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## MILITARY AND VETERANS

The expertise of the Reeve Foundation extends to those members of the military or veteran communities who have experienced spinal cord injury or paralysis.



In February 2007, my husband Matt, an Army staff sergeant on his second tour in Iraq, was shot in the neck by sniper fire near Ramadi. This happened exactly six weeks after our wedding day. Both of our lives changed forever. —*Tracy and Matt Keil*

## WELCOME LETTER FROM A MILITARY FAMILY

The bullet went through the right side of his neck, hit his vertebral artery and his left lung, and exited out his left shoulder blade. The bullet severed his spinal cord, rendering him a quadriplegic. The first thing the doctors said to me when they began to explain his injury was, “Your husband has a Christopher Reeve-type injury.” This is the only way I understood what the doctor was talking about: we knew who Christopher Reeve was, in fact Matt had always been a huge fan of Superman and even got a tattoo of the Superman logo on his right arm when he first joined the Army at eighteen.

When the doctor said those words to me I thought about what would happen to us, how would Matt live in a wheelchair, how would we possibly cope with the chaos and uncertainty? Matt was first transferred to Germany, then to Walter Reed Army Medical Center in Washington, D.C.; once stabilized he was sent to the Department of Veterans Affairs hospital in Tampa, one of five big polytrauma units in the VA system. Because we were a military family, we got hooked up with the system of care for wounded warriors. We became well versed about TRICARE, Warrior Transition Units, and the VA, and all sorts of layers of counseling and care; we discovered many resources and many regulations.

The VA has great expertise in spinal cord injury, but we began to wonder if there were any options for a more aggressive approach. We asked, “This is what life is going to be like?” Rehab was more like a nursing home; they told us Matt would probably be there a year, living in some sort of assisted living situation, but he really wanted to get back into the community. So my sister



Tracy and Matt, with Matthew and Faith

and I did some research. We reached out to the community of vets and other organizations, including the Christopher & Dana Reeve Foundation.

I called the Foundation and asked what we were supposed to do now: How do I learn everything I need to know and how do we learn to live with my husband in a wheelchair? I spoke to a very nice woman on the phone and she told me all about this book, the **Paralysis Resource Guide**, which was sent directly to me at the

hospital. She told me to read through the guide and please call back anytime with any additional questions. She said, “You will get through this, things do get better. You can live a very happy, full life as a quadriplegic—Christopher Reeve was proof of that.” I was very encouraged after hearing that. And this book, the PRG, it was very relevant; to this day, years later, I still go back to the guide and find things that are useful.

Meanwhile, we learned that there might be options for Matt’s medical care: The Department of Defense and VA allow and pay for some injured soldiers to seek care and rehab at specialized private facilities. The military healthcare system doesn’t promote the private care option but we were able to transfer Matt from the VA to Craig Hospital near Denver. This was the right move for us; we found our future.

Today, injured soldiers and their families reach out to Matt and me. They hear, “You want to connect with the Keils. You want the life they found.” And it’s true. We know where we are going to be. We also recognize there are many past vets who fought for our benefits. We know it’s our turn. We are here to help; we are never too busy to help someone get where they need to go. We want people to know they do have options.

Our lives continue to change—for the better. We live a very full life. Matt and I were married such a short time that we had not yet tried to start a

family, but we discovered after his injury that children were still possible and through in-vitro fertilization, we welcomed our twins Matthew and Faith on November 9, 2010. We have traveled extensively to talk about our experience and we encourage people to ask us questions about our life after injury. Our lives have changed so much since before Matt's injury, but even Matt always says he wouldn't change a thing even if it meant he could walk again. We found a new appreciation for life, friendship, family, and each other that most people spend a lifetime learning. To me, it seemed like fate. I can't explain why, but we both feel like this was supposed to happen and that this is how our life should be.

Take this opportunity to appreciate the life you have been given. Whether you are newly injured or have just learned about this resource guide, share your experience and knowledge with others, participate in all life has to offer. There are many options: learn about them from this book. Better yet, ask a lot of questions and connect with others who have been in your situation and who can say, "Life is what you make of it."

