Department of Wisconsin

2017-2018 Legislative Program

FULFILLING OUR PROMISES
TO THE MEN AND WOMEN WHO SERVED

WHO WE ARE

DAV is dedicated to a single purpose: empowering veterans to lead high-quality lives with respect and dignity. We do this through Service.

- We provide free, professional assistance to veterans and their families in obtaining VA and other government benefits earned through service.

- We offer free rides to all veterans who need help getting to and from VA medical appointments. Last year roughly 700,000 rides were given nationwide. In Wisconsin, over 42,000 rides are given each year.

- We fight for the rights of wounded, injured and ill veterans on Capitol Hill and the Capitol in Madison by reminding legislators to Keep the Promise made to the men and women who served.

DAV helps nearly 300,000 veterans each year obtain needed benefits through more than 100 offices throughout the United States and Puerto Rico. Our Wisconsin office, located in Milwaukee, represents roughly 12,000 veterans annually. These offices are staffed by National Service Officers who are attorneys-in-fact.

We also reach out to veterans in rural areas with a mobile service van staffed by these highly trained National Service Officers. No other organization has helped more veterans lead high-quality lives than ours.

We're effective because we've been doing this for 97-plus years and because our team are all veterans themselves. We are veterans helping veterans. They're not only good at what they do, they understand better than anyone else the unique and pressing needs facing veterans returning home who must learn to live with illnesses or injuries related to their service.

DAV is a nonprofit organization, founded in 1920 and congressionally chartered in 1932, with 1.3 million members nationwide and more than 15,000 members in Wisconsin.

- DAV is a Better Business Bureau Accredited Charity.
- In 2016, over 85% of DAV Expenses went to Service Programs that directly service veterans.
- Our Charitable Service Trust earned Four Stars from Charity Navigator, the nation's largest charity evaluator. Four Stars is its highest rating.

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TABLE OF CONTENT

	Res. No.	Page No.
DAV Statement of Policy		1
BENEFITS		
Oppose Reduction, Taxation or Elimination of Veterans' Benefits	2017-02	3
Support Legislation to Increase Disability Compensation	2017-03	4
Support Legislation to Remove the Prohibition Against Concurrent Receipt of Military Retired Pay and Veterans' Disability Compensation for All Longevity Retired Veterans	2017-04	5
Support Legislation to Remove the Prohibition Against Concurrent Receipt of Survivor Benefit Plan Payments and Dependency and Indemnity Compensation	2017-05	6
Support Legislation to Allow All Veterans to Recover Amounts Withheld as Tax on Disability Severance Pay	2017-06	7
Expand Prisoner-of-War Presumptions and Eligibility for Dependence and Indemnity Compensation for Surviving Spouses of Certain Former Prisoners of War	2017-07	8
Support Presumptive Service Connection for Tinnitus and Hearing Loss	2017-08	9
Support Legislation Providing that Special Separation Benefits Payments not be Withheld from Department of Veterans Affairs Disability Compensation Payments	2017-09	10
Support Legislation to Provide for Realistic Cost-of-Living Allowances	2017-10	11
Support Legislation to Exclude Veterans' Disability Compensation from Countable Income for Purposes of Eligibility to Benefits and Services Under Other Government Programs	2017-11	13
Oppose Any Proposal that Would Offset Payments of Social Security Disability Insurance Benefits or Any Other Federal Benefits by Department of Veterans Affairs Compensation	2017-12	14
Oppose Subjecting Compensation to Means Testing	2017-13	15
Oppose the Permanent Rounding Down of Cost-of-Living Adjustments in Veterans' Benefits	2017-14	16
Support Legislation to Clarify that Service in the Republic of Vietnam for Purposes of Benefits Based on Exposure to Herbicides Includes Service in the Waters Offshore	2017-15	17
Oppose Any Recommendations by Any Commission to Reduce or Eliminate Benefits for Disabled Veterans	2017-16	19
Support Legislation to Reduce the 10-Year Rule for Dependency and Indemnity Compensation	2017-17	20

Res. No.		Page No.
Support Reasonable Presumptive Period for Undiagnosed Illnesses for Gulf War Veterans	2017-18	21
Support Legislation that Would Exempt the Benefits Paid to Wartime Service-Connected Disabled Veterans from the "Pay-go/Cut-go" Provisions of the Budget Enforcement Act	2017-19	22
Amend the Law to Provide a 10-Year Protection Period for Service-Connected Disability Evaluations	2017-20	23
Oppose Any Change that Would Redefine Service-Connected Disability or Restrict the Conditions or Circumstances Under Which It May Be Established	2017-21	24
Consider Treatment for a Presumptive Service-Connected Condition as a Claim for Department of Veterans Affairs Compensation	2017-22	25
Oppose Lump-Sum Payments for Service-Connected Disabilities	2017-23	26
Oppose the Imposition of Time Limits for Filing Compensation Claims	2017-24	27
Support Meaningful Reform Claims and Appeals Processing Reform	2017-25	28
Support Legislation to Provide for Service Connection for Disabling Conditions Resulting from Toxic and Environmental Exposure	2017-27	30
Improve the Care and Benefits for Veterans Exposed to Military Toxic and Environmental Hazards	2017-28	31
HEALTH CARE		
Support Legislation to Require the President, Vice President and Members of Congress to Receive Health Care Exclusively from the department of Veterans Affairs	2017-29	34
Support Modernizing Department of Veterans Affairs Health Care Infrastructure	2017-30	36
Support State Veterans Home Program	2017-31	38
Support Legislation to Extend Eligibility of a Veteran's Adult Child for the Civilian Health and Medical Program of the Department of Veterans	2017-32	40
Support Enhanced Medical Services and Benefits for Women Veterans	2017-33	41
Support Legislation to Provide Comprehensive Services for Caregivers of Severely Wounded, Injured and Ill Veterans from All Eras	2017-34	43
Ensure Timely Access to Quality Department of Veterans Affairs Health Care and Medical Services	2017-35	45
Adequately Fund and Sustain the Successful Readjustment Counseling Service of the Department of Veterans Affairs and Its Highly Effective Vet Center Program	2017-36	46

	Res. No.	Page No.
Oppose Means Testing Service-Connected Veterans for Department of Veterans Affairs Health Care	2017-37	48
Support Legislation to Eliminate or Reduce Department of Veterans Affairs and Department of Defense Health Care Copayment Costs to Service-Connected Disabled Veterans	2017-38	48
Support Humane, Consistent Pain Management Programs in the Veterans Health Care System	2017-39	51
Support Enhanced Treatment for Military Sexual Trauma	2017-40	53
Support Programs to Provide Psychological and Mental Health Counseling Services to Family Members of Veterans Suffering from Post-Deployment Mental Health Challenges or Other Services-Connected Conditions	2017-41	55
Oppose Recovery of Third-Party Payments for Service-Connected Disabilities	2017-42	57
Medical Marijuana (MMJ)	2017-43	58
MISCELLENEOUS		
Monitor Activities of the Mandatory Transition Goals, Plans, Success Program	2017-44	60
Eliminate the Delimiting Date for Eligible Spouses and Surviving Spouses for Benefits Provided Under Chapter 35, Title 38, United States Code	2017-45	61
Encourage All Disabled Veterans to Become Registered Voters and Vote	2017-46	62
Support the Continued Growth of Veterans Treatment Courts for Justice-Involved Veterans	2017-47	63
STATE		
Support Adequate and Equitable Funding for State Veterans' Programs that are Beneficial to Wounded, Injured and Ill Veterans	2017-48	66
Support Annual Reports for all State Programs Which Benefit Veterans with Service-Connected Disability Ratings to Determine Their Effectiveness	2017-49	67
Expansion of Benefits in the Wisconsin G.I. Bill for Spouses and Children of Veterans with a Service-Connected Disability Rating of at Least 30 Percent	2017-50	68
Increase Awareness and Effectiveness for Wisconsin's Disabled Veteran-Owned Business Program	2017-51	69
Support a Thorough and Systematic Process when Major Changes to Veterans Benefits and Health Care Are Proposed	2017-52	71
Support a Graduated Revision to the Wisconsin Veterans and Surviving Spouses Property Tax Credit	2017-53	72

DAV STATEMENT OF POLICY

The Disabled American Veterans was founded on the principle that this nation's first duty to veterans is the rehabilitation and welfare of its wartime disabled. This principle envisions:

1. High quality hospital and medical care provided by the Department of Veterans Affairs for veterans with disabilities incurred in or aggravated by service in America's armed forces.

2. Adequate compensation for the loss resulting from such service-connected disabilities.

3. Vocational rehabilitation and/or education to help the disabled veteran prepare for and obtain gainful employment.

4. Enhanced opportunities for employment and preferential job placement so that the remaining ability of the disabled veteran is used productively.

5. Adequate compensation to the surviving spouses and dependents of veterans whose deaths are held to be service-connected under laws administered by the Department of Veterans Affairs.

6. Enhanced outreach to ensure that all disabled veterans receive all benefits they have earned and that the American people understand and respect the needs these veterans encounter as a result of their disabilities.

It therefore follows that we will not take action on any resolution that proposes legislation designed to provide benefits for veterans, their surviving spouses and dependents, which are based upon other than wartime service-connected disability.

We shall not oppose legislation beneficial to those veterans not classified as service-connected disabled, except when it is evident that such legislation will jeopardize benefits for service-connected disabled veterans.

While our first duty as an organization is to assist the service-connected disabled, their surviving spouses and dependents, we shall within the limits of our resources assist others in filing, perfecting and prosecuting their claims for benefits.

Since this represents the principle upon which our organization was founded and since it is as sound at this time as it was in 1920, we hereby reaffirm this principle as the policy for the Disabled American Veterans.

LEGISLATIVE RESOLUTIONS

BENEFITS

RESOLUTION 2017-02

Oppose Reduction, Taxation Or Elimination Of Veterans' Benefits

WHEREAS, veterans' benefits are earned benefits paid to veterans and their families for their service to the nation; and

WHEREAS, veterans' benefits are part of a covenant between our nation and its defenders; and

WHEREAS, certain government leaders have continued to attack veterans' benefits in an attempt to tax those benefits, reduce them, or eliminate them completely; and

WHEREAS, these attacks recur with regularity and serious intent; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, vigorously opposes reduction, taxation or elimination of veterans' benefits.

RESOLUTION 2017-03

Support Legislation To Increase Disability Compensation

WHEREAS, it is the historical policy of DAV that this nation's first duty to veterans is to provide for the rehabilitation of its wartime disabled; and

WHEREAS, the percentage ratings for service-connected disabilities represent, as far as can be practicably determined, the average impairment in earning capacity resulting from such disabilities in civil occupations; and

WHEREAS, compensation increases should be based primarily on the loss of earning capacity; and

WHEREAS, disabled veterans who are unable to work because of service connected disabilities should be entitled to compensation payments commensurate with the after-tax earnings of their able-bodied contemporaries; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports the enactment of legislation to provide a realistic increase in Department of Veterans Affairs compensation rates to bring the standard of living of disabled veterans in line with that which they would have enjoyed had they not suffered their service-connected disabilities.

