



IOWA COUNTY VETERANS NEWSLETTER

Published by the Iowa County Veterans Service Office: 303 W. Chapel Street, Suite 1300, Dodgeville, WI 53533
Office Hours: M-F 8:30 am-4:30 pm Phone: **608/930-9865** Fax: 608/935-0358 Email: vet@iowacounty.org
Jeffrey T. Lindeman, County Veterans Service Officer

SUMMER, 2022

VA ADDS PRESUMPTIVE CONDITIONS

As part of President Biden’s Unity Agenda commitment to support the nation’s Veterans, the Department of Veterans Affairs is adding nine rare respiratory cancers to the list of presumed service-connected disabilities due to military environmental exposures to fine particulate matter.

The following list of rare respiratory cancers will be added to VA’s regulations through an Interim Final Rule published in the Federal Register on April 26, 2022:

- Squamous cell carcinoma of the larynx.
- Squamous cell carcinoma of the trachea.
- Adenocarcinoma of the trachea.
- Salivary gland-type tumors of the trachea.
- Adenosquamous carcinoma of the lung.
- Large cell carcinoma of the lung.
- Salivary gland-type tumors of the lung.
- Sarcomatoid carcinoma of the lung.
- Typical and atypical carcinoid of the lung.

VA determined through a focused review of scientific and medical evidence there is biological plausibility between airborne hazards and carcinogenesis of the respiratory tract — and the unique circumstances of these rare cancers warrant a presumption of service connection.

The rarity and severity of these illnesses and the reality these conditions present, is a situation where it may not be possible to develop additional evidence, prompted VA to take this action.

“Veterans who suffer from rare respiratory cancers associated with their service deserve the very best America has to offer—but they’ve had to wait for the care and benefits they deserve for far too long. That ends now,” said Secretary Denis McDonough. “With these new presumptives, Veterans who suffer from these rare respiratory cancers will finally get the world-class care and benefits they deserve, without having to prove causality between their service and their condition.”

VA will begin processing disability compensation claims for Veterans who served any amount of time in the Southwest Asia theater of operations beginning Aug. 2, 1990, to the present, or Afghanistan, Uzbekistan, Syria or Djibouti beginning Sept. 19, 2001, to the present.

Any Veteran who has or had one of the listed cancers at any time during or after separation from military service may be eligible for disability compensation benefits. Veterans, survivors or dependents who had claims previously denied for any of these respiratory cancers are encouraged to file a supplemental claim for benefits. To apply for benefits, Veterans and survivors are encouraged to contact the veteran’s service office at (608)930-9865

VA WANTS TO MAKE TELEPHONE MENTAL HEALTH APPOINTMENTS PERMANENT

A typical therapist's waiting room may contain a few unremarkable chairs, a handful of outdated magazines and the quiet bustle of a receptionist's desk. However, at Department of Veterans Affairs facilities, patients can sometimes be bombarded by

swaths of military paraphernalia and fellow service members milling around -- potential triggers that could deter them from seeking mental health support. As Congress and the White House zero in on mental health legislation, some advocates and lawmakers are pushing specifically to establish more robust telemental health care, providing services like psychiatry appointments conducted over the phone, to better serve veterans reluctant to receive in-person care. Telemental health can be particularly helpful for veterans with lingering negative associations from their time in the military, said Samantha Connolly, a clinical psychologist for the VA Boston Healthcare System. "There are also veterans who maybe didn't have the best experience during their military service, and they don't like to come into a VA facility," Connolly said. "They don't want to sit in a waiting room with other veterans and maybe see regalia or just memories of their time in the service." Last year, the VA provided 5.6 million telemental health visits, up from 3.2 million in 2020, according to Kendra Weaver, a senior consultant in the VA's Office of Mental Health & Suicide Prevention. "Prior to the pandemic, we often used telemental health as more of a selective or secondary strategy," Weaver said. In October, Rep. Matt Rosendale (R-MT) introduced a bill requiring the VA to report a comprehensive telehealth strategy. Last summer, Sen. Bill Cassidy, (R-LA) and Rep. Doris Matsui, (D-Calif.), introduced twin Senate and House bills to expand access to telemental health care.

While the recent string of mental health-focused hearings on Capitol Hill and President Joe Biden's call for mental health legislation in his State of the Union address have garnered more national attention, Weaver said the VA has been working on building up its telehealth infrastructure since well before the pandemic. The department dabbled in telehealth as early as the 1960s and '70s, with providers communicating with patients through televisions. After piloting a few programs in the 1990s and early 2000s, the VA formally launched a national telemental health initiative in 2002, including introducing its own video application for virtual appointments, Weaver said. But the pandemic proved a turning point, with the department switching from providing 80% of its care in-person to 80% virtually. While some veterans may be deterred from seeking help by the intimidating experience of obtaining services at the VA, others may carry lingering worries about how talking with an expert is viewed in the military. "Going to the

