

(Captions connected/on standby.) (Captions connected/on standby.) >> Hey, good morning, everybody online. We are going to just wait a couple minutes to see if a couple more people show up, and then we'll get started here in a little bit. Thanks. >> We'll go ahead and get started. For those of you who don't know me, in case you may have forgotten my name, I'm Dean Dominique. I'm treasurer for the association. I was president last year. I tried through the VA, and it didn't really work out the way I wanted it to, but, so, anyways, I myself am filing for a disability claim through the VA, and I have been working with Paul here through MOAA, and one thing that really struck me when I was [indiscernible] that we had, so just within the first five minutes that we were talking, so I asked him if he would like to come and talk to us some about disability compensation. With that, I'll turn it over. >> Thanks, Dean. Again, my name is Paul Frost. I have been with MOAA. I started as a volunteer in 2013, is when our training started. We started doing claims in January 2014. In 2015, they asked me to come on staff. I had a financial background in college. I'm an accredited financial counselor, as you can see. Where I work in our benefits section, I was doing VSO claims, until we unfortunately stopped that process. We are still providing information and advice on the VA and disability claim program. I wanted to just talk a little bit about MOAA. Again, 29 years in the Navy. I retired in 2012. I didn't necessarily know if I was going to stay in this area when I retired, and so I decided to just volunteer when I found out the VA's -- the program the VA was starting up at MOAA. MOAA is known for a couple of things. The biggest is our advocacy. We are up on Capitol Hill. We are part of the military coalition. 5.5 million members in the military coalition, 32 groups. We are the cochair with the Air Force first sergeant's association. We don't always agree. When we sometimes go it alone, that's our 350,000 members from MOAA. And we have got a few awards here and there over the years. So the other big piece that we interact with the community and our members is through the transition center, and as you saw in the opening slide, I'm with the transition center. The big three pieces of that career transition services. We'll do networking events, which I'm going to talk about in the next slide. We'll do interview prep, LinkedIn review. Shane has been writing counseling for 11 years. We also answer member questions, whether in regards to Social Security, tricare, VA, anything associated with military benefits. We also have a number of publications that we put out. And finally the veteran services and caregiver resources, which I'm

kind of in both the benefits and the veterans services, providing information and advice for the disability claim program, and we also do a financial education for caregivers, and there's a significant number of caregivers in the United States right now, and they were lacking in attention until the Dole Foundation and MOAA got together and started providing some information for them. So this is our third iteration of this. We have been doing career networking or career fairs. We were one of the first to get into this line of business, but now everybody and their brother does it. We look to change it up a little bit, and so three years ago we started what we call a networking forum, to be more relaxed, to be after-hours so that you don't have to take a day off of work. Put it in a really nice venue, the Air and Space Museum on the mall. It's been really successful. We get about 70 companies who come into this. For the first time we are doing an information technology hall. And we usually get about between six and 700 people who are interested in coming, and usually about 500 or so show up. So it's a pretty big event, if you're interested. For the folks that are in the room here, I brought some cards that detail it, and you can just register there. Okay. Next slide. Okay. Anyone interested in joining MOAA? We have got a special here for the Patent Office. If you decided to become a paid member, you can go to our join page, and if you type in USPTO, you'll get a 10% discount, available until next month. Basic membership is a free membership, but you get limited access to our materials, and then either a premium or a life membership are the other two. So about 43 bucks a year, and you get discounts if you go for three years or more or a life membership. >> I have a question on that. Do you have to be a military officer to join? >> You do have to be a military officer. We have a Voices program available to nonmilitary officers or enlisted. We have feedback from enlisted people that they don't want to be members because they have their own associations. But we advocate for everybody. We don't just advocate for officers. Okay. So here's what I'm going to cover today. What I didn't put on the slide unfortunately is the four webinars that we have already produced. And we do usually one a year or two a year. There's four on our website. If you go to [www.MOAA.org/VSOwebinar](http://www.MOAA.org/VSOwebinar), you'll find the four webinars. There's one that this one is developed off of. I basically shortened the original one for this brief. There's one on the appeal, specifically the appeals process. I'm not going to cover appeals really today much, other than just touching on the timing for it. But if you have any questions for appeals, I can certainly answer those. The Camp Lejeune is a new