From our family to yours, we wish you a long, healthy fun-filled life. With respect and encouragement, —*Matt, Tracy, Matthew, and Faith Keil*

## MILITARY AND VETERANS PROGRAM

**The Reeve Foundation's Military & Veterans Program (MVP)** incorporates our expertise in spinal cord injury and paralysis into the many supports, resources, and community connections available for members of all five branches of service (Army, Navy, Air Force, Marines, and Coast Guard) including active duty, Reserves, and National Guard components, as well as veterans, whether retired through fulfilled contract or involuntarily separated. Support through the Reeve Foundation is offered to anyone who has served in uniform, regardless of whether a paralyzing injury or disease can be linked to military service (often referred to as "service connected") or a cause unrelated to service (or "non-service connected"). This chapter can be used by family members, caregivers and commanding officers to help navigate the injured service member's way through the acute care, rehabilitation and the recovery process.

The first part of this chapter will cover active duty service members while the second half of this chapter is for non-active duty personnel. Please see the checklist for steps to take after an SCI for active duty personnel on page 320

and the checklist for non-active duty personnel on page 336. Resources are highlighted throughout the chapter.

In this chapter, the Paralysis Resource Guide provides a comprehensive outline of federal, nonprofit, and community-based resources for those veterans or military service members who live with paralysis and their caregivers. Feeling overwhelmed when looking for help is normal as uncertainty and a lack of guidance are typical in the immediate aftermath of a debilitating crash, surgery, accident, or disease diagnosis. The MVP Helpline is here to help make this experience less stressful. Reach out to an Information Specialist dedicated to helping members of the military and veterans find the right path toward recovery. Set up an appointment to talk to a Military & Veteran Program Information Specialist at your convenience. Toll free 1-866-962-8387; email [Military@ChristopherReeve.org](mailto:Military@ChristopherReeve.org); [www.ChristopherReeve.org/MVP](http://www.ChristopherReeve.org/MVP)

## DEPARTMENT OF DEFENSE

The Department of Defense bears the primary mission of maintaining the readiness of service members among its active and reserve ranks to train, deploy, defend, and respond to national and international emergencies. Once a service member can no longer serve due to injury or a disabling condition, a transition process begins for both that member and any family involved.

Fortunately, this transition process has evolved over the last decade and now includes cooperative partnerships with other federal agencies, state programs, and nonprofit organizations that help close gaps by holistically addressing foreseen and unforeseen needs, particularly those cases involving some form of rehabilitation. This includes those members that will be medically discharged from the military due to the severity of their injuries.

Family members as well as service members may easily experience information overload due to the numerous agencies and nonprofits who serve veterans and active duty service members. Clicking through Internet-based information becomes overwhelming and a challenge. Efforts to consolidate resources, application processes, and interaction with experts have made finding help more seamless through streamlined online interfaces.

The best sources of support and resources remain other service members, veterans, and families who have lived the experiences that lie ahead of you. They can provide you with lessons learned particularly those involving coping with paralysis and transition to civilian life.

The best place to start your exploration is Military OneSource, where you have access to a 24/7 connection to information, answers and support to help you reach your goals, overcome challenges, and transition successfully. As a member of the military, you are eligible to use this Department of Defense-funded program anytime, anywhere. Resources through Military OneSource

## **ACTIVE DUTY PROCESS CHECKLIST AFTER SPINAL CORD INJURY/ DISORDERS**

*Active duty service members who incur a spinal cord injury/disorders should expect the following process:*

1. **Admission** to nearest trauma center for surgery and stabilization
2. **Rehabilitation**
  - You will be sent to either a VA SCI/D\* (longer term focus) or a private facility SCI/D (shorter term focus). Eligibility for VA SCI/D rehabilitation is determined based on a Memo of Understanding between VA and DOD.
  - Understand eligibility for VA benefits
  - Receive counsel for benefits representation from a Veteran Service Officer (VSO) if there is a potential for a willful misconduct finding, DOD evaluates return to duty potential
  - If injury is determined to be permanent, goes to Medical Evaluation Board (MEB)
3. **Medical Evaluation Board**
  - Local commander requests medical evaluation
  - Evaluation conducted at the closest military hospital (using evaluation from SCI/D center)
  - If you disagree with the evaluation you should seek counsel with the local legal unit/VSO
  - You must sign off on all evaluations
  - Meet with counsel for benefits representation
4. **Physical Evaluation Board (PEB)**
  - PEB is a committee in Washington DC (Local legal counsel will