RESOLUTION 2017-04

Support Legislation To Remove The Prohibition Against Concurrent Receipt Of Military Retired Pay And Veterans' Disability Compensation For All Longevity Retired Veterans

WHEREAS, current law provides that service connected veterans rated less than 50 percent who retire from the Armed Forces on length of service do not receive disability compensation from the Department of Veterans Affairs (VA) in addition to full military retired pay; and

WHEREAS, these disabled veterans must therefore surrender retired pay in an amount equal to the disability compensation they receive; and

WHEREAS, this offset is unfair to veterans who have served faithfully in military careers inasmuch as these veterans have earned their retired pay by virtue of their long service to the Nation and wholly apart from disabilities due to military service; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports legislation to repeal the offset between military longevity retired pay and VA disability compensation.

RESOLUTION 2017-05

Support Legislation To Remove The Prohibition Against Concurrent Receipt Of Survivor Benefit Plan Payments And Dependency And Indemnity Compensation

WHEREAS, the Survivor Benefit Plan (SBP) payments are payments of an insurance annuity for which the retired military member pays premiums for this coverage; and

WHEREAS, Dependency and Indemnity Compensation (DIC) is paid to the surviving spouse of a service member, retiree or veteran who dies of a service-connected condition; and

WHEREAS, these two programs are unrelated to each other; and

WHEREAS, under current law SBP payments are reduced, by the amount of DIC received; and

WHEREAS, this offset is extremely unfair to the spouses whose service members faithfully paid premiums in anticipation of a fair annuity; and

WHEREAS, there should not be a delimiting date to apply for SBP as the current six-year statute of limitation has severe and adverse consequences on survivors; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports legislation to repeal the offset between SBP annuity payments and DIC Compensation Payments; AND

BE IT FURTHER RESOLVED that the six-year statute of limitation should be waived if the offset between DIC and SBP is removed.

RESOLUTION 2017-06

Support Legislation To Allow All Veterans To Recover Taxes On Disability Severance Pay

WHEREAS, certain funds received by military service members determined to be unfit for duty as a result of personal injury or disability are not taxable; and

WHEREAS, the Internal Revenue Service (IRS) continues to tax military disability severance pay as regular income; and

WHEREAS, a United States District Court has held that military disability severance pay is nontaxable income; and

WHEREAS, the IRS has acquiesced in the District Court holding; and

WHEREAS, the three-year statute of limitations prevents veterans who have been discharged for more than three years from recovering the nontaxable money withheld by the IRS; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, strongly supports legislation which would allow all veterans to recover nontaxable income withheld from their disability severance pay, notwithstanding the three-year statute of limitations which would otherwise prevent such recovery.

RESOLUTION 2017-07

Expand Prisoner-Of-War Presumptions And Eligibility For Dependency And Indemnity Compensation For Surviving Spouses Of Certain Former Prisoners Of War

WHEREAS, former prisoners-of-war (POWs) suffered cruel and inhumane treatment, together with nutritional deprivation at the hands of their captors, which resulted in long-term adverse health effects; and

WHEREAS, POWs were subjected to numerous and varying forms of abuse dependent upon the place, time, and circumstance of their captivity by the enemy; and

WHEREAS, for this reason, former POWs suffer from a wide range of physical and psychological maladies; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, 2016, supports legislation which would add those medical conditions which are characteristically associated with or can be reasonably attributed to the POW experience as presumptive disorders for former POWs; AND

BE IT FURTHER RESOLVED that DAV urges passage of legislation that would expand eligibility for Dependency and Indemnity Compensation to surviving spouses of certain former POWs, who died prior to September 30, 1999, and who were rated totally disabled at the time of death for a service-connected disability for a period of not less than one year.

RESOLUTION 2017-08

Support Presumptive Service Connection For Tinnitus And Hearing Loss

WHEREAS, veterans of the armed services who served in combat or in certain occupational specialties have a high incidence rate of hearing loss or tinnitus as a direct result of acoustic trauma; and

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

WHEREAS, veterans, in those cases, were not afforded a comprehensive audiological examination upon entrance and discharge from military service; and

WHEREAS, in recent years, the second leading disability granted service connection by the Department of Veterans Affairs was for hearing loss or tinnitus; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports entitlement to service connection on a presumptive basis for any veteran suffering from hearing loss or tinnitus, which manifests itself to a degree of 10 percent or more within a year of discharge from military service, and the evidence shows the veterans participated in combat or worked in a position or military occupational specialty likely to cause acoustic trauma.

RESOLUTION 2017-09

Support Legislation Providing That Special Separation Benefits Payments Not Be Withheld From Department Of Veterans Affairs Disability Compensation Payments

WHEREAS, as a result of the downsizing of our military forces, many career military personnel have left service prior to becoming eligible for longevity retirement pay; and

WHEREAS, these individuals are entitled to separation pay; and

WHEREAS, many of these individuals also become eligible for Department of Veterans Affairs (VA) disability compensation; and

WHEREAS, VA General Counsel, in an opinion rendered on June 22, 1992, held that any monies received as a result of the Special Separation Benefit (SSB) must be recouped from any VA disability compensation payment; and

WHEREAS, SSB payments are in no way related to a disability; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports legislation to clarify that SSB payments are not disability payments and therefore should not be recouped from VA disability compensation payments.

RESOLUTION 2017-10

Support Legislation To Provide For Realistic Cost-Of-Living Allowances

WHEREAS, the Department of Labor provides statistical information and analysis that
impacts the annual cost-of-living adjustment (COLA) for disabled veterans, military retirees, and Social Security recipients; and

WHEREAS, the calculations regarding COLAs are the domain of the Social Security Administration, using a formula that has been directly linked to the Consumer Price Index since 1975, prescribed by law when calculating any COLA increase; and

WHEREAS, in general, a COLA is equal to the percentage increase in the Consumer Price Index for Urban Wage Earners and Clerical Workers (CPI-W) from the third quarter of one year to the third quarter of the next, and if there is no increase, there is no COLA; and

WHEREAS, the formula that derives the level of increase is tied to the United States
economy on a very broad basis; stagnant economic activity does not mean disabled veterans' cost of living is flat; in fact, as they age and suffer from associated illnesses of aging, their costs increase; and

WHEREAS, the COLA formula has been adjusted to remove items such as groceries and fuel from such calculations; and

WHEREAS, it is unfair that disabled veterans are denied necessary increases in disability payments due to a formula that actually has little to do with the costs they bear; and

WHEREAS, there have been recent attempts to adjust the COLA downward in various methods such as "Chained CPI;" and

WHEREAS, disabled veterans disability compensation has not kept pace with the rest of the economy, even in years when there were COLA payments, disability benefits lagged; and

WHEREAS, many disabled veterans and their survivors are on fixed incomes and rely on COLAs to meet their current living expenses; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, 1-3, 2017, supports legislation to

provide for a COLA formula that represents a realistic cost-of-living allowance for our nation's disabled veterans, their dependents and survivors.

RESOLUTION 2017-11

Support Legislation To Exclude Veterans' Disability Compensation From Countable Income For Purposes Of Eligibility To Benefits And Services Under Other Government Programs

WHEREAS, by virtue of their service and sacrifices, disabled veterans deserve special benefits that are separate and in addition to benefits the government provides to other citizens; and

WHEREAS, compensation for the effects of service-connected disabilities is counted as income in determinations of eligibility for other government benefits and programs, such as low income housing through the Department of Housing and Urban Development; and

WHEREAS, the value of compensation is negated and its purposes are defeated when a veteran's receipt of compensation is used to reduce or deny entitlement to government benefits or services available to other citizens; and

WHEREAS, when a veteran's compensation is offset against other entitlements, it is in effect deducted from the programs generally available to other citizens, and the veteran really receives nothing additional for his or her disability and is thus not compensated; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, seeks legislation to exclude veterans' disability compensation from countable income for purposes of entitlement to benefits or services under other government programs.

RESOLUTION 2017-12

Oppose Any Proposal That Would Reduce Payments Of Department Of Veterans Affairs Compensation By Payments Of Social Security Disability Insurance Or Any Other Federal Benefits Paid To A Veteran

WHEREAS, consideration has been given to offsetting Social Security Disability Insurance (SSDI) benefits from any other federal benefit; and

WHEREAS, the adoption of such a measure would reduce the overall income provided to veterans who have a compensable service-connected disability and who also determined to be permanently and totally disabled for purposes of SSDI by the Social Security Administration; and

WHEREAS, such an offset would work a grave and undue hardship on all totally disabled service-connected veterans and their families by drastically reducing their total income; and

WHEREAS, benefits received from the Department of Veterans Affairs (VA) or under military retirement pay and other Federal programs have differing eligibility criteria compared to eligibility for SSDI benefits; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, opposes any measure that proposes to offset the payment of any other Federal benefit or earned benefit entitlement by VA compensation payments made to service-connected disabled veterans.

RESOLUTION 2017-13

Oppose Subjecting Compensation To Means Testing

WHEREAS, the citizens of our nation have heretofore honorably recognized their indebtedness to those who sacrificed in the service of their country by providing compensation as restitution for the personal injuries or diseases suffered in such service; and

WHEREAS, a disabled veteran is rightfully entitled to restitution for the effects of service-connected disability, without regard to good fortune or income of the veteran or spouse from sources wholly independent of the government's obligations to the veteran; and

WHEREAS, it is unfair for the government to seek to disclaim its obligation to disabled veterans or their survivors merely because of the receipt of other, unrelated income; and

WHEREAS, notwithstanding the special status of disability compensation and Dependency and Indemnity Compensation, efforts have been made to deploy a means test to reduce or eliminate them in cases in which the veteran or spouse, or survivor has obtained other income; and

WHEREAS, degrading compensation by providing it to the extent of the veteran's or survivor's economic needs rather than as a measure of restitution for personal injury or illness, thereby disassociates compensation from that which merits it and associates it with factors that govern purely gratuitous benefits; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, opposes any proposal to means test disability and Dependency and Indemnity Compensation.

RESOLUTION 2017-14

Oppose The Permanent Rounding Down Of Cost-Of-Living Adjustments In Veterans' Benefits

WHEREAS, to maintain the worth of veterans' benefits, they must be adjusted to keep pace with the rise in the cost of living; and

WHEREAS, permanently rounding down the adjusted rates to the next lower dollar amount will erode the value of these benefits over time and thus does not keep pace with the rise in the cost of living; and

WHEREAS, permanently rounding down veterans' cost-of-living adjustments (COLAs) unfairly targets veterans, their dependents and survivors for cost savings to the government; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, opposes permanent rounding down of COLAs for veterans disability compensation, and compensation to their dependents and survivors.