program that just started this year, Camp Lejeune presumptive for those who were injured by the toxic water at Camp Lejeune. And then our information and advice. So there are four webinars there. They are anywhere from an hour long to I think the shortest one is about 35-40 minutes. So if you're interested in getting more information or more in-depth, you can go there. Here's what I wanted to cover today, just touch on the claims process, and then answer any questions that you have. So, what are the requirements? First, why does the VA have a disability compensation program? The VA and the government decided many years ago that you come into the service as a fully able body. Now, there are some exceptions to that, but basically you come in as a fully able body, and by the time you leave service, whether it's four years later, 20 years later, 30 years later, the wear and tear of military service has impacted your ability to get full compensation in the civilian marketplace, so the idea is to compensate you for the disabilities you have incurred from military service, and you're getting compensated so that your military compensation will help you with your civilian compensation in a second career. You must have been honorably discharged. Actually, it's that you have to have other than a dishonorable discharge or a bad conduct discharge. To have a claim, you must have a disability. If you broke your leg in the service and it healed and you have no residual issue with it, that's not considered a disability. It has to be a chronic ongoing disability. It may have been diagnosed and may be in remission of some sort or medicine is preventing it from your life. You need to provide evidence that it was in service. It has to be active duty or training. If you're a reservist and you're not drilling and you're diagnosed with a disease, that's not going to count. You have to provide that nexus to service. Direct service or if you're aggravated by service. Say you had a disability when you came in, you weren't a hundred percent able, but your service aggravated that existing disability. The VA can compensate you for that aggravation. There is also secondary to service. Say you developed diabetes in service. One of the secondary conditions of diabetes is peripheral neuropathy. So you might not lose feeling in your fingers or your toes. That will also be compensated for as a secondary to the service-connected first disability, the diabetes. So you injured your neck and that leads to shooting pains down your arm. That's a similar thing; that's connected a secondary service disability. And then there are the presumptives, if you were posed to radiation tests during World War II, the new Camp Lejeune one, those are presumptives. So if you develop any diseases or disabilities that are on the

presumptive list, you're automatically connected to the VA service by those cases. There is a rating schedule that the VA maintains, you would then go to the rating table to see what level they are going to rate you at. The rating can go anywhere from zero up to a hundred percent. It doesn't have to be in 10 percent increments. Some of them go zero to 30 to a hundred. Some of them just go ten. You have ringing in your ears, that's a one-time 10 percent disability. It doesn't go any lower, doesn't go any higher. That's just what it is. The MOAA and VA has checklists for where you can see some of these things. Dean has a copy of these slides and he's going to pass them out to anybody or make them available, so you don't necessarily have to write all of these down, but they will be available after the brief. Okay. So here are the types of pre-discharge claims. So I know most of you or probably not all of you, unless you're a reservist, are not in this window here. But as a pre-discharge claim, you can do either a BDD, benefits delivery at discharge, or submit that as long away as 180 days, or what's called a quick start program. The idea behind the pre-discharge claims is to get this off of your plate so that when you're inside the 60-day window and are trying to get a job or are looking at your transition, you want to get this off your plate. You, however, have one year after you are discharged or retired to submit a claim and have it go back to your discharge or retirement date. So, anyway, the idea for these two previous discharge claims is that they would be adjudicated 60 days after separation or retirement. Unfortunately, the VA hasn't met there. They are on par with the fully developed claims, which I'm going to talk about in the next slide, and they are taking about anywhere from 120 to 150 days, which has come down from when they didn't have a fully developed claim when I retired in 2012, and my claim took about ten months for adjudication. So they have gotten much better. We are seeing the average around the country is right around 130 days.

>> Can you use the VSO for the benefits? >> You can use the VSO, yes. Absolutely you can use the VSO for any of your claims. In fact, we recommend that you find a VSO, and I'll talk about that a little bit later, that you find a VSO to have a second set of eyes on your claim. Okay. And if you're overseas, there are two places, one in Germany and one in Korea, where they will actually have you process your claims go through, and then you come back to the states and are worked in a regional office. Pittsburgh is the one on the east coast, if you're coming from Germany, and Salt Lake City if you're coming from Korea or Asia. Okay. The post-service claims are either traditional, which we don't recommend, or the fully developed claim. If you can find

