Texas VFW District 21

Hal Cleveland – VFW Post 6872 Benefits Adviser & District 21 Legislative Chairman
hal.cleveland@att.net

VETERANS LEGISLATION & BENEFITS NEWS – 11/15/2025

Compiled from various online Veterans Service Organizations & printed news sources.

Please redistribute to other veterans when you've finished reading this newsletter.

Become a VFW Veterans Advocate by *Ctrl + Clicking here* → https://votervoice.net/VFW/register

(If you get this in an email, the "underlined blue lettering" are links for further information or email action.

1. Veteran Pushes VA to Provide Disability Payments, Health Coverage for Gulf War Illness - *(Stars & Stripes)*: **Hal Note:** ***After the Gulf War, there was on going cases of what was called Gulf War Syndrome or Illness that the VA didn't recognize simply because they didn't know what it was. This was much like Agent Orange related diseases for the Vietnam Veteran, that was not acknowledged as service connected until about 1995, where many Vietnam Veterans died before the VA acknowledged that it was service connected. Maybe there is hope for those afflicted with Gulf War Illness now. If you know of someone that died from the Gulf War Syndrome/Illness, now would be a good time to contact their spouse and possibly file a Dependent Indemnity Compensation (DIC) claim, "if" this becomes service connected by the VA.*** A Gulf War veteran is formally requesting the Department of Veterans Affairs add Gulf War illness to the list of service-connected medical conditions that qualify veterans for monthly, tax-free disability compensation and enrollment in VA health care. The request by Ronald Brown, a toxic wounds consultant with Vietnam Veterans of America, follows a recent decision by the Centers for Disease Control to officially recognize Gulf War illness as a legitimate medical condition affecting tens of thousands of former service members deployed to the Persian Gulf more than 30 years ago. Brown submitted a letter to Margarita Devlin, principal deputy undersecretary for benefits, urging the VA to "act swiftly" to include Gulf War illness as a medical condition with a disability rating and benefits specific to the severity of an individual's ailment. "These steps are essential to honor the commitment to our Gulf War veterans and ensure they receive the recognition, compensation and support they deserve," Brown wrote in the Oct. 16 letter. VA acknowledged receipt of the letter but also warned Brown that the federal government shutdown will delay a response. More than 700,000 troops deployed to the Persian Gulf in 1990 and 1991, with an estimated one-third developing unexplained medical symptoms that included severe fatigue, asthma and skin rashes. Veterans often received a diagnosis of "medically unexplained chronic multi-symptom illness" — not Gulf War illness — because the condition was not officially recognized until Oct. 1. "I think having a diagnosis of multi-symptom

illness created a lot of confusion for veterans and for the VA," said Mike Jarrett, a 66-year-old Gulf War Army veteran in Virginia. Jarrett during his service in the Gulf War. Mike Jarrett, an Army veteran, served in the Persian Gulf War from 1990 to 1991. Jarrett said he developed several medical conditions during his deployment that continue today. "I didn't ask until I needed help. But I was often told it was in my mind," said Jarrett, who is 100% disabled from Gulf War illness. He is shown riding aboard a landing craft utility boat in the Persian Gulf. (Mike Jarrett) Jarrett, who is 100% disabled, said it was a struggle for him to convince VA doctors that his symptoms were connected to his deployment in the Persian Gulf. "I didn't ask until I needed help. But I was often told it was in my mind," he said. Jarrett, a former chief warrant officer, became ill during his nine-month deployment to the Persian Gulf in August 1990. But he was given several diagnoses, including chronic fatigue syndrome, reflux and fibromyalgia, all common in the general population. Jarrett said the VA's inclusion of Gulf War illness as a service-connected condition would bring legitimacy to the ongoing medical problems veterans say they developed from their deployments. While no single cause for Gulf War illness has been identified, researchers point to links to toxic exposures that include chemical nerve agents such as sarin gas, smoke from oil well fires and pesticides. Brown wrote in the letter that the addition of Gulf War illness as a service-connected condition will bring "fairness and consistency" to the review of the claims for benefits. He also said that a diagnosis of Gulf War illness will make it easier for the VA to identify veterans for research to find treatments and perhaps a cure. "It is important that Gulf War illness is fully recognized by the VA because they are professional caregivers to veterans," Brown said. "Following the CDC's approval of an official diagnostic code for Gulf War illness, veterans find it hard to understand why VA hasn't immediately issued new regulations adding the Gulf War illness [as a medical condition] so hundreds of thousands of afflicted veterans can obtain the VA benefits and care they need and earned," said Paul Sullivan, an Army veteran and national vice chair of the nonprofit Veterans for Common Sense. Veterans for Common Sense has long advocated for Gulf War illness to be added as a "presumptive medical condition" that the VA automatically treats as service connected without the veteran having to prove a link between an illness and military duty. Jarrett said he volunteered for academic and VA research of the symptoms he and other Gulf War veterans were experiencing after he retired from the military in 1996. The findings revealed damage to his mitochondrial DNA and atrophy in parts of his brain. "There were a lot of lost opportunities because of my physical limitations after I left the service. But my hope is that other veterans will have an easier time getting treatment and having their claims approved once the VA designates benefits for Gulf War illness," Jarrett said.