RESOLUTION 2017-15

Support Legislation That Service In The Waters Offshore Vietnam Establishes A Presumption Of Exposure To Agent Orange

WHEREAS, over the decade from 1961 to 1971, our military forces sprayed approximately 21 million gallons of herbicide agents in Vietnam; and

WHEREAS, these herbicide agents, the most common of which was designated "Agent Orange," contained the contaminant dioxin, one of the most toxic substances known to exist; and

WHEREAS, the dispersion and deposition of, and human exposure to, dioxins were not limited to areas directly sprayed, inasmuch as it is acknowledged that the chemical was carried away from the areas of application by canals, rivers, and streams, and that airborne particulates were carried by wind drift; and

WHEREAS, Congress has provided that, for purposes of establishment or presumption of service connection for a disability or death related to herbicide exposure, a veteran who, during active military, naval, or air service, "served in the Republic of Vietnam during the period beginning on January 9, 1962, and ending on May 7, 1975, [and] shall be presumed to have been exposed during such service to [a] herbicide agent . . . unless there is affirmative evidence to establish that the veteran was not exposed to any such agent" during that service; and

WHEREAS, the Department of Veterans Affairs (VA) has arbitrarily interpreted "served in the Republic of Vietnam" to mean only service on the land mass of Vietnam and not waters offshore within its national boundaries; and

WHEREAS, the exclusion of territorial seas or waters from the term "Republic of Vietnam" is contrary to the plain and unqualified language of current law and illogical insofar as its premise is that herbicides could be carried away from the area of application across any expanse of land but not to such waters; and

WHEREAS, various illnesses have been linked to and are presumed due to exposure to these herbicide agents; and

WHEREAS, veterans who served on ships no more distant from the spraying of these herbicides than many who served on land are arbitrarily and unjustly denied benefits of the presumption of exposure and thereby are ineligible for the presumption of service connection for herbicide related disabilities; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports legislation to expressly provide that the phrase "served in the Republic of Vietnam" includes service in the territorial waters offshore.

RESOLUTION 2017-16

Oppose Any Recommendations By Any Commission To Reduce Or Eliminate Benefits For Disabled Veterans

WHEREAS, American citizens owe their freedoms and way of life to disabled veterans who made extraordinary personal sacrifices and who suffer lifelong disabilities as a consequence; and

WHEREAS, those who serve in our armed forces stand ready to endure any hardships and expose themselves to any hazards on behalf of their country and our citizens, and

WHEREAS, our government did not hesitate in asking them to give life or limb if necessary, and

WHEREAS, our elected officials surely should not renege on our reciprocal obligation when our disabled veterans ask for so comparatively little in return; and

WHEREAS, we, as a nation, owe no more important indebtedness nor greater moral obligation than the indebtedness and obligation we have to disabled veterans; and

WHEREAS, some elected officials nonetheless prefer to minimize or ignore the suffering of disabled veterans, despite the debt, and this national responsibility; and

WHEREAS, any effort on the part of legislators to find ways to avoid compensating disabled veterans, especially in time of war, is unconsciousable; and

WHEREAS, our Government continues to establish commissions to review veterans benefits and entitlements in an effort to balance the budget; and

WHEREAS, honorable and great nations of conscience do not abandon their wounded, injured or ill wartime veterans; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, reminds our elected officials of our undebatable responsibility to fairly and fully compensate veterans for all the effects of disabilities incurred or aggravated in the line of duty as provided in the equitable standards of current law and regulations; AND

BE IT FURTHER RESOLVED that DAV vigorously opposes any recommendations made for the purpose of reducing, adding limitations on, or eliminating benefits for service-connected disabled veterans or their families.

RESOLUTION 2017-17

Support Legislation To Reduce The 10-Year Rule For Dependency And Indemnity Compensation

WHEREAS, section 1318 (b) (1), title 38, United States Code, provides Dependency and Indemnity Compensation (DIC) benefits for survivors of certain veterans rated totally disabled for 10 or more years; and

WHEREAS, the financial status of the surviving spouse is compromised due to the care required by the totally disabled veteran and provided by the caregiver spouse; and

WHEREAS, the veteran's spouse, acting as caregiver for the veteran, must in many cases limit, or give up, or put careers on hold; and

WHEREAS, it is inherently unfair that the spouse should carry this additional burden for 10 years or more before qualifying for DIC; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports legislation to reduce this 10-year rule for DIC qualification to a more reasonable period of time.

RESOLUTION 2017-18

Support Reinstatement Of Reasonable Presumptive Period For Undiagnosed Illnesses In Gulf War Veterans

WHEREAS, thousands of Gulf War veterans still suffer from chronic unexplained physical symptoms; and

WHEREAS, the numerous symptoms experienced by sick Gulf War veterans are not well understood and the causes of such symptoms remain elusive and answers could likely remain obscure for some time; and

WHEREAS, little significant research is being conducted on long-term health effects of many of the agents to which veterans were potentially exposed during the Gulf War; and

WHEREAS, additional research into the long-term health effects of exposures is needed, a fact confirmed in a September 2000 report by the Institute of Medicine (now the National Academy of Medicine) on the health effects of exposures during the Gulf War; and

WHEREAS, the presumptive period for undiagnosed illnesses was extended until September 30, 2011; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, urges that legislation be enacted to extend the presumptive period for service connection for ill-defined and undiagnosed illnesses to a reasonable period.

RESOLUTION 2017-19

Support Legislation That Would Exempt The Benefits Paid To Wartime Service-Connected Disabled Veterans From The "PAYGO/CUTGO" Provisions Of The Budget Enforcement Act

WHEREAS, wartime disabled veterans have earned the benefits and services they, their dependents and survivors receive from the Department of Veterans Affairs (VA) as a result of the injuries sustained during their period of wartime service; and

WHEREAS, the benefits and services received by wartime disabled veterans as a result of their service-connected disabilities is an extension of the costs of war; and

WHEREAS, this country has a moral obligation to continue to care for these citizen-soldiers who have risen in defense and support of the ideals of this great nation and who have returned to civilian life with service-connected disabilities; and

WHEREAS, the benefits and services provided to America's veterans, dependents and survivors have not caused this nation's deficit problems; and

WHEREAS, the so-called "PAYGO/CUTGO" provisions of the Budget Enforcement Act require any new benefits or services to be paid out of existing benefits or programs, in effect, requiring one group of disabled veterans to give up a benefit or service so that another worthy group of wartime disabled veterans can receive benefits or services to which they are entitled; and

WHEREAS, the adoption of budget caps and sequestration have often limited the ability of congressional appropriations committees to fully fund all veterans programs, services and benefits; and

WHEREAS, veterans suffering from ailments associated with their service in the military are compensated from funds generated by cutting the benefits of other service-connected veterans and their survivors; and

WHEREAS, the benefits and services provided to wartime disabled veterans are unique and not a gratuitous benefit; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports legislation to exempt VA benefits and services provided to service-connected disabled veterans, their dependents and survivors from the "PAYGO/CUTGO" provisions of the Budget Enforcement Act.

RESOLUTION 2017-20

Amend the Law To Provide A 10-Year Protection Period For Service-Connected Disability Evaluations

WHEREAS, section 110, title 38, United States Code, now provides for the protection of all disability compensation evaluations that have been continuously in effect for 20 or more years; and

WHEREAS, permanency should be conceded for disability compensation ratings which have been in effect for 10 years without change in evaluation with no further examination scheduled; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports amendment of section 110, title 38, United States Code, to provide that disability evaluations continuously in effect at the same evaluation rate be protected after a period of 10 continuous years.

RESOLUTION 2017-21

Oppose Any Change That Would Redefine Service-Connected Disability Or Restrict The Conditions Or Circumstances Under Which It May Be Established

WHEREAS, current law authorizes service connection for disabilities incurred or aggravated during service in the United States armed forces in the line of duty; and

WHEREAS, various proposals have been made to limit service connection to disabilities caused directly by the performance of duty; and

WHEREAS, disability incurred in the line of duty is sometimes not directly due to a job injury but may be due to less obvious factors attributable to the Armed Forces environment; and

WHEREAS, proof of a causal relationship may often be difficult or impossible notwithstanding an inability to disassociate the disability from service-related factors; and

WHEREAS, current law equitably alleviates the onerous burden of establishing performance of duty or other causal connection as a prerequisite for service connection; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, opposes changes in current law so as to redefine and restrict the conditions under which service connection may be established.

RESOLUTION 2017-22

Consider Treatment For A Presumptive Service-Connected Condition As A Claim For Department Of Veterans Affairs 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 Department of Veterans Affairs (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 that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, urges Congress to enact legislation requiring that treatment by the 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.

RESOLUTION 2017-23

Oppose Lump-Sum Payments For Service-Connected Disabilities

WHEREAS, disability compensation is paid monthly to an eligible veteran on account of and at a rate commensurate with diminished earning capacity resulting from the effects of service-connected disease or injury; and

WHEREAS, such compensation, by design, continues to provide relief from the service-connected disability for as long as the veteran continues to suffer its effects at a compensable level; and

WHEREAS, by law, the rate of compensation is determined by the level of disability present, thereby requiring reevaluation of the disability upon a change in its degree; and

WHEREAS, various entities have suggested lump-sum payments as a way for the government to avoid the administrative costs of reevaluating service-connected disabilities and as a way to avoid future liabilities to service-connected disabled veterans when their disabilities worsen or cause secondary disabilities; and

WHEREAS, such lump-sum payments would not, on the whole, be in the best interests of disabled veterans but would be more intended for Government savings and convenience; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, opposes any change in law to provide for lump-sum payments of Department of Veterans Affairs disability compensation.

RESOLUTION 2017-24

Oppose The Imposition Of Time Limits For Filing Compensation Claims

WHEREAS, veterans suffer lifelong impairments from disabilities incurred in connection with military service; and

WHEREAS, compensation is a benefit available to service-connected veterans at any time they choose to claim it; and

WHEREAS, veterans who, for whatever reason, do not initially desire to claim and receive compensation should not forfeit the right to claim and receive it at some later time; and

WHEREAS, the Veterans' Claims Adjudication Commission, created by Congress to study the Department of Veterans Affairs (VA) claims processing system, suggested a time limit for filing compensation claims as a way to reduce VA's workload; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, opposes any change in law to limit the time for filing compensation claims.