your medical records, say if you have been retired for ten years and you now want to file a claim, and I'll talk about that on the next slide, but you want to try to get your medical records and submit a fully developed claim because that's going to get processed quicker. A traditional claim can still take up to a year for the VA to adjudicate, because they have got to go out and get your medical records. >> One question. I have a copy, but it's not certified. >> It doesn't have to be certified. >> Okay. >> The VA is going to get -- whether you do a predischage claim or a traditional fully developed claim, the VA is going to go to the archive and is get your records because they are going to compare the two, but if you provide the records, it gets them started quicker, and they are not waiting for the archives to send your records. So a fully developed claim has to have everything, including dental. And there's a checklist there that the VA provides, hey, here's what you have. I have got my own checklist on the number of forms that you really need to do a good fully developed claim. Okay. Requesting your service medical record. Again, you're all in the case where, hopefully, I think you are any way, that you should already have your records. But if it was a predischage case, you would want to go and make sure that you get all of your -- for most cases, especially around here, all of the medical treatment facilities have taken your old paper records and scanned them in. So you should now get a file with your AHLTA record, which is a electronic medical record, and they are about to transition to a new system, and they should also have your paper copies on a disk as well, so they should hand them to you. The one thing that you want to be concerned about is mental health. If you have been seen for mental health, there are many cases where the folks that you go to access your records, they won't access the mental health records. So if you're claiming PTSD or claiming anxiety, you might have to make sure that you go and get your mental health records separately so that you can include it in your claim. And then if you have been referred out, and that referral hasn't been sent to your treatment facility, which it should have been, you need to make sure to go out and get that. Here's a case, if you don't have your records and you want to get them for your claim, here's a link to do it online. There's a form, which I didn't list the form, it's called a 4142. If you ask the hospital, say, hey, I know I have records here, I want to get it for a claim, they want to charge you but usually the VA will pay for it. If you fill out a 4142, you're telling the VA, here's the hospital, here's the doctor, and the VA will go and request those records. It's always best, our recommendation, if you can get the records to send

them in all at once. Okay. So here's what a VSO can do for you. The first thing they are going to want to do is they are going to want to sign a power of attorney. It's called a VA form 2122, and it's basically saying that they can represent you with the VA. Your VSO should be first and foremost concerned about your privacy. You never want to pass your Social Security number, any medical diagnoses over unsecured e-mails. They should have a way, if you're dealing with them remotely, if you're not just handing them everything, if they are dealing with you through e-mails, they should have a way, and it's usually called Share File, they should have a way to transfer documents back and forth securely. Never send something unprotected over unsecured e-mail. They should be able to secure your medical records. Look for that nexus that I talked about in the beginning, scanning what are your active disabilities or diseases, going back and looking at the ones that are closed and saying, hey, is this one true, or is this no longer an issue. And they should be telling you, hey, this isn't really clearly diagnosed. You might want to go back and ask for an MRI, ask for a new X-ray, ask for an update. Are all of your medications up to date? Is the list of medications up and accurate for all of the things that you're taking? They should explain the service connection. So there's three main milestones. Zero percent, 30 percent, and 50 percent. So the first thing that you're considering is that you want that service connection. The VA says, I recognize that you have a disability that's service connected, and I'm service connecting you. Then the determination is, okay, what level of compensation does it rise to? If it doesn't rise to a compensable level, they are going to rate you at zero percent. That's not bad. You have got the connection. Now, what happens when we get older? Things get worse. Things break down. You can go back at any time that you think something has risen to the next level, and you can ask the VA for an increase. On your VA notification letter, they will detail each of the issues that they have service connected and denied and tell you why they have denied them. They will tell you why. They will pull out the verbiage from the rating schedule, and they will tell you, hey, here's why we rated you where you're at and here's the next level. So you can read and say, hey, if I can get to this level, I can go up to the next percentage, and if you believe you have got to that level, you can ask for an increase. They are going to go over to the nearest 10%. So I'll show you the VA math. And so you're going to see, if somebody tells you that they are rated at 75%, something is wrong, because they are either going to be 70% or 80%, not 75. So those three milestones, that zero percent, at 30% you're going to get