*represent your case in DC.)*

- *Physical evaluation from MEB*
- *Decision is a FINAL finding; You have 45 days to contest*
- *Meet with counsel for benefits representation if contesting PEB findings*
- *Transition Assistance Program (TAP) is military branch specific*

### **5. Transition out of Military**

- *DD214 provided at retirement*
- *Temporary Disability Retired List (TDRL) for five years then Permanent Disability Retired List (PDRL)*

*Throughout the process is it critical to be actively involved in learning and participating in decisions. Pay attention to the following resources and sections in this chapter for key areas of assistance: Military One Source, eBenefits web portal, Military Relief Organizations, Crisis and VA Helplines, Suicide and Crisis Prevention, Counsel for representation for benefits (VSO)*

include tax assistance, spouse employment help, webinars and online training, relocation and deployment tools, and much more. Many of the resources in this guide can be accessed through either Military OneSource or direct links.

Each branch of service has its own programs to improve the quality of life for the military community it serves. Staff can help you locate experts on benefits, housing, transportation, and finances. These resources can also be found on the Military OneSource website.

To learn more about transitioning to civilian life after separation or retirement, visit <https://www.militaryonesource.mil/military-life-cycle/separation-transition/military-separation-retirement/transition-assistance-programs-and-resources>

## **Military Relief Organizations**

Non-profit organizations that focus on providing relief to service members and families act as force multipliers for the government. These organizations intervene during family hardships and emergencies and play a critical role in the transition process by providing timely support, in the form of interest-free loans or grants, for financial emergencies that often lead to crisis (e.g. vehicle breakdown, overdue bills, emergency travel).

## MILITARY ONESOURCE

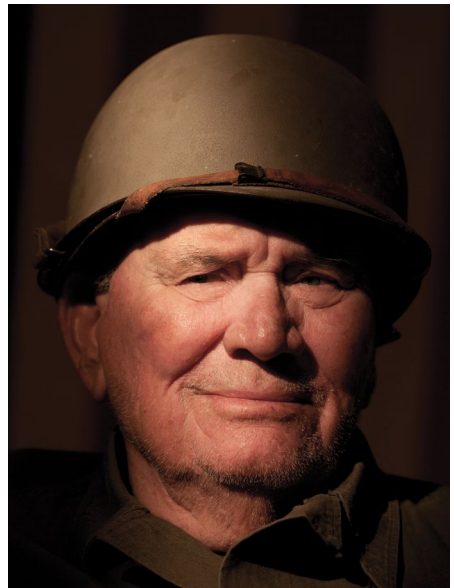
*Military OneSource is a free service from DOD to support military members and their families with centralized support for a broad range of concerns, such as money management, employment and education, parenting, relocation, deployment, and the issues of families with special needs. Military OneSource provides a wounded warrior specialty consultation service, including immediate assistance to wounded warriors and their families for healthcare, facilities, or benefits. Specialty consultants work with wounded warrior programs in each service branch (listed below) and the Department of Veterans Affairs to make sure callers are connected to the most appropriate resources. The service is dedicated to providing support—for as long as it may take—to make sure injured service members and their families achieve the highest level of functioning and quality of life. Military OneSource services are available 24 hours a day, 365 days a year. Toll-free 1-800-342-9647; [www.militaryonesource.mil](http://www.militaryonesource.mil)*

Each organization listed below has its own eligibility, application, and assistance requirements:

**Army Emergency Relief (AER)** provides funds to help soldiers with immediate financial needs with rent, utilities, emergency travel, etc. AER also provides emergency funds to soldiers' orphans and surviving spouses and offers undergraduate scholarships to spouses and children of both active and retired soldiers. You can speak with benefits experts between 9AM and 5PM EST M-F. Toll-Free 866-878-6378

<https://www.armyemergencyrelief.org>

**Navy-Marine Corps Relief Society** provides financial assistance and education, as well as other programs and services, to members of the United States Navy and Marine Corps, their eligible family members, widows, and survivors. The Society also receives and manages donated funds



PATTERSON GRISSOM BY CHRISTOPHER VOELKER



to administer these programs and services. Toll-Free - 800-654-8364;  
[www.nmcra.org](http://www.nmcra.org)