RESOLUTION 2017-25

Support Meaningful Claims and Appeals Processing Reform

WHEREAS, Congress has created a system for the administration of veterans' benefits and services, and the Veterans Benefits Administration (VBA) is responsible for processing veterans claims and appeals for myriad benefits and services; and

WHEREAS, the number of claims filed and appealed each year is growing, the complexity of claims and appeals filed is increasing, the backlog of non-rating claims and appeals pending is too large, and the accuracy of claims must continue to be improved; and

WHEREAS, VBA's primary emphasis of reducing the disability claims backlog resulted in less attention to other work that led to significant increase in non-rating-related claims and a rising backlog of appeals that now stands at roughly 450,000; and

WHEREAS, VBA has reached out to veterans service organizations accredited to represent veterans in the claims process for assistance in reforming its claims processing system, particularly DAV because of our experience and success in representing more than 300,000 veterans each year, and

WHEREAS, VBA has made measurable progress in reducing the numbers of disability claims pending in the backlog (defined as those pending more than 125 days), which dropped from 611,000 in March 2013 to about 80,000 in July 2016,, while also improving accuracy; and

WHEREAS, when VBA reports on the average days pending for claims, VBA does not include non-rating claims, and these claims are just as important and should be accounted for when reporting average days of pending claims; and

WHEREAS, any claims or appeals reform must preserve or enhance veterans' due process rights and ensure that adjudications are fair, accurate, timely, and of acceptable quality; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, calls on Congress and VBA to support significant and meaningful claims and appeals processing reforms to address VA's overall claims and appeals workloads; AND

BE IT FURTHER RESOLVED that DAV supports legislation and other policies that will strengthen training, testing and quality control, as well as accountability

measures to ensure that VBA leaders and employees develop a corporate culture focused on getting each claim decided right the first time; AND

BE IT FURTHER RESOLVED that DAV supports legislation to give due deference to private medical evidence that is competent, credible, probative, and otherwise adequate for rating purposes, as well as legislation and policies that encourage the use of private medical evidence, including allowing private physicians to have access to all Disability Benefit Questionnaires (DBQs); AND

BE IT FURTHER RESOLVED that DAV calls on Congress and VBA to ensure that all proposals to streamline and automate the claims development and rating process fully protect veterans' rights and that automated rating processes, such as automated decision letters, provide sufficient and specific information to inform veterans and their advocates about the reasons and bases for rating decisions, AND

BE IT FURTHER RESOLVED that DAV calls on Congress and VBA to ensure that sufficient funding is requested and provided to complete all reform and transformation initiatives.

RESOLUTION 2017-27

Support Legislation To Provide For Service Connection For Disabling Conditions Resulting From Toxic And Environmental Exposures

WHEREAS, veterans of all military conflicts from the World Wars to the wars in Iraq and Afghanistan have been exposed to toxic and environmental exposures such as mustard gas, herbicides, cold weather, chemical, biological agents, harmful levels of radiation, and other combat operation exposures; and

WHEREAS, veterans may not know for years or decades about the toxic or environmental conditions they were exposed to during military service; and

WHEREAS, returning from war, veterans subsequently suffer from disabling conditions that are not immediately identified as a result of such exposures; and

WHEREAS, the Department of Defense (DoD) has not always been willing to publicly share information regarding exposures during military service with other government departments or agencies or with the individuals involved; and

WHEREAS, research conducted by the National Institutes of Health, DoD and the Department of Veterans Affairs (VA), and other federal agencies have focused on relationships between toxic and environmental exposures and health outcomes of veterans and pending claims; and

WHEREAS, such research is necessary to ensure veterans receive high quality health services and benefits they are entitled due to diseases or injuries resulting from deployment exposures; and

WHEREAS, in studies mandated by Congress, the National Academy of Sciences continues to review and evaluate scientific literature to determine whether a link exists between exposure and certain physical disorders; and

WHEREAS, VA and DoD must collaborate and share necessary deployment, health, and exposure data to better address the health conditions experienced by disabled veterans; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, vigorously supports the VA's expeditious handling of veterans' claims and the payment of fair and just compensation for all conditions associated with the veteran's service and related exposure to toxic and environmental hazards.

RESOLUTION 2017-28

Improve The Care And Benefits For Veterans Exposed To Military Toxic And Environmental Hazards

WHEREAS, veterans of all military conflicts from the World Wars to the wars in Iraq and Afghanistan have been exposed to environmental hazards and man-made toxins, including cold and other adverse weather conditions; mustard gas; herbicides; pesticides; chemical, biological and radiological agents; "burn pits;" and other combat and military occupational exposures; and

WHEREAS, returning from war, some veterans subsequently suffer disabling conditions and symptoms of illnesses that may be difficult to medically diagnose, and not be immediately identified as consequential to such dangerous exposures; and

WHEREAS, research conducted by the National Institutes of Health, the Departments of Defense (DoD) and Veterans Affairs (VA), and other federal departments and agencies has focused on associations linking toxic and environmental exposures with subsequent health status of veterans (and in the case of Vietnam veterans, some of their children); and

WHEREAS, sustained funding for such research is necessary to ensure veterans receive high quality health care services and adequate compensatory benefits to which they are entitled due to diseases or injuries incurred from hazardous military exposures; and

WHEREAS, in studies mandated by Congress in public law, the National Academy of Sciences continues to review and evaluate scientific literature to determine whether associations exist that connect a variety of military exposures and certain physical disorders within populations of veterans; and

WHEREAS, effective evidence-based medicine to treat individual patients with acute or chronic diseases must rely on scientifically valid biomedical research and peer-reviewed literature; NOW

THEREFORE, BE IT RESOLVED that DAV in National Convention assembled in Atlanta, Georgia, July 31–August 3, 2016, urges Congress to actively oversee its established mechanism of delegation to the National Academy of Sciences and VA to determine validations of, and develop equitable compensation policy for, environmentally exposed veterans; AND

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, urges Congress to

provide adequate funding for research to identify all disabling conditions and effective screening and treatment for such disabilities that may have been caused by exposure to environmental hazards and man-made toxins while individuals served in the armed forces of the United States; AND

BE IT FURTHER RESOLVED that DAV urges greater collaboration between DoD and VA to share necessary deployment, health and exposure data from military operations and deployments, in order to timely and adequately address the subsequent health concerns of disabled veterans, whatever the causes of those disabilities; AND

BE IT FURTHER RESOLVED that DAV intends to closely monitor programs of care within the Veterans Health Administration to ensure veterans disabled by exposure to environmental hazards and man-made toxins receive effective, high-quality health care, and that the biomedical research and development programs of the Department are fully addressing their needs.

LEGISLATIVE RESOLUTIONS

HEALTH CARE

RESOLUTION 2017-29

Support Legislation To Require The President, Vice President And Members Of Congress To Receive Health Care Exclusively From The Department Of Veterans Affairs

WHEREAS, even though veterans' health care is funded through an advance appropriation, it is still at the discretion of Congress to provide the level of funding necessary for the veterans' health care system; and

WHEREAS, the President and many members of Congress insist that the Department of Veterans Affairs (VA) health care system is adequately funded; and

WHEREAS, VA is recognized as the best health care system in the United States, and for providing high quality health care services; and

WHEREAS, by using the VA health care system, the President, Vice President, and members of Congress would be in a better position to understand the resource needs of VA to enable it to provide timely quality health care to our nation's veterans; and

WHEREAS, similar to the members of the military, the President, Vice President, and most Members of Congress are required to spend a significant amount of time away from their homes, families, and friends while Congress is in session; and

WHEREAS, because of the patriotism, devotion, and sacrifices of our President, Vice President, and Members of Congress, ours is the most free nation on earth, where our citizens enjoy unequalled rights, privileges, and prosperity; and

WHEREAS, the President, Vice President, and Members of Congress should therefore be granted the privilege of using the VA health care system for their medical needs; and

WHEREAS, if the President, Vice President, or member of Congress is a veteran, he or she would be classified into the proper priority group for purpose of receipt of VA medical care; and

WHEREAS, if the President, Vice President, or member of Congress is not a veteran, he or she would be classified as a non service-connected veteran in either Priority Group 7 or 8, depending on their income; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports legislation to require the President, Vice President, and Members of Congress to

enroll for VA medical care services and receive health care exclusively from the VA health care system.

RESOLUTION 2017-30

Support Modernizing Department Of Veterans Affairs Health Care Infrastructure

WHEREAS, the Veterans Health Administration of the Department of Veterans Affairs (VA) is the largest integrated health care system in the United States, with over 1,400 sites of care, including comprehensive medical centers, community-based outpatient clinics, nursing homes, readjustment counseling "Vet Centers," residential rehabilitation treatment programs, and other facilities for the delivery of health care; and

WHEREAS, the majority of VA's capital infrastructure was designed and built under an outmoded concept of health care delivery founded on centralized hospital inpatient episodes of care; and

WHEREAS, VA needs to modernize its health care system and programs to meet veterans' current and future health care needs while providing optimal efficiency and enhanced access to the system of care; and

WHEREAS, VA has internally identified needs for up to $69 billion in capital facilities improvements and new construction through its Strategic Capital Infrastructure Program; and

WHEREAS, continuing appropriated funding levels at a fraction of the internally identified need will prevent VA from modernizing its facilities for decades, despite well-recognized needs in VA's 10-year capital plan; and

WHEREAS, funding levels of this magnitude will prevent VA from modernizing its facilities for decades, despite well-recognized needs in VA's ten-year capital plan; and

WHEREAS, as of 2015, the wars in Iraq and Afghanistan have produced nearly 1 million injured and ill war veterans who have enrolled in VA health care and who will need a variety of comprehensive VA health care services for decades, alongside the existing enrolled veteran population of over 8 million individuals from earlier service periods; and

WHEREAS, given VA's expected continuing costs for new major medical facility construction, consolidation and modernization, VA may revise its construction policy to further emphasize primary and specialty outpatient services, with complex and intensive inpatient services to be provided through affiliated arrangements with non-VA institutions and other private partners; and

WHEREAS, hundreds of leased VA community-based outpatient clinics are in jeopardy due to a change in congressional budget rules that clouds the future of this cost-effective approach to veterans health care, and in fact may deny that care; and

WHEREAS, the VA's primary mission is to meet the needs of ill and disabled veterans through complex inpatient and rehabilitative hospital care, outpatient primary and specialty care, therapeutic residential care, and long-term care, in government facilities operated by VA for the exclusive benefit of veterans; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, urges VA to continue its efforts to request adequate funding in future budgets to ensure at minimum that VA fulfills the intent of its strategic capital planning initiative; AND

BE IT FURTHER RESOLVED that Congress should carefully monitor any intended VA changes in infrastructure that could jeopardize VA's ability to meet veterans' needs for primary and specialized VA medical care and rehabilitative services, or be the cause of diminution of VA's established graduate medical and other health professions education and biomedical research programs, consequential to deployment of any new facilities model of health care delivery; AND

BE IT FURTHER RESOLVED that DAV urges Congress to continue to provide appropriated funding sufficient to fulfill the needs for infrastructure identified through the strategic capital planning process.