additional compensation for a spouse and children. You can also get extra compensation for dependent parents. And then for the 50% milestone, if you're rated at 50% or above, you are now eligible for concurrent receipts. So for those who are retirees, how many retirees do we have today? Quite a number of retirees, you are getting retired pay. If you're at 40% or less, I get my VA disability rating comes off of my retirement. At 50% or more, you get your full VA disability plus your full retirement. I don't go into CRSC, any combat-related compensation in this brief, but if anybody wants to ask about that afterwards I'll hang around and ask those questions. Again, the VSO should be ensuring that your claim is complete. And I have a list of all of the things, all of the forms and all of the other things that you should be submitting, but they should be telling you, hey, yes, you have got a complete claim here. You're ready to go. Okay. Here's that VA math thing. So, say a veterans claim comes back, and he or she is rated for three things. They have a lower back strain at 30%, a right shoulder strain at 10%, and tinnitus at 10%. So that should be 50%, right? No. Again, remember the VA talked about a hundred percent able-bodied. They are only going to fully compensate a hundred percent able-bodied once. So that first one, you always start with the highest rated disability and that goes against the hundred percent abled body. That gets 30%. The next one only counts as 7%. Then the last 10%, 63% remaining, so that's 7%. The total disability radiating there is 43.3. Any ten digit 4.9 and below rounds down to the next 10%. If it was 45.0 or higher, it would round up to the next 50%. >> We have a question here. What DA disability percentage would preclude you from federal employment? Would having a percentage higher than 70% prevent you from getting hired? >> To my knowledge, I'm not a federal employment expert, but the Federal Government can't ask you specifically what disabilities you have. They can ask you to qualify for the 10-point system. You have to tell them what your rating is, but you don't have to get into the specifics of the ratings, unless there's some sort of qualification that that would preclude you from. So it would depend on what the job was and what the qualifications they say are. Like, say if you can't carry out a physical piece of that job, then potentially you could go disqualified. But if it's just on the rating, that's -- I'm not aware of anything that that would preclude you from hearing from. (Quiet speech away from microphone.) >> That's true. If you ask for that, that's right. That's right. If you put in for unemployability -- you can get unemployability down to 60%, if you put in for that. And that's rare. It's usually 70% or higher. If you put in for

unemployability, then you really shouldn't be looking for a job. Okay. So here are the forms that we talk about. The first one, and I think it applies to most in this room, we don't usually consider this for a pre-discharge claim. You have one year from your separation to get that claim in. So if you separated or retired, you can put in a 0966 intent to file, and it's basically it will tell you, you have a year from your separation or retirement date to have it go back to your original date. Otherwise it's going to be the date that the VA received that 0966. So say if you're five years separated or retired. If you file on July 18th, 2017, an intent to file, you have until July 16th -- I'm sorry, 17th, 2018 to get that claim in. So that's an important form if you're interested in getting that claim in and securing that date. And once you have that date, it's a key date for your whole process of your claim, because you can appeal future decisions by the VA, and as long as it's done within the appeal time frames, which I'll get to later, it can go back to that original date. Okay? So then the power of attorney which I mentioned earlier is the form 2122. Now, people ask me who are the accredited VSOs. Who can I go to? It's pretty obvious, the people like the American Legion, the VAB. But page 4222 lists the accredited service organizations. If you find that the American Legion isn't available or there's a three-month wait, you can try other organizations. Normally if you go to the organization's website, the search engine will enable you to find the closest VSO. Also, most states have VSOs located in each county seat. Maryland is an exception. They only have them in a couple of locations. Virginia has them in almost every county seat, and in fact in this area they have more because there's such an abundance of veterans in this area. It's called Virginia Department of Veterans Services, and you can go to their website and find one. They just opened a new office in Springfield, I think. Most of these places have a couple of months backlog, so take that into account when you're filing a claim. Okay. The 526 EZ is the fully developed claim form. If you do this online, and I'm going to show you the e-benefits site, or if the VSO puts it in the system online for you, they are basically filling this out by going screen by screen in the system itself, so you're not actually filling out a 526 EZ form and sending it in. You're filling it out online. Here is the form that is very underutilized, and I think is the key to having success in your claim the first time through. And it's called the statement in support of the claim, 214138. The VA doesn't talk about it a lot. Some VSOs don't use it. We personally used it a lot. Basically, it's got your name, your Social Security number, your address on it, and it's a blank piece of paper. It's your opportunity to talk directly to the rating