mental health clinic can jeopardize your career, and sometimes that stigma stays with military service members," said Kenneth Marfilus, a former active-duty mental health therapist. "They might feel more comfortable engaging in a telemental health appointment from the comfort of their home, especially if there's a certain level of anxiety or even some PTSD symptoms that could potentially flare up by going to the clinic." Crowded cities can be a common trigger among veterans experiencing PTSD, so some veterans may prefer to live in more remote, rural areas -- regions that are often under-resourced with VA and mental health care facilities alike. Marfilus, who has also worked to provide health care to and relocate unhoused veterans through the Syracuse VA Medical Center, said telemental health has long been a way to reach these veterans while also prioritizing their preferred way of life. "It may be easier to find an apartment for a veteran experiencing homelessness in a city center or immediate surrounding areas, but they might not want to live there for reasons related to their mental health symptoms," he said. "That's where we see telemental health really kicks in to be able to have them live where they want to live, where they feel most comfortable, but also having that constant communication with a health care provider." Even for veterans living in major metropolitan areas, Connolly said, the stress of navigating a tricky commute or heavy traffic can be a trigger. In Boston, some of her patients have to budget significant amounts of time just to get to their appointments. "I think for some providers, they question, 'How much therapeutic benefit does the session have if getting to and from the appointments has caused so much stress in my patient's day?'" Connolly said. "So I think telehealth can help in those cases, too." The largest barrier to expanding telemental health services is ensuring veterans have the technology to access virtual appointments. The VA has launched programs to loan veterans phones and computers, as well as support services for users to familiarize themselves with the technology ahead of their first telehealth appointment. Marquis Barefield, the assistant national legislative director for Disabled American Veterans (DAV), said the group has been advocating for lawmakers to pass legislation to help the VA get the technology it needs to make telemental health services possible for more vets. For those who do not have broadband or internet access, the DAV has been pushing for the expansion of VA initiatives such as the 2018 Accessing Telehealth

through Local Area Stations program. Partnering with organizations like the American Legion and Walmart, the program offers veterans private spaces with internet and computers to access telehealth appointments. However, the program currently operates only 12 active locations across the country, with one more location expected to be added soon. For veterans who struggle to operate technology, the DAV hopes in-person care remains an option as well. "We want to encourage the VA not to just heavily rely on telehealth and telemental health services," Barefield said. "We also still want them to have their doors open, so if veterans have an opportunity to come back inside of the facilities themselves that option is still on the table as well." [Source: Medill News Service | Maia Pandey | March 8, 2022 ++]

VA SCAM PROTECTION EFFORT

Veterans Affairs officials are warning about an uptick in scam attempts targeting veterans' pensions that could result in serious financial problems for elderly or infirm individuals. "Fraudsters are getting smarter, more deliberate and more engaged. They're getting better," said Charles Tapp II, chief financial officer for the Veterans Benefits Administration. "We are seeing a lot more instances where veterans — particularly seniors — are getting fraudulent calls ... So we certainly are making our senior veterans more aware about pension poaching." Earlier this year, the Federal Trade Commission reported that about 2.8 million Americans filed fraud complaints in 2021, the most on record. The agency estimated that consumers lost more than \$5.8 billion to scams last year. VA officials said older veterans with military pensions or other regular department payouts can be attractive targets for would-be-thieves. Pension theft can occur when an outside party — a stranger or someone known to a veteran, such as a caregiver — convinces veterans to shift their payouts to a new bank account or a separate financial product (annuities or trusts, for example), preventing them from accessing the money. Tapp said when veterans' bank accounts are changed without explanation; it triggers an internal check within VA to ensure that fraud is not occurring. However, other theft schemes are more difficult to detect, and may only be corrected after months of malfeasance have already occurred. In a series of recent outreach efforts, department officials are

reminding veterans that VA does not charge to process applications for benefits and services, and it is against the law for an outside group or attorney to charge claimants for preparing benefits applications. "No one can guarantee that the VA will award you a benefit or service, not even someone who is VA accredited," a department fact sheet on pension poaching states. "Only the VA can determine eligibility and award benefits and services." Tapp said if individuals are confused about available services or benefits, they can contact VA's National Call Center at 1-800-827-1000. If someone calls about veterans benefits and asks for personal information, the interaction is likely a scam. "If you are unsure [about an unsolicited call], please hang up and call that number back," he said. "We record and log every call ... so [staff] should be able to confirm that they just called and provide any information veterans need. "We want to make sure that veterans know that they are in control of their information, particularly when they're engaging with us." More information on potential scams is available at VBA's web site using the following link: <https://www.benefits.va.gov/BENEFITS/factsheets/limitedincome/pension-poaching.pdf>. [Source: Stars & Stripes | Leo Shane III | April 6, 2022 ++]

BOARD OF ODLER ADULT ADVISORS

See the enclosed flyer with additional information regarding an opportunity to serve on an advisory board to the Center for Aging Research and Education, UW – Madison, School of Nursing, regarding rural healthcare. An advisory board for urban healthcare research has already begun. If selected to serve on the board, members are compensated for their attendance. People who live in rural areas, including Veterans and those living on lower incomes, are encouraged to join. If interested contact Diane Farsetta at (608)265-9542.

THAT OLD, TATTERED FLAG

It is time again to retire the flags that have become too worn and faded to remain in service. The Mineral Point American Legion provides the location for the county-wide flag retirement ceremony. This year's ceremony will be on June 21st at 7:00 p.m. If you have flags you would like to have retired, you can drop them off at several locations around the county as well as at the Veterans Service Office.

Iowa County Veterans Service Office
303 W. Chapel Street – Suite 1300
Dodgeville, WI 53533

**Veterans
Newsletter**

IMPORTANT DATES

May 30 th	Memorial Day
June 14 th	Flag Day
June 21 st	Flag Retirement – Mineral Point American Legion - 7:00 p.m.
July 4 th	Independence Day

VETERANS SERVICE OFFICE CLOSINGS IN 2022

Memorial Day	Monday, May 30 th
Independence Day	Monday, July 4 th
Labor Day	Monday, September 5 th