RESOLUTION 2017-31

Support State Veterans Home Program

WHEREAS, State Veterans Homes were founded for Union soldiers and sailors following the American Civil War, and have ably served veterans for nearly 150 years; and

WHEREAS, under title 38, United States Code, the Department of Veterans Affairs (VA) is authorized to make aid payments to States that maintain State Veterans Homes, and to make grants to States for their construction and major improvements; and

WHEREAS, there are over 150 State Veterans Homes, all of whom are member institutions of the National Association of State Veterans Homes (NASVH), in all States and in Puerto Rico, that provide hospital, skilled nursing, rehabilitation, long-term care, dementia and Alzheimer's care, domiciliary care, respite care, end of life care, and adult day health care, daily to almost 30,000 veterans and their dependents; and

WHEREAS, title 38, United States Code, authorizes VA to make per diem payments to the states for veterans residing in State Veterans Homes, and the State Veterans Home program is recognized as the lowest-cost among all institutional nursing care alternatives used by VA; and

WHEREAS, title 38, United States Code, authorizes VA to pay a per diem payment up to 50 percent of the national average cost of care in State Veterans Homes; and

WHEREAS, VA is also authorized to enter into provider agreements with State Veterans Homes to pay the full cost of care provided to veterans with 70 percent or higher service-connected disabilities or who require nursing home care for service-connected disabilities; and

WHEREAS, under the State Extended Care Facilities Grant Program the federal government provides grants to cover up to 65 percent of the cost to construct, expand, rehabilitate or repair a State Home, with states required to cover a minimum of 35 percent of the cost of projects in matching funding; and

WHEREAS, recognizing the growing long-term health care needs of elder veterans, the State Veterans Home program will increasingly serve a vital purpose and will continue to be a major partner with VA in meeting the health care needs of aging veterans; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports an adequate VA per diem payment to State Homes of not more than 50 percent of the national average cost of providing care in a State Veterans Home, as authorized by law; AND

BE IT BE IT FURTHER RESOLVED that DAV supports sufficient funding for the State Home Construction Grant Program; AND

BE IT BE IT FURTHER RESOLVED that DAV supports legislation to provide states greater flexibility in providing long term supports and services to veterans at State Veterans Homes; AND

BE IT FURTHER RESOLVED that DAV urges the President and Congress to pledge their full support to the State Veterans Home program because that program is the most cost effective institutional nursing care alternative available to VA for sick and disabled veterans with long-term care needs.

RESOLUTION 2017-32

Support Legislation To Extend Eligibility Of A Qualifying Veteran's Adult Child For The Civilian Health And Medical Program Of The Department Of Veterans

WHEREAS, dependent children of certain veterans are provided medical care under the Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA)program; and

WHEREAS, a child of a veteran is eligible for CHAMPVA if the veteran is rated permanently and totally disabled due to a service-connected disability, was rated permanently and totally disabled due to a service-connected condition at the time of death, died of a service connected disability, or died on active duty, and the dependent is ineligible for Department of Defense TRICARE benefits, and

WHEREAS, the eligibility of a dependent child for CHAMPVA ends at the age of 18, unless that dependent is enrolled in an accredited school as a full-time student until the age of 23, or marries, or is a stepchild who no longer lives in the household of the CHAMPVA sponsor; and

WHEREAS, current law requires private health plans and insurers to offer coverage to adult children of beneficiaries to age 26 regardless of the child's financial dependency, marital status, enrollment in school, residency or other factors; and

WHEREAS, children of severely disabled veterans and survivors of veterans who paid the ultimate sacrifice should not be penalized or denied the same rights and privileges as other citizens of a grateful nation enjoy; and

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports legislation to extend the eligibility of a qualifying veteran's child for CHAMPVA coverage to age 26 under the same conditions of covered adult children of beneficiaries in private health plans.

RESOLUTION 2017-33

Support Enhanced Medical Services And Benefits For Women Veterans

WHEREAS, there are over 2 million women veterans comprising 9 percent of all veterans nationwide; and

WHEREAS, the number of women veterans using Department of Veterans Affairs (VA) health care has doubled in the last decade, with women accounting for more than 400,000 users of VA health care services in fiscal year (FY) 2014,; and

WHEREAS, with over 50% of women veterans of conflicts in Iraq and Afghanistan having used VA services at least once and over 78 percent of the new women veteran users of VA care being under the age of 40 and thus of child-bearing age, their needs represent challenges to the current model and delivery of VA health care, which has traditionally focused on men; and

WHEREAS, the VA 2008 Report of the VA Under Secretary for Health Workgroup on Provision of Primary Care to women veterans identified a number of critical issues related to the delivery of health care in the VA health care system including the systemic fragmentation of primary care delivery for women; too few proficient, knowledgeable providers with expertise in women's health and a number of identified outpatient quality disparities for women veterans; and

WHEREAS, DAV commissioned a report published in 2014 which confirmed that despite a government that provides a generous array of benefits to assist veterans with transition and readjustment following military service, serious gaps are evident for women in every aspect of existing federal programs; and

WHEREAS, several Government Accountability Office reports and VA's own task force on women veterans have confirmed that many deficiencies in the VA health care system still exist for women veterans including the inability to fully ensure privacy and a safe, comfortable environment for women veterans at all VA facilities and have suggested VA revise key policies and improve oversight; and

WHEREAS, women veterans have been shown to have more complex health needs than men, with many reporting that certain services are difficult to obtain or health care personnel do not fully understand or seem unprepared to deal with women's unique health care needs; and

WHEREAS, significant numbers of women veterans, including those returning from military deployments, are the primary caregivers or sole caregivers of dependent children, which can limit their ability to access services in inpatient, intensive

outpatient, or residential settings that have traditionally been available to address post-deployment mental health readjustment needs; and

WHEREAS, increasing numbers of women are serving in combat theaters and seeking VA health care services following military service; therefore, VA must be prepared to anticipate the specialized needs of women veterans who were catastrophically wounded, suffering amputations, blindness, spinal cord injury, post-traumatic stress or traumatic brain injury, or who were sexually assaulted; and

WHEREAS, although it is anticipated that many of the medical problems for men and women veterans returning from combat operations will be similar, VA must address the specific health issues and barriers to care that pose special challenges for women; and

WHEREAS; an alarming number of women report military sexual trauma and need specialized mental health services from VA; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, seeks to ensure the provision of health care services and specialized programs, inclusive of gender-specific services, by VA to eligible women veterans are provided to the same degree and extent that services are provided to eligible male veterans, inclusive of counseling and/or psychological services incident to combat exposure or sexual trauma; AND

BE IT FURTHER RESOLVED that we urge VA to strictly adhere to stated policies regarding privacy and safety issues relating to the treatment of women veterans and to proactively conduct research and health studies as appropriate, review its women's health programs, and seek innovative methods to address barriers to care, thereby better ensuring women veterans receive the quality treatment and specialized services they so rightly deserve.

RESOLUTION 2017-34

Support Legislation To Provide Comprehensive Services For Caregivers Of Severely Wounded, Injured And Ill Veterans From All Eras

WHEREAS, severely disabled veterans present great challenges to the Department of Defense (DoD) and the Department of Veterans Affairs (VA), for acute, rehabilitative and long term care health needs; and

WHEREAS, immediate family members and dependents are involved early in the care and rehabilitation of severely injured veterans, but these caregivers receive little to no relief; and

WHEREAS, families or other individuals caring for severely wounded, injured and ill veterans must shoulder a great and lifelong burden as home and institutional caregivers and attendants, often giving up or severely restricting their employment, future financial security, education and social interactions that are taken for granted in the normal course of life, and suffering severe financial and personal penalties as a consequence of that attendance, in order to care for a severely ill loved one; and

WHEREAS, in the absence of such caregivers, the burden of direct care would fall on DoD and VA facilities or other institutions, at significantly higher financial cost and a reduced quality of life for these veterans; and

WHEREAS, the United States government owes its highest obligation to those who are put in harm's way at the call of the nation, and become wounded, injured and ill as a consequence of that service; and

WHEREAS, Public Law 111-163 requires VA to establish two distinct and unequal caregiver assistance programs where eligibility is based primarily on when the veteran was injured rather than the needs of the veteran and caregiver; and

WHEREAS, in equity and fairness, caregivers of severely injured veterans should be afforded generous relief, assistance, and care for the duration of the lives of veterans injured or made ill by military service to our nation; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, calls on Congress to ensure VA receives the resources needed to provide comprehensive support and services to caregivers of all veterans severely injured, wounded or ill from military service; AND

BE IT FURTHER RESOLVED that DAV supports legislation that would expand access to comprehensive caregiver support services, including but not limited to financial support, health and homemaker services, respite, education and training and other necessary relief, to caregivers of veterans from all eras of military service.

RESOLUTION 2017-35

Ensure Timely Access To Quality Department Of Veterans Affairs Health Care And Medical Services

WHEREAS, wounded and ill veterans' demands for care at many Department of Veterans Affairs (VA) facilities have overwhelmed VA's current capacity; and

WHEREAS, given VA's limited resources, in some cases, VA is forced to ration care leaving many of its over 6 million veteran patients waiting long periods for primary, specialty, and dental care appointments; and

WHEREAS, VA should identify and immediately correct the underlying problems to properly manage its health care capacity and identify additional resources needed to ensure timely access to primary, specialty, and dental care for veterans in VA facilities nationwide; and

WHEREAS, short-term solutions, such as staff reassignments, redirection of patients to alternative sites of VA care and restrictions of individual practitioners' available time with each patient while adding additional appointments to their daily schedules, can provide some immediate relief, but are only temporary solutions; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, urges the VA to request sufficient resources and staff to reduce waiting times so wounded, ill and injured veterans can realize timely access to all medically necessary services from the VA health care system.