official and say here's exactly what I'm claiming; I have this disability; here's when it was diagnosed; here's the result of an MRI, here's how it impacted my life, and here's the medications that I'm retired to take for it. It's a blank piece of paper. You don't want to be overly verbose, but it's like you're sitting across from the rating official. Tell him or her what you want to know about what you're asking for. We have found that if you do this form and you fill it out as completely as you can, you're going to be probably better satisfied than if you just fill out the 526 EZ, because that's really just questions on your service, when you came in, and then it just lists the disabilities. So you're just going to say, left knee strain or right shoulder or, you know, whatever disease it might be or neck strain. You don't really get a chance to explain it. So you hope you're getting a good rating official and that they are reading all of your medical records. Not always the case. So if you put it in front of them and summarize in detail what it is you're claiming, it helps them point to where in your medical records they need to go to verify. So I can't bang on the desk enough to say if you're going to do a claim, if you use that 4138 I think you're going to do a better job. Okay. Declaration of dependents. Whether you think you're going to get rated at 30% or not, I would recommend always filing this now because you may lose compensation if you don't submit it initially with the first claim. Okay? So, basically it's listing your spouse and your kids, and then if you have dependent parents that's another form. They want to know any previous marriages as well, because they want to make sure that they are only compensating you for one spouse or that another spouse is not coming to you for benefits they are not entitled to. If your children are going to a school or are in some certificate program, you can continue to receive compensation for them as long as you fill out the 674. If they stop going to school, there's a second page that you need to tell the VA they have stopped or they have finished early or whatever. Okay. Here are the other parts of your record. Besides your medical record, even if you are not submitting a dental disability for it to be a complete claim they expect you to have your dental records included. They want to see a separation retirement physical. They want to see you claiming everything on that retirement physical that you're claiming in your claim. If it's not talked about on your retirement physical, they are going to scratch their head and wonder why. DD 214, obviously, all of the ones that you have for the reservists, just showing your points, how you got your points. These are not a hundred percent necessary. If you fill the 686 out correctly. But we always recommend that you submit your marriage

certificate, your spouse's SSN, and your children's birth certificates and their SSNs, and then previous divorce decrees. On the last page, the signature page, if you don't provide the banking information, this is going to delay you from getting your compensation. So you want to make sure you fill that out and tell them what you're getting in retirement pay or separation pay, because if you have got separation pay, that has to be paid back first before you can be compensated for your disability. So make sure that's on your last page. Okay. So you submitted your claim, and it's supposed to be based on 125 days. It usually takes the VA four to eight weeks for them to do an initial screening of your claim to see what you're claiming. And then they are going to go ahead and schedule C and P exams, compensation and pension exams. That's going to be either depending -- it's a contractor if you don't live close to a VA medical facility, or a VA medical facility. And you're going to do an interview. They are going to schedule you for exams based on what you're claiming. There will be different types of doctors or physicians assistants or nurses who will interview you based on the claims that you're claiming. If it's mental disability, PTSD or anxiety, they will put you with a psychologist or a psychiatrist. If you're claiming something orthopedic, then they are going to put you with an orthopedist. They may do some X-rays. They may put you through stress tests. But typically it's just sitting down and reviewing your record with you and asking you questions. And basically they are filling out what's called a disability questionnaire. It's a number of questions that the VA has. These can be anywhere from five to 15 pages long, and they are basically answering questions, which enables the rating official to be able to come up with the appropriate rating based on the disabilities that you have talked about with the physician. If you decide that you want to send in your own disability benefit questionnaire, you can do that. They are available. You can just -- you can ask Dean, and Dean will send you a copy of -- it's a file that I have. It actually has all of the DBQs on them. I can send that to Dean if you want them, and you can download those DBQs and ask your doctor to send it out. If you send that in with your claim, they won't schedule a C&P exam for that particular disability. They will just take it at face value and assume your doctor did a good job. If you send it to a medical facility, it will take longer because they are not getting paid to fill it out. If you go to the contractor, the contractor usually submits them fairly quickly, within a couple of days, because they get paid once they submit the paperwork. Once the rating official has all of the DBQs back, it's just a matter of when your file gets to the top of that