2. VA Improves Access for Veterans Using Community Care *(DAV)* **Hal Note**: ***This is from previous news, but it bears repeating in a condensed format.*** In May, the Department of Veterans Affairs announced changes that will make it easier for veterans enrolled in VA health care to access community care from non-VA providers, at the department's expense.

Under previous rules, a decision authorizing care from a non-VA provider was jointly made by a veteran and their referring medical provider. A decision on the referral for community care wasn't considered final until it was reviewed by a second VA doctor.
The VA has implemented language from the DAV-supported Senator Elizabeth Dole 21st Century Veterans Healthcare and Benefits Improvement Act that removes this extra review step and provides eligible veterans with easier access to community care.
This new, streamlined process for determining the best medical interest for veterans' care will be backed by training for Veterans Health Administration employees to ensure full compliance with the Elizabeth Dole Act.

3. VFW Joins Major Richard Star Campaign: *(VFW)* **Hal Note:** ***This legislation is important to our battle wounded military retirees. The VFW is NOW OFFICIALLY BACKING THIS BILL. I've explained before that these wounded military retirees are being stripped of their retirement pay so that they can receive disability pay from the VA. It passed the House vote, but failed the Senate Vote, so it's back to square one. Just because this bill does NOT affect you, you can help get it passed by notifying your Representative AND your two Senators them to get through congress. So please do so, so this bill can get across the finish line in the next congress in 2026.*** The VFW participated in a Capitol Hill event organized with partners Wounded Warrior Project and Disabled American Veterans to raise awareness for **H.R.2102/S.1032**, ***The Major Richard Star Act***. The organizations conducted a poster and pin campaign to highlight the bill's importance for combat-disabled retirees. The event underscored strong support to end the unjust offset blocking these veterans from receiving both their disability compensation and retirement pay.

4. Senate Hearing Exposes VA Disability *(FRA):* Senate Veterans' Affairs Committee Chairman Jerry Moran (R-KS) led a critical hearing titled "Putting Veterans First: Is the Current VA Disability System Keeping Its Promise?" as the federal shutdown entered its 31th day. Prompted by a recent Washington Post op-ed alleging widespread fraud, testimonies from the VA Office of Inspector General (OIG), GAO, and major veterans service organizations (VSOs) revealed that fraud impacts only 3.7% of investigations, debunking claims of systemic abuse. Senators, including Tammy Duckworth (D-IL), condemned these portrayals as politically motivated and linked to efforts to cut essential veterans' programs.
Fraud among the 6.9 million beneficiaries is less than 0.1%, with wrongdoing often stemming from predatory claim sharks rather than veterans themselves. OIG's Cheryl Mason recommended practical fixes, such as digitizing Disability Benefits Questionnaires, while VSOs including DAV and VFW warned that sensationalized media narratives erode trust and dishonor legitimate claimants.
These findings support targeted prevention and better oversight, not sweeping benefit reductions.
The FRA, alongside other VSOs, responded to the Washington Post op-ed with a joint letter highlighting inconsistencies and omissions that misrepresented the disability program's integrity.
GAO testimony revealed that while claim backlogs have dropped to 135,000, average delays remain at 100 days due to staffing

shortages and outdated 1945 rating schedules. Experts urged workload forecasting, telehealth expansion for PACT Act claims, and modernization of the disability framework. VSOs called for streamlined filings, protection against exploitation, and consistent funding to keep benefits accessible throughout the shutdown.
Ultimately, the hearing highlighted that the VA disability system, though strained, remains vital to the nation's promise to its veterans.