RESOLUTION 2017-36

Adequately Fund And Sustain The Successful Readjustment Counseling Service Of The Department Of Veterans Affairs And Its Highly Effective Vet Center Program

WHEREAS, in 1979, Congress authorized the establishment of the Readjustment Counseling Service, an independent counseling activity within the then-Veterans Administration's Department of Medicine and Surgery; and

WHEREAS, in 1980, the Veterans Administration opened the first "Vet Center" to provide readjustment services and psychological counseling to Vietnam combat veterans suffering from post-traumatic stress disorder and other conditions related to combat exposure and their experiences in Vietnam; and

WHEREAS, the Vet Centers, now today numbering about 300 locations nationwide, have proven to be a most useful and effective tool to assist veterans of all eras whose experiences range from combat to military sexual trauma, and to certain family members; and

WHEREAS, Vet Centers provide cost-effective and highly beneficial services, including counseling for post-traumatic stress disorder (PTSD) and other readjustment challenges, marriage and family counseling, and family bereavement counseling beneficial to recovery; and

WHEREAS, the Vet Center program has been most successful counseling veterans from all prior conflicts needing such readjustment services, including World War II, the Korean War, the War in Vietnam, the Persian Gulf War, and now veterans of combat service in Afghanistan and Iraq; and

WHEREAS, Vet Centers lead all Department of Veterans Affairs (VA) mental health programs in conducting veteran-to-veteran peer counseling services, wherein veterans who have themselves experienced post-deployment mental health issues related to their military experience are trained to provide counseling to those still suffering ill effects; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, commends the work of the Readjustment Counseling Service and of its Vet Centers of the VA, and encourages the Vet Centers to maintain their level of excellence in caring for combat veterans; AND

BE IT FURTHER RESOLVED that DAV urges the President, the Secretary of Veterans Affairs, and the Congress of the United States, to ensure sufficient, timely

and predictable funding for the Readjustment Counseling Service, to enable its Vet Centers to continue expanding and extending their rehabilitative and readjustment services, including in more rural communities, to veterans of past, present and future military service, and to their family members when necessary to aid in the recovery of veterans suffering the latent effects of combat exposure.

RESOLUTION 2017-37

Oppose Means Testing Service-Connected Veterans For Department Of Veterans Affairs Health Care

WHEREAS, Public Law 104-262 requires zero percent service-connected disabled veterans to be means tested in order to receive treatment in a Department of Veterans Affairs (VA) medical facility; and

WHEREAS, countless thousands of veterans have relied on care from VA medical facilities for decades and now face the possibility of losing access to VA medical care because of income levels, consequently causing them undue financial hardship, pain and suffering; and

WHEREAS, these zero percent service-connected disabled veterans have been relegated to the lowest eligibility categories for care and, in some cases, below non service-connected veterans; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports the exclusion of service-connected disabled veterans from the requirements of means testing for treatment or service received at VA medical facilities and the inclusion of zero percent service-connected disabled veterans in Priority Group 3.

RESOLUTION 2017-38

Support Legislation To Eliminate Or Reduce Department Of Veterans Affairs And Department Of Defense Health Care Copayment Costs To Service-Connected Disabled Veterans

WHEREAS, through service to their Nation in which they made extraordinary sacrifices and contributions, veterans have earned the right to certain benefits in return; and

WHEREAS, because of the patriotism, devotion, and sacrifices of our veterans, ours is the most free nation on earth where our citizens enjoy unequalled rights, privileges, and prosperity; and

WHEREAS, as the beneficiaries of veterans' service and sacrifice, the citizens of our grateful nation want our government to fully honor our moral obligation to care for veterans and generously provide them benefits and health care entirely without charge; and

WHEREAS, premiums, health care cost sharing, and deductibles are a feature of health care systems in which some costs are shared by the insured and the insurer in a contractual relationship between the patient and the for-profit company, or of health care through other government programs in which the beneficiary has not earned any right to have the costs of health care benefits fully borne by taxpayers; and

WHEREAS, in the seminal RAND Health Insurance Experiment, which gave rise to the use and increase of cost sharing, other important findings included that cost sharing reduced the use of both effective and ineffective care where the amounts of reductions for each were equal for hospitalizations and drug use, and cost sharing did not alter the quality of care patients received; and

WHEREAS, subsequent research continues to question the adverse effects of cost sharing on health outcomes particularly for patients with chronic disabilities; and

WHEREAS, asking veterans to pay for part of the benefits a grateful nation provides for them is fundamentally contrary to the spirit and principles underlying the provision of benefits to veterans; and

WHEREAS, copayments were initially imposed upon veterans using the Department of Veterans Affairs (VA) health care system under urgent circumstances and as a temporary necessity to contribute to reduction of the federal budget deficit; and

WHERAS, cost sharing is considered as a means of generating revenues in the Department of Defense (DoD) and VA health care systems; and

WHEREAS, Congress has forgotten or abandoned the traditional benevolent philosophy of providing free benefits to veterans as repayment for the unusual rigors, risks, and personal deprivation they underwent for the good of our country; and

WHEREAS, based on practices in the private sector, the Secretaries of Veterans Affairs and Defense in the recent past, moved to dramatically impose fees and increase premiums and copayments, as if operating a commercial enterprise; and

WHEREAS, as a continuing cost of national defense and as our nation's foremost moral obligation, benefits for service-connected disabled veterans must remain a first priority of our government; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, calls for legislation to eliminate or reduce VA and DoD health care out-of-pocket costs for service-connected disabled veterans.

RESOLUTION 2017-39

Support Humane, Consistent Pain Management Programs In The Veterans Health Care System

WHEREAS, pain is one of the most prevalent reasons individuals, including wounded, injured and ill veterans, seek health care; and

WHEREAS, hundreds of thousands of veterans suffer from traumatic amputations and other severe injuries incurred during military service, while others suffer from a host of painful organic diseases and disabling conditions; and

WHEREAS, chronic pain is closely linked with depression and other mental health challenges, including suicidal ideation; and

WHEREAS, over a decade ago, the Department of Veterans Affairs (VA) established a new national health policy adding pain as the "fifth vital sign" in patients, along with blood pressure, temperature, pulse, and respiration; and

WHEREAS, beginning in 2001, VA established and formalized a national pain management program for the purpose of promoting greater public awareness, training and educating health professional students, VA providers and their staffs, and veterans and their families; and

WHEREAS, millions of veterans enrolled in VA health care have been aided by VA's efforts to better manage pain, while reducing the use of opioids and other drugs in the treatment of chronic pain; and

WHEREAS, VA's pain management program has been emulated in other public and private health care settings nationwide; and

WHEREAS, VA has adopted a patient-centered and holistic approach to delivering health care, in order to maintain and improve the health and quality of life of veterans; and

WHEREAS, in some VA locations, patients with chronic pain who have been prescribed pain medication over long periods have been denied further access to prescriptions for pain; and

WHEREAS, VA facilities and all prescribers are subject to the Controlled Substances Act of 1970, as amended; and

WHEREAS, due to the effects of the Controlled Substances Act, as amended, some veterans have had their pain medication prescriptions managed in such a way that

creates great anxiety and sometimes produces ill effects of withdrawal because of the Act's 30-day limit on Schedule II drug prescriptions, and VA prescribing policies and practices that may fail to resupply them on a timely basis; and

WHEREAS, pain management programs should be concerned uppermost about both patient safety and humane treatment to reduce pain and its underlying causes, with or without narcotics; and

WHEREAS, without appropriate psychological counseling and transition to suitable alternatives to controlled substances, including Schedule II controlled medications, veterans can suffer physical and mental anguish needlessly and thereby are not receiving patient-centered, holistic care; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, urges VA to redouble its efforts to conduct a uniform national pain management program, to ensure that veterans with chronic pain who have used prescribed pain medications over long histories are managed in a patient-centered environment, with balanced regard for both patient safety and humane alternatives to the use of controlled substances, and while under VA care receive their prescribed medications in a timely fashion; AND

BE IT FURTHER RESOLVED that DAV encourages VA at all levels to monitor local pain management efforts and resolve any conflicts between the effects of the Controlled Substances Act of 1970 and VA prescribing policies and procedures, to ensure they are compliant with VA's national pain management policy and guidelines, and consistent with the intent of this resolution.

RESOLUTION 2017-40

Support Enhanced Treatment For Military Sexual Trauma

WHEREAS, the Fiscal Year (FY) 2015 Department of Defense Office of Sexual Assault Prevention and Response (SAPRO) annual report on sexual assault in the military included 6,083 reports of sexual assault across the military services, representing a less than 1 percent decline from reports made in FY 2014; and

WHEREAS, the 2015 RAND Military Workplace Study, with results in the SAPRO Report, estimates that 20,200 service members experience sexual assaults each year in the military services; and

WHEREAS, the continued prevalence of sexual assault in the military is alarming and often results in lingering physical, emotional or chronic psychological symptoms in assault survivors; and

WHEREAS, more than 25 percent of women and over 1 percent of men enrolled in the Department of Veterans Affairs (VA) health care system report they had experienced military sexual trauma (MST); and

WHEREAS, in FY 2014, over 76 percent of women veterans in VA who screened positive for MST received outpatient care for either a mental or physical health condition related to MST; and

WHEREAS, the VA provides specialized residential and outpatient counseling programs and evidence-based treatments for MST survivors; and

WHEREAS, based on VA clinical determinations, some veterans are referred to VA medical facilities other than their local facilities or closest Veterans Integrated Service Network to receive the specialized care they need; and

WHEREAS, VA's current policy in beneficiary travel permits reimbursement to a veteran only from a veteran's home of record to the nearest VA facility by road mileage, whether or not that facility possesses the expertise needed for a particular type of care, including inpatient and residential treatment for MST-related needs; and

WHEREAS, if a VA clinician determines an MST survivor needs specialized care from a VA MST inpatient facility, VA's beneficiary travel policy may serve to obstruct access to that resource or force an MST survivor to self-pay all travel costs in order to gain access to these specialized services; and

WHEREAS, evidence-based treatment practices known to successfully treat veterans with MST-related mental health conditions are available but not systemically used by all providers treating these patients; and

WHEREAS, although VA offers MST-related training and has produced clinical practice guidelines and formulated evidence-based treatments, VA does not mandate that its mental health providers who treat MST survivors complete specialized training or undergo a certification process to ensure they are qualified to treat such patients; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, calls on VA to ensure all MST survivors gain open access to the specialized treatment programs and services they need to fully recover from sexual trauma that occurred in military service; AND

BE IT FURTHER RESOLVED that DAV supports legislation to change beneficiary travel policies to meet the specialized clinical needs of veterans receiving MST-related treatment; AND

BE IT FURTHER RESOLVED that DAV urges VA to continually improve its MST treatment programs, ensure dissemination of MST evidence-based clinical practice guidelines throughout the VA health care system and develop a formal mandatory certification process for mental health providers who treat MST survivors.