rating team in-box. So typically, as I said, they consider a small claim eight issues or more. If you're submitting a claim with over 20 issues, it's going to take probably six months or longer for them to get to it because they have more work to do. If you're submitting a small claim, you're probably going to get it in under 120 days. So, what happens is the VA sends out a notification letter. I talked a little bit about this earlier. The notification letter lists all of the disabilities you requested, whether it was service-connected or not, what level it's rated at or not, or if it's denied, and then the next higher level. The date on that VA notification letter is the important date for you. You have one year from the date of that letter to send in an appeal. Okay? Now, we recommend that you -- if you really disagree strongly with a decision that they made, whether it's one decision, five decisions, the whole decision, that the first thing you should do is a reconsideration request. If you can get in a reconsideration request within the first five to six months of that notification letter, you're getting an answer a lot quicker. Okay? If you put in an appeal, it's going to take two to three years or longer. Okay? A reconsideration request is sort of an unofficial appeal. You have sort of said to the VA or asked the VA, hey, I really think you made a mistake. I don't want to put in an official appeal yet, but I want you to take a look at this. I'm going to put in new information if I have it; I went to the doctor and received a new diagnosis. If you can get it into the VA and give two to five months to come back to you, that still gives you time to appeal if they come back and say they are still standing by their original decision. Once you get the appeal, for one year you're locked back in to your original claim date, okay? So as long as you meet their timeline. So the first appeal can take anywhere from two to four years. They are actually focusing on that. They were supposed to start in 2016. This year, I have seen some appeals come back that I submitted two years ago. So they are taking up to four. They are now at about the two-year mark. There is legislation that congress hasn't approved yet to speed that up even more. The only thing is they have taken some safety nets out from those, to be able to speed it up. But most of the veteran organizations decided, you know, to get a faster decision and more important than some of the safety nets that were set up. We didn't necessarily agree with that, but most of the other VSOs decided that was the best way to go. (Quiet speech away from microphone.) >> -- because if you have medical records overseas and you are having a hard time getting them -- >> If you can't get your appeal within a year, then you have lost your date. So your choice is either to put in an appeal on a new date,

or I would just start with a new claim, because a new claim is going to go in 125 days, but you have lost -- You can ask for an extension, and if the VA agrees, if you've provided evidence that, hey, I'm still waiting on such and such an evidence from overseas, you can ask for an extension. I have not asked for one, so I don't know if they will agree to it or not, but you can always ask. >> We have a question about posting slides online, so, yes, I will post these slides online. >> Okay. Okay, so, if you decide you're not going to use a VSO, you feel comfortable enough for doing it yourself, you can sign up for an e-benefits account. The SEP, the stakeholders enterprise portal, that's if you're doing it online. So if you sign up online, here's the main page. You can see on the left-hand side, once you log in and take it to this landing page, here are some of the things for the disability compensation system for you to apply. And basically it just, you select those and it takes you through it. Let's see. I'm sorry. I need to go back one. So to apply for a VSO, if you want to do it online, if you see under register, if you highlight that, a point, a claims agent, that will take you to the options of finding a VSO online. Okay? If you don't want to go to that individual VSO website, you can do it through here, and basically it will take you through a number of screens. You plug in your zip code, and it will run through page after page of VSOs that are closest to you that way. Unfortunately, it's useful but there's a multitude of you don't know which one to select, because it will be VFW and it will be like three pages of VFW, and you just have to take your chance and hopefully they are doing a good job of answering those. Okay. Next slide. Okay. And then when it takes you to this page, if you select on that -- this is a landing page -- to apply now, that basically starts the intent to file, so you don't have to actually get that form and submit it. If you actually start the application, that registers that day that you did that for the first time. And you can see that -- well, you can't see it on this slide, but that would be how you start the 0966. If you want to -- basically, if you had any open applications, like once you hit apply now and then you come back out and go back in, it will show you an open claim, and it will show you the last time you went in there and what you have done to it. Okay. So here are two, if you have questions, even if you're not a member, anytime we come out into the community, if you have got a VSO-related question, we answer all of those, [VSO@MOAA.org](mailto:VSO@MOAA.org). If you have a benefits related question, you can write into [Beninfo@MOAA.org](mailto:Beninfo@MOAA.org), or to member services, myself or Shane. But if you write in that you were a member of the VSO, a one-time question, we give out freebies that way. Okay. I'm available for