5. 2026 COLA Set fpr 2.8% *- (FRA):* The Social Security Administration announced a 2.8 % cost-of-living adjustment (COLA) for 2026, affecting Social Security recipients, veterans receiving disability compensation, and military retirees. For veterans rated at 100% disability with no dependents, the increase will add about $107 per month.
The adjustment becomes effective December 1, 2025, with the first payment reflecting the increase arriving December 31, 2025. Veterans and retirees do not need to apply, as the increase will be applied automatically. While the COLA helps benefits keep pace with inflation, critics note that the increase remains modest compared to rising costs for housing, healthcare, and everyday goods.

6. Medicare-Eligible Patients Back to Military Treatment Facilities *(FRA):* The Defense Health Agency (DHA) has announced a new initiative aimed at bringing Medicare-eligible Tricare for Life (TFL) beneficiaries back to military treatment facilities (MTFs), according to Dr. Stephen Ferrara, acting Assistant Secretary of Defense for Health Affairs. Speaking at a Military Officers Association of America conference on October 28, Dr. Ferrara emphasized that 21 MTFs have been selected for this pilot effort based on their specialist availability and overall capacity. The move seeks to strengthen continuity of care for retirees and their dependents while enhancing medical readiness across the force.

Dr. Ferrara, a retired Navy surgeon with more than 30 years of experience, acknowledged the challenges TFL patients have faced as access to MTFs has fluctuated over time. "It's frustrating for the patients," he said, noting that older patients often present complex conditions that also help providers maintain and improve their clinical expertise. By treating a broader spectrum of cases, MTFs can offer robust training environments for military physicians and staff, an essential element of operational readiness.

The FRA welcomed the announcement, noting that expanded access to MTFs benefits both retirees and the military health system. The association emphasized that allowing TFL members to once again receive care at MTFs not only provides a trusted setting for high-quality services but also ensures military doctors continue to gain valuable hands-on experience treating diverse patient populations.

7. VA Secretary Pledges Continued Improvements *– (FRA):* Ahead of Veterans Day, VA Secretary Doug Collins reaffirmed the department's commitment to strengthening services for the nation's veterans, praising their sacrifice and outlining the administration's progress. "America's Veterans have made our country – and our military – the greatest in the world," he said.

"Keeping the promises America has made to its Veterans is the sole purpose of the Department of Veterans Affairs."
Collins highlighted what he described as major improvements under the second Trump Administration, including a more than 49% reduction in the disability claims backlog since January and a record-setting three million disability claims processed by the end of the fiscal year. He also noted expanded access to care through 20 newly opened clinics and more than 1.4 million appointments offered outside standard business hours to improve convenience for veterans.

The department reported continued investment in infrastructure, including $800 million dedicated to improving facilities through savings from ongoing reform efforts. Other initiatives include easing access to community care, accelerating the VA electronic health record rollout, and implementing changes designed to streamline survivor benefits after concerns raised in recent years. Additionally, VA said it permanently housed 51,936 homeless veterans in fiscal year 2025, the highest total since 2019, while internal reforms brought more employees back to on-site work and redirected funds from recently ended union contracts toward veteran care. Collins said these efforts reflect a broader shift toward making VA a "service organization" focused entirely on veterans' needs.

As these reforms continue, the FRA will closely monitor VA policies and regulations to ensure that veterans truly come first. Ongoing oversight remains essential to safeguarding the benefits and services earned by those who served.

8. Update on Hal. - *(Texas VFW District 21 Legislative Chair)*: ***Most of the Comrades and auxiliary members in Tri-Cities VFW Post 6872, know that that I have been waiting to pull the trigger for surgery on my arthritic shoulder over past several years. 3 months ago, I did decide to have a Total Left Shoulder Replacement.***
The moon and stars finally lined up in the right order and I had the surgery on 11/13/25, but now it's looking like I've got a long row to hoe and judging by the speed I'm Huntin' and Peckin' I won't be able to get much legislation and benefit news out. Bear with me while I'm on the Binnacle List trying to get healed.

If you have questions, feel free to call and leave a sort message and I'll do my best to get back with you, (817)-602-6826
+