RESOLUTION 2017-41

Support Programs To Provide Psychological And Mental Health Counseling Services To Family Members Of Veterans Suffering From Post-Deployment Mental Health Challenges Or Other Services-Connected Conditions

WHEREAS, veterans exposed to combat and other hardship deployments are known to be at risk for development of post-deployment mental health conditions such as posttraumatic stress disorder (PTSD), depression and other serious mental health challenges; and

WHEREAS, left untreated or inadequately treated, a veteran suffering the chronic effects of PTSD, depression or other mental illnesses, may suffer marriage and relationship breakdown, under-employment or loss of employment, financial hardship, social alienation, and even homelessness, or involvement with the justice system; and

WHEREAS, a combat-exposed veteran who is not appropriately counseled for the psychological effects of PTSD or depression stands at greater risk of emotional and mental decompensation, whose consequences often fall directly on family members and dependents of such veteran; and

WHEREAS, the Department of Veterans Affairs (VA) embraces recovery from mental illness as its guiding principle in all VA mental health programs, and involvement of family members and dependents is often vital to a veteran's eventual recovery from mental illness; and

WHEREAS, subsection 1712A (b) 2, title 38, United States Code, authorizes the VA Readjustment Counseling Service, through its Vet Center program, to provide psychological counseling and other necessary mental health services to family members of war veterans under care in such Vet Centers, irrespective of service connected disability status; and

WHEREAS, Congress enacted section 301 of Public Law 110-387 for the express purpose of authorizing marriage and family counseling in VA facilities to address the needs of veterans' families, including spouses and other dependent family members of veterans who are experiencing mental health challenges with attendant marital or family difficulties; and

WHEREAS, Congress enacted sections 101-103 of Public Law 111-163 for the purpose of authorizing a wide array of support, care and counseling services for

personal caregivers of severely injured or ill veterans from all eras of military service; and

WHEREAS, section 1782, title 38, United States Code, authorizes a program of counseling, training, and mental health services, including psychological support, for immediate family members of disabled veterans who need care for service connected disabilities; who have service-connected disabilities rated at 50 percent or more disabling; who were discharged or retired from the armed forces for injuries or illnesses incurred in line of duty; who are World War I or Mexican Border Period veterans; who were awarded the Purple Heart; who are former prisoners of war; who were exposed to radiation or toxic substances; or, who are unable to defray the expenses of their care; and

WHEREAS, section 1781, title 38, United States Code, authorizes a program of health care, including certain mental health services, for immediate family members and dependents of a veteran who is totally and permanently disabled from service connected disabilities, or who died from disabilities incurred during military service; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, calls on the Secretary of Veterans Affairs to establish appropriate and effective programs to ensure that veterans who are enrolled in VA health care not only receive adequate care for their wounds and illnesses, including mental health-related illnesses, and, when appropriate, family members—whether family caregivers, spouses or other family dependents, receive necessary counseling, including psychological counseling, training and other mental health services authorized by law to aid in the recovery of veterans.

RESOLUTION 2017-42

Oppose Recovery Of Third-Party Payments For Service-Connected Disabilities

WHEREAS, the primary mission of the Department of Veterans Affairs (VA) is to provide high quality medical care to veterans eligible by reason of their service-connected disabilities; and

WHEREAS, VA is authorized to recover or collect the cost of care from a third-party health insurer when insured veterans receive health care from VA for nonservice-connected conditions; and

WHEREAS, the collection of payments from a third party for the treatment of veterans' service-connected disabilities would abrogate VA's and the Federal Government's responsibility to provide such care and may result in increased premium payments by veterans; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, opposes any legislation that would require VA to recover third-party payments for the care and treatment of a veteran's service-connected disabilities.

RESOLUTION 2017-43

Medical Marijuana (MMJ)

WHEREAS, Over the past several years, post-traumatic stress disorder (PTSD) and traumatic brain injury (TBI) have been thrust into the forefront of the consciousness of the medical community and the general public in large part due to recent combat operations and subsequent recognition of these potentially 'silent injuries"; which have resulted in suicides and over medication of veterans and;
WHEREAS, medical cannabis is currently legal in 29 States and the District of Columbia and an additional seven states have pending MMJ legislation, including 3 out of 4 states surrounding Wisconsin; and

WHEREAS, the death rate from opioids among VA healthcare patients is nearly double the national average; and

WHEREAS, States that have legalized MMJ have seen a 15-35% decrease in opioid overdose and abuse; and

WHEREAS, the US Senate and House of Representatives have previously introduced legislation allowing VA doctors to discuss the use of MMJ with veteran patients to manage symptoms stemming from their service connected disabilities, and,

WHEREAS, there is conclusive and substantial evidence according to a comprehensive study from the National Academic Press and National Academy of Sciences that concludes that cannabis or cannabinoids are effective for the treatment of chronic pain for adults, as anti-emetics in the treatment of chemotherapy induced nausea and vomiting, and for improving Multiple-Sclerosis spasticity symptoms, and;

THAT, this same study concluded that there is moderate evidence that cannabis or cannabinoids are effective for improving short-term sleep outcomes in individuals with sleep disturbances associated with obstructive sleep apnea, post-traumatic stress disorder (PTSD), fibromyalgia, chronic pain; traumatic brain injury (TBI), and multiple sclerosis,
NOW

THEREFORE BE IT RESVOLED, that the Disabled American Veterans Department of Wisconsin at State Convention held in Green Bay Wisconsin on June 1-3 2017, go on record to support the use of Medical Marijuana for service-connected, disabled Veterans in the State of Wisconsin.

LEGISLATIVE RESOLUTIONS

MISCELLANEOUS

RESOLUTION 2017-44

Monitor Activities Of The Mandatory Transition Goals, Plans, Success Program

WHEREAS, current law authorizes comprehensive transition assistance benefits and services for separating service members and their spouses, and required that the Transition Assistance Program (TAP) and Disabled Transition Assistance Program (DTAP), now known as the Transition Goals, Plans, Success (GPS) program, be established and maintained; and

WHEREAS, the transition from military service to civilian life is very difficult for many veterans who must overcome obstacles to successful employment; and

WHEREAS, the transition program, now Transition GPS program, was created to help our separating service members successfully transition to the civilian workforce, start a business, or pursue training or higher education and is now mandatory for active duty personnel, except under certain circumstances as specified in Public Law 112-56, the VOW to Hire Heroes Act; and

WHEREAS, participation by DAV and other veterans service organizations in the Transition GPS program is essential to service members to gain a full understanding of entitlements and free assistance and representation available upon discharge from military service; and

WHEREAS, the Transition GPS program expands the previous TAP and DTAP workshops from five to seven days (or longer in some instances) to strengthen, standardize, and expand counseling and guidance for service members as they are separating from military service while transforming the military's approach to education, training, and credentialing for service members, and

WHEREAS, the Transition GPS program, and the encompassed TAP and DTAP workshops are essential to easing some of the problems associated with transition, as is periodic review of training methodology and the collection and analysis of course participant critiques to ensure the program is fulfilling its intended objective, which are also mandated in Public Law 112-56; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, urges Congress to monitor the review of Transition GPS program, its workshops, training methodology, and delivery of services; the collection and analysis of course critiques; and to ensure the inclusion of DAV and other veteran service organizations in workshop, in order to confirm the program is meeting its objective and follow-up with participants to determine if they have found gainful employment.

RESOLUTION 2017-45

Eliminate The Delimiting Date For Eligible Spouses And Surviving Spouses For Benefits Provided Under Chapter 35, Title 38, United States Code

WHEREAS, dependents and survivors eligible for Department of Veterans Affairs (VA) education benefits under chapter 35, title 38, United States Code, have ten years in which to apply for and complete a program of education; and

WHEREAS, this ten-year period begins either from the date a veteran is evaluated by the VA as permanently and totally disabled from service-connected disabilities or ten years from the date of such veteran's death due to service-connected disability; and

WHEREAS, in many instances, because of family obligations or the need to provide care to the veteran, spouses or surviving spouses may not have had an opportunity to apply for these benefits; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, seeks the enactment of legislation which would eliminate the delimiting date for spouses and surviving spouses for purposes of benefits provided under chapter 35, title 38, United States Code.

RESOLUTION 2017-46

Encourage All Disabled Veterans To Become Registered Voters And Vote

WHEREAS, members of DAV served their country during time of war in order to preserve the rights and privileges of life in this land of the free; and

WHEREAS, one of the most precious of those rights is the right to vote; and

WHEREAS, the United States Congress and the President's Administration have failed to fulfill their obligation to our Nation's disabled veterans, providing inadequate funding for veterans' benefits and health care; and

WHEREAS, the United States Congress and the President's Administration have targeted veterans' programs for unwarranted spending cuts and reductions under the mistaken and misguided theory that veterans do not base their vote on veterans' issues; and

WHEREAS, the failure of disabled veterans to register and vote will result in the perpetuation of this theory; and

WHEREAS, because of their disabilities, disabled veterans have more difficulty than their nondisabled peers in complying with some of the more strict requirements in voter registration laws; and

WHEREAS, there exists an urgent need for veterans, their families and all Americans concerned about veterans' issues to make their voice heard by becoming registered voters and exercising their vote in local, state, and federal elections; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, encourages all DAV members to register to vote and thereby strengthen our organization's ability to preserve and improve our system of veterans' benefits and services; AND

BE IT FURTHER RESOLVED that all DAV Departments and Chapters initiate and operate voter registration drives targeted at increasing voter registration among veterans and their families; AND

BE IT FURTHER RESOLVED that all DAV Departments, Chapters, and members are encouraged to ensure that all veterans and their family members are able to get to polling locations to vote.

RESOLUTION 2017-47

Support The Continued Growth Of Veterans Treatment Courts For Justice-Involved Veterans

WHEREAS, many military service members and veterans return from today's overseas combat engagement with signature wounds of polytrauma, traumatic brain injury (TBI), posttraumatic stress disorder (PTSD) and other mental health and repatriation challenges; and, veterans from earlier eras have absorbed their own signature disabilities, including PTSD; and

WHEREAS, some veterans resort to overuse of legal and illegal substances in their attempts to cope with their chronic physical and mental health challenges, other barriers and obstacles, and pain; and

WHEREAS, as a consequence of chronic substance-use disorder or lasting residuals of combat exposure, a minority of veterans display antisocial and even criminal behaviors, and thus become involved with law enforcement and justice systems; and

WHEREAS, veterans treatment courts evolved from a proven national model of diversionary drug courts and mental health courts, to address the specific situations of veterans, and to maximize efficiency of available resources while making use of the distinct military culture to which veterans are accustomed; and

WHEREAS, many veterans are eligible for the financial benefits, social supports and health care services available through the Department of Veterans Affairs, and through other national, state and local veterans programs; and

WHEREAS, grouping troubled veterans together within specific court dockets expedites access to helpful resources and promotes the camaraderie and mutual support found amongst all veterans; and

WHEREAS, veterans in general deeply value their military experiences and share an inimitable bond with their peers, and the veterans courts build upon this bond by enabling veterans to proceed through the treatment court process with people who are similarly situated, and by pairing together veterans and mentors; and

WHEREAS, years of experience from the veterans treatment courts now in existence nationwide has produced a statistically significant reduction of recidivism rates in veterans compared to persons in other treatment courts and individuals not involved in any sort of alternative or diversionary court; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports the continued growth of the veterans treatment courts throughout our nation.