questions. >> You said that you were going to provide Gene with a disability benefits questionnaire? >> I will. It's about an eight page file that has a link inside each of them that details all of the different DBQs, and it goes through each one. There's muscular skeletal, there's EMT, all of the different areas, and you have to find the one that seems most appropriate to the one that you want to claim. >> I have a question. I have a disability, and [indiscernible] for whatever reason, if you go back in and ask for that knee to be looked at, do they go back and look at everything else too, or just what you -- >> Okay. We get asked this a lot. Typically, after age 55 -- >> I'm sorry. Can you repeat the question? I didn't quite hear the question. >> The question was if you go back and ask for an increase in any one particular disability, do they go back in and look at everything or just the disability that you're asking about. Okay? >> Okay. Thank you. >> Okay. So, typically, if you're age 55 or older, they don't go back and look at anything that was considered static, and it will say static on your disability, or if you have had that disability for over ten years, so typically if you have met most of those, they don't look at it. And I will tell you I have seen them go back and look at stuff if it was originally listed as static. If they think that there is a chance of a disability they rate getting better in the future, they will tell you right up front, the first time that they look at that, and they will say, okay, future exam required. And they may look at it in two years. They may look at it in five years. So to answer your question, if you're under 55 or it's been less than ten years, technically, yes, they could go back and look at things, but typically they are only going to look at the thing that you're asking them to look at. >> Okay. I got it. >> Okay. >> So you're claiming, like I know I messed my knee up and my lower back in the military, and when I claimed it the first time, they didn't want to give it to me. Yet, as my age increases, the pain is increasing. Am I allowed to go back and say, hey, I want to claim this again, because this is where the injury took place? >> If it was denied initially, you have the uphill battle of getting it service connected. But if you can get a military opinion -- a medical opinion from a doctor to say, obviously, to me, this is a long-term issue that is being aggravated, or were you in an accident, were you -- >> [Indiscernible] -- it was during training. >> Okay. Did you go see medical for it? Okay. Since you didn't appeal it back then, again, it's a little bit of an uphill battle, but if you want to say I never appealed this, but I want a reconsideration of this. You're not appealing, but you're asking for it again. Do you remember anybody from your class that would remember that? You could get it if you do. You could get a

buddy's statement, and/or get all of these things. It will play out in the medical records, hey, I have this injury, I think it's now led to this. I have -- here's people who remember it happening. Get one or two people to maybe write about it, a quick one-page statement, I was there when Ms. -- ran into a pole, and a medical opinion from your doctor, I think it is as likely as not that the injury stems from this. Those are the key words, as likely or not, the preponderance of the evidence, that the VA has to say it's 50% or more, and they are supposed to agree and service connect you. Okay?

>> I have a question. >> Uh-huh. >> (Away from microphone) -- former Navy submariner with hearing loss, particularly tinnitus and hearing loss -- >> It's harder. I have got a case right now that's being appealed. I'm a P3 guy who was enlisted working on a flight line and then was also an in-flight technician, so I had over 6,000 hours in the plane, so a very high noise environment like a submarine. Again, a medical opinion helps, but if it only comes on six, ten, 20 years after service, you do face an uphill battle. And I have seen the VA approve it, and I have seen them deny it and you have to go through the appeal process. Say, hey, I have worked in this high noise environment so many years, and now I have been in an office space and it started, so I think it's service connected. >> In my submarine groups, we are talking, and we say, hey, how many of you have tinnitus, all of us with hearing loss, and it's probably been a long gradual increase, but it gets more noticeable at 55, 60. >> Again, the longer from service, the more this becomes more on you. And again, having an audiologist who would agree to that and write that medical opinion helps, but again, I don't know that there's any black and white answer that you're going to get today. There are people who are claiming it, but they have denied the person that I'm working with. They denied the first appeal, and he's going to the next level. >> [Indiscernible] only because it was in my records when I was in the military. >> Right. >> You mentioned diabetes earlier. I'm a Vietnam vet. I was not in country, but I was off the coast. >> Brown water or blue water? >> Blue water. >> Blue water, it's still denied. The VA has not approved blue water yet. We keep fighting for it, but, no. Unless you can prove you were in country, it's not presumptive. >> No, I was not in country. >> We have a question online. Is there a VA compensation percentage for the smokestacks in Afghanistan and Iraq. >> Okay. For that, the gulf war syndrome-related issues, yes, respiratory issues are one. You have to prove that you were near -- you were in country and that you were potentially near the burn pits, and if you have some respiratory-related issue, which extends to sleep apnea, if it's aggravated

