREAS, Congress has adopted nine Continuing Resolutions in the last ten years and caused three shutdowns since 2013, which hinder operational planning and slow recoveries; now, therefore,

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

BE IT FURTHER RESOLVED, that Congress must pass advanced appropriations to prevent a slowdown in recoveries and allow for budget carry-over allowing DPAA to plan multi-year operations.

Submitted by Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

Resolution No. 419

CALL FOR MORE UNILATERAL POW/MIA ACTIONS BY VIETNAM

WHEREAS, 2,583 Americans were listed as missing and unaccounted-for at the end of the Vietnam War. As of February 2018, the number of missing is nearing 1,600 due to a combination of increased U.S. Government emphasis, better research and identification technology, stronger diplomatic ties with host governments, and access to aircraft crash and ground battlefield sites; and

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

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

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

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

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

Submitted by Commander-in-Chief
To Committee on NATIONAL SECURITY & FOREIGN AFFAIRS

619 BURIAL PLOT ALLOWANCE
620 TOXIC EXPOSURES
621 DIGITAL CLAIMS PROCESS
622 NATIONAL SERVICE LIFE INSURANCE
623 VA AUTOMOTIVE ALLOWANCE
624 HOMELESS VETERANS PRIORITIES
625 ENSURE VETERAN SUCCESS IN EDUCATION
626 VOCATIONAL REHABILITATION AND EMPLOYMENT PROGRAM ELIGIBILITY
627 SUPPORT VETERANS EMPLOYMENT AND TRAINING PROGRAMS
628 VETERAN ENTREPRENEURSHIP