LEGISLATIVE RESOLUTIONS

STATE

RESOLUTION 2017-48

Support Adequate And Equitable Funding For State Veterans' Programs That Are Beneficial To Wounded, Injured and Ill Veterans

WHEREAS, Wisconsin's wartime wounded, injured and ill veterans have sacrificed much in defense of this great nation and state; and

WHEREAS, a sacred convenient exists between our federal, state and local governments and veterans that begins at enlistment and lasts throughout the course of a veteran's life; and

WHEREAS, the sacrifices of Wisconsin's veterans have been made in the name of all Wisconsin citizens; and

WHEREAS, the State of Wisconsin, following the Civil War and continuing into the present, instituted many veterans' programs, second to none, that benefited many of Wisconsin's disabled veterans; and

WHEREAS, among these state veterans' programs, currently being administered by Wisconsin Department of Veterans Affairs (WDVA), were: Veterans Education Reimbursement Grants; Retraining Grants; Assistance to Needy Veterans Grants; Personal Loan Program; Veterans Assistance Program; Military Funeral Honors Program; Dislocated Veterans Worker Program; WDVA Claims Bureau; State Veterans Cemetery; County Veterans Service Office (CVSO) Grant Program; Veterans Organization Grant Program; and Transportation Services Grant Program; and

WHEREAS, past sources of revenue for these veterans' programs include: Surtax on income (1942); Liquor tax (1947-1951); General Fund Appropriations (1947, 1951, 1971-1974, 1985-1988, 2012); Investment Board Loan (1969, 1974-1975); and General Fund Loan (1974-1975); and

WHEREAS, Wisconsin's veterans, through their sacrifices, have earned the right to have all state veterans' programs funded in an adequate and equitable manner; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, seeks and strongly supports adequate and equitable funding for all state veterans' programs that a beneficial to wounded, injured and ill veterans.

RESOLUTION 2017-49

Support Annual Reports For All State Programs Which Benefit Veterans With Service-Connected Disability Ratings To Determine Their Effectiveness

WHEREAS, the State of Wisconsin has many programs that benefit veterans with service-connected disability ratings such as Veterans Preference Point System, Noncompetitive Appoint of Certain Disabled Veterans, Disabled Veteran-Owned Business Program, Job and Benefit Fairs, and State Veterans Homes; and

WHEREAS, there exists a need to determine the effectiveness of these programs so that these veterans receive maximum benefit and the State of Wisconsin receives maximum return on their expenditure; and

WHEREAS, a proper determination of the programs' effective can only be made by a professional analysis of annual reports for each program; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, support Annual Reports for all State of Wisconsin programs which benefit veterans with a service-connected disability rating to determine their effectiveness.

RESOLUTION 2017-50

Expansion Of Benefits In The Wisconsin G.I. Bill For Spouses And Children Of Veterans With A Service-Connected Disability Rating Of At Least 30 Percent

WHEREAS, Assembly Bill 40 (AB 40) or the Governor's Executive Budget Bill for 2013-2015 expands residency eligibility for veterans to use the Wisconsin G.I. Bill Tuition and Remission Program; and

WHEREAS, AB 40 now provides that eligible veterans must have been a Wisconsin resident at the time they entered the armed forces or be a Wisconsin resident for at least five consecutive years; and

WHEREAS, the qualified spouses, unremarried surviving spouses and children of veterans, who have been awarded at least a 30 percent service-connected disability rating by the United States Department of Veterans Affairs (VA) and who were Wisconsin residents at the time they entered the armed forces, are eligible for the Wisconsin G.I. Bill Tuition and Remission Program; and

WHEREAS, the qualified spouses, unremarried surviving spouses and children of veterans, who have been awarded at least a 30 percent service-connected disability rating by VA and who have been a Wisconsin residents for at least five consecutive years, are *not* eligible for the Wisconsin G.I. Bill Tuition and Remission Program; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, supports the expansion of eligibility in the Wisconsin G.I. Bill Tuition and Remission Program to qualified spouses, unremarried surviving spouses and children of veterans who has been awarded at least 30 percent service-connected disability rating by VA and who have been a Wisconsin resident for at least five consecutive.

RESOLUTION 2017-51

Increase Awareness And Effectiveness For Wisconsin's Disabled Veteran-Owned Business Program

WHEREAS, the Disabled Veteran-Owned Business Program (DVB) was created in May 2010 by the Wisconsin legislature as 2009 Wisconsin Act 299 and was an initiative of DAV, Department of Wisconsin; and

WHEREAS, 2009 Wisconsin Act 299 creates preferences in awarding state contracts or orders to businesses owned by disabled veterans who have at least a 30% disability rating from the United States Department of Veterans Affairs; and

WHEREAS, the Act permits acceptance of a qualified responsible bid from a disabled veteran-owned business that is no more than 5% higher than the apparent low bid or most advantageous proposal, but the Act does not create any goals for total amounts or percentage of state contracts or orders to be awarded to the disabled veteran-owned business; and

WHEREAS, the Wisconsin Department of Administration (DOA) monitors state agencies' compliance with the purchasing guidelines and certifies firms for eligibility to participate in the DVB Program; and

WHEREAS, to be certified by DOA for the DVB Program, veterans with a service-connected disability rating of 30% or greater need to own at least 51 percent of the business and must reside in Wisconsin; and

WHEREAS, to be certified, a disabled veteran-owned business must have its principal place of business in Wisconsin and have customers other than the State of Wisconsin plus the business must be at least one (1) year old under current ownership; and

WHEREAS, under Wisconsin Statute 16.75, DOA shall annually prepare and submit a report on the DVB Program to the governor and to the chief clerk of each house of the legislature, for distribution to the appropriate standing committees; and

WHEREAS, additionally under Statute 16.75, on October 1 of each year, DOA must submit a report to the council on small business, veteran-owned business and minority business opportunities for evaluation; and

WHEREAS, DVB Program has been consolidated with the Minority Business Enterprise (MBE) Program by DOA, no stand-alone DVB Program reports have

been submitted to the governor or to the chief clerk of each house as mandated by Statute 16.75; and

WHEREAS, 27 disabled veteran-owned businesses are currently enrolled in the state DVB Program while on the federal level 45 disabled veteran-owned located in Wisconsin are currently enrolled in service-disabled veteran-owned small business (SDVOSB) program maintained by the U.S. Department of Veterans Affairs; and

WHEREAS, to address this discrepancy, the Governor signed Executive Order #72, on May 25, 2012, which provides automatic state certification to disabled veteran-owned businesses that have been certified in the federal SDVOSB program; and

WHEREAS, Senate Bill 575, signed into law as 2015 Wisconsin Act 384 on April 25, 2016, authorizes the Wisconsin Department of Veterans Affairs to design an official "Wisconsin Disabled Veteran-Owned" logotype for use by businesses owned by Wisconsin veterans who are also disabled to better create incentive and awareness; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin in State Convention assembled in Green Bay, Wisconsin, June 1-3, 2017, calls for the Department of Administration to submit an annual stand-alone report on the DVB Program to the governor and to the chief clerk of each house of the legislature, for distribution to the appropriate standing committees as mandated by Wisconsin Statute 16.75; AND

BE IT FURTHER RESOLVED that the Senate Committee on Transportation and Veterans Affairs and the Assembly Committee on Veterans and Military Affairs exercise proper oversight on the Disabled Veterans-Owned Business Program to determine effectiveness; AND

BE IT FURTHER RESOLVED that the Department of Administration and the Wisconsin Department of Veterans Affairs promote awareness for the Disabled Veteran-Owned Business Program and Executive Order #72 to enhance effectiveness of the DVB Program.

RESOLUTION 2017-52

Support A Thorough And Systematic Process When Major Changes To Veterans Benefits And Health Care Are Proposed

WHEREAS, major changes to veterans' benefits and health care have been proposed, both at the national and state level; and

WHEREAS, before these major changes are proposed, a thorough and systematic process needs to be instituted; and

WHEREAS, this thorough and systematic process must be based on three (3) tenets or priorities:

- The first priority is the needs of veterans; and
- The second priority is input from DAV, other veterans groups and the veterans community must be part of the process; and
- The third priority is the proposed change needs to be evidence-based; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin, assembled in State Convention in Green Bay, Wisconsin, June 1-3, 2017, shall support the need for a thorough and systematic process when major changes to veterans benefits and health care are proposed.

RESOLUTION 2017-53

Support A Graduated Revision To The Wisconsin Veterans And Surviving Spouses Property Tax Credit

WHEREAS, the Wisconsin Veterans and Surviving Spouses Property Tax Credit provides veterans and unremarried surviving spouses a refundable tax credit for their primary, in-state residence; and

WHEREAS, the Wisconsin Department of Veterans Affairs verifies the veteran's eligibility for the program and the credit is administered by the Wisconsin Department of Revenue through state income tax return; and

WHEREAS, the definition of an eligible veteran and an eligible unremarried surviving spouse are:

- Veterans who had been a Wisconsin resident for a consecutive 5-year period after entering active duty or was a Wisconsin resident when entering active duty; and
- The veteran must have either a service-connected disability rating of 100 percent (%) under 38 USC 1114 or 1134 or a 100% disability rating based on individual unemployability ; and
- The unremarried surviving spouse of an eligible veteran or an unremarried surviving spouse, who following the veteran's death, began to receive and continues to receive Dependency and Indemnity Compensation (DIC) from the Federal Department of Veterans Affairs (VA); and
- In addition to the above requirements, the veteran had to have been a resident of Wisconsin at the time of death for an unremarried surviving spouse to qualify for the Property Tax Credit; and

WHEREAS, the State of Illinois has recently implemented the Disabled Veterans' Standard Homestead Exemption which provides a reduction in the tax on a qualifying property owned by a veteran with a VA service-connected disability rating; and

WHEREAS, the exemption is graduated in the following manner:

- A $2,500 exemption is available to a veteran with a VA service-connected disability rating of at least 30% but less than 50%; and
- A $5,000 exemption is available to a veteran with a VA service-connected disability rating of at least 50% but less than 70%; and
- Veterans with a VA service-connected disability rating of at least 70% are exempt from paying property taxes on their primary residence; and

WHEREAS, the State of Wisconsin prides itself as being on the forefront of treating its veterans, especially disabled veterans, with dignity and respect; NOW

THEREFORE, BE IT RESOLVED that DAV, Department of Wisconsin, assembled in State Convention in Green Bay, Wisconsin, June 1-3, 2017, shall support a graduated revision to the Wisconsin Veterans and Surviving Spouses Property Tax Credit based on the standards used in the Illinois Disabled Veterans' Standard Homestead Exemption.

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