so that you have got a now sleep disorder, yes, those are service connectible. >> Like asthma? >> Asthma, yes, if it aggravated your asthma, so before you went over there, you had one episode a year, and now you have six, yes, that is service connectible. >> You had none and now you have it? >> Yes. >> If you can get a medical opinion that states, you know, hey, he didn't have it, he or she didn't have it, now they do. They served over in country, they should lean towards approving it. Yes? >> Once you get your rating, and they diagnose what your medical conditions are that you need treatment for, is it a requirement to go to the VA for that continued treatment? >> No, no, no. Are you a retiree or -- >> Retiree. >> You can access VA health care if you want. If you don't mind saying what your rating is, if you're above 50%, you can have full access to everything. Below that is a little less. For those who don't have a service connected disability, even if you're a veteran the only way that you can access VA health care is based on your income. So if you have never filed a claim, we have older members, 70, 80 years old, who are saying, hey, I now need hearing aids, and I want to get them through the VA health care, and they are denying these. Well, you never filed a VA claim, you're priority eight, and based on your income you don't have access to health care. If you have your tricare and you have your federal as well from the Patent Office, you have your choices. Okay? If you decided you wanted to go for VA health care, you have to apply with VA health care, and then based upon your disability level, they will determine your priority group and what access you would have. >> I have a question. >> Yes. >> I was curious. My father is a Vietnam vet, and my mother and I have been attempting to do some things on his behalf. What is your recommendation for folks who are unfamiliar with a lot of these things. Like, I sat in on it, but because I have no military affiliation, I'm not familiar with a lot of the terminology used. Is our best course to seek out a VSO? >> Absolutely. I would find a VSO. What kind of disabilities does your dad have? >> Essentially, we were trying to get him evaluated for possible additional benefits. He was in Vietnam and came in contact with Agent Orange, so he does already have a rating, but he's experienced a lot of different things since coming home, from strokes to issues with his sight, diabetes, the whole nine, and we have been trying to go back into his paperwork and see what they have already approved him for, what they haven't, and what potentially more we can get for him. >> Sure, yeah. I would definitely seek out. Where are you located? >> In Maryland. >> Okay. Maryland doesn't have the state-sponsored in many areas. Do you live near

Baltimore? >> We are not too far from Baltimore. We could get to Baltimore. >> Okay. Many of the big VSOs will be colocated at the Baltimore regional office. >> Okay. >> And that's most likely where you're going to be able hopefully get service. So I would look up VAV, Vietnam vets, VFW American Legion, and see if they have locations up at the Baltimore regional office see if you can get a scheduled appointment to go in and talk to them. >> Okay. All right. Thank you so much. I appreciate it. >> The VA, they gave me a list of local VSOs. I'll send that out as well. >> Thank you. >> I know it probably wasn't what you came to talk about today, but what the caller just mentioned, could you talk about a little bit the caregiver and [indiscernible] benefits? >> Okay. In terms of what? MOAA has some caregiver programs where we have some caregiver [indiscernible] and we provide some financial information. If you're talking about aid and attendants, ah, that's different. Okay, so aid and attendants is a pension program. It's basically financial needs based. However, if the veteran is a veteran of war-time service and becomes incapacitated, potentially you could get additional compensation for in-home care or nursing home care. Okay. So the VA just recently published the new list. It used to be depending on which regional office you submitted the application for, they went by their own income standards. So basically it is now that they are supposed to be nationwide, income standards, so that if you're making a fairly high requirement income but your medical costs are enough it may take you down to the point where you could get additional aid. It's called aid and attendance, from -- (Quiet speech away from microphone.) >> Potentially. No, actually no. It's mostly from veterans. Unless the veteran died in war. Okay? Yeah, sure. >> I think what you're trying to move to are two separate issues. The aid and attendance is for what he said, but then there's a caregiver access out, but that's only for this conflict. Vietnam vets don't qualify for the caregiver. >> Yeah. And what was the other thing? Oh, there also are -- most states have VA nursing homes. And for those who are rated -- it's either 60 or 70%. I think it's 70. If there is space in those VA nursing homes and you're rated 70% or higher, you can get access to those homes. Well, thanks everybody. I appreciate the opportunity to come and meet with you. Thank you. >> Thank you. [Applause] >> I want to present you with a couple of things on behalf of the military certification. First, I want to give you one of our coffee mugs. Probably most relatable is our coin. Thank you very much. I appreciate it. >> Thanks so much. >> Are you all done? >> And I think there's one more question. (Simultaneous speech) >> If that falls under

the same thing as the burn pits, so if you were in [indiscernible] and you were exposed to all of the burning fields and you have some sort of respiratory or other illness, the undiagnosed gulf war syndromes, you can apply and see what they will evaluate you at. Thank you. (Away from microphone) (