**Air Force Aid Society** supports Airmen and enhances the Air Force mission by relieving emergency financial distress, helping Airmen's families achieve their educational goals, and improving their quality of life through proactive programs. 703-972-2650; <https://afas.org>

**Coast Guard Mutual Assistance** established and operated by Coast Guard people for Coast Guard people, CGMA provides a way to extend compassion to one another in times of need. It serves as a vital financial safety net, promoting financial stability and general wellbeing, fostering high morale and encouraging a sense of loyalty to the Coast Guard. You can speak with benefits experts between 6AM and 5PM EST Monday - Friday. Toll-Free - 1-800-881-2462, Local - 703-875-0404; <https://www.cgmahq.org>

**American Red Cross** provides emergency assistance, disaster relief, and disaster preparedness education. Find a local chapter for support through this link: [www.redcross.org/find-your-local-chapter.html](http://www.redcross.org/find-your-local-chapter.html)

**Semper Fi & America's Fund** provides direct financial assistance and vital programming for combat wounded, critically ill and catastrophically injured service members and their families during hospitalization and recovery. 760-725-3680; <https://semperfund.org/what-we-do/family-support>

**U.S. Chamber of Commerce Wounded Warrior Transition Assistance Program** prepares wounded warriors for employment opportunities through transitional workshops, career opportunity days, internships, and mentor programs. 202-659-6000; <https://www.uschamber.com/wounded-warrior-transition-assistance-program>

**PenFed Foundation Military Heroes Fund Foundation Programs** offers financial assistance for wounded, ill, and injured post 9-11 combat veterans who are experiencing an unexpected short term (one to three months) financial setback. Local: 703-838-1200, Toll Free: 800-558-9224; <https://penfedfoundation.org/apply-for-assistance/emergency-financial-assistance>

## Navigating Military-to-Civilian Transition

The Department of Defense Transition Assistance Program (TAP) is mandatory for service members who have served 180 continuous days or more on active duty, including National Guard and reservists transitioning or upon release from active duty. Service members who are seriously injured on active duty

and require extended hospitalization may not be able to attend scheduled TAP prior to separation.

It will be up to individual commands to decide when and how a recovering service member and/or immediate family members can receive transition-related guidance. Some commands will send a representative to the hospital to do one-on-one counseling or provide the member with a web link through which relevant information can be accessed.

Veterans who did not receive TAP in person may also have the option to attend a scheduled session at the nearest base following recovery and release from the hospital. Veterans and family members should contact the nearest command to find out the local policy in such cases.

## SUICIDE PREVENTION

*The Department of Defense has established a Military Crisis Line. Toll-free 1-800-273-8255. Each branch of the military has a suicide prevention outreach. For a list see [www.veteranscrisisline.net](http://www.veteranscrisisline.net)*

## CRISIS AND SUICIDE PREVENTION

Service members and veterans in crisis, (as well as their families or caregivers), whether due to sexual assault, problems with the command, thoughts of suicide, or any other serious matter, are encouraged to contact the **Military & Veteran Crisis Line**. The number is toll free and can be reached by dialing 1-800-273-8255, then press 1, or access online chat by texting 838255.

Members of the military can also click on the **Defense Suicide Prevention Office** website for more information and resources at <https://www.dspo.mil>

Dial **911** for a more immediate response if you are in danger of imminent harm. In some cases, it will prove helpful to notify the 911 operator that a veteran is involved and either another veteran or a trained crisis intervention team member from the local police department is desired.

**Safe Helpline** - Specialized support outside the chain of command for sexual assault survivors. 24/7 Hotline: 1-877-995-5247

**Vet Center Call Center** - confidential call center where combat veterans and their families can call to talk about their military experience or any

other issue they are facing in their readjustment to civilian life. 24/7 Hotline: 1-877-WAR-VETS (927-8387)

**National Call Center for Homeless Veterans** - Veterans who are homeless or at imminent risk of homelessness are strongly encouraged to contact the National Call Center for Homeless Veterans at 877-4AID-VET (877-424-3838) for assistance. If veterans do not have access to a phone or the Internet, only then are they to visit their closest VA medical center without calling in advance. VA also urges veterans who are not homeless or at risk of homelessness to contact their VA medical center before visiting for any reason. <https://www.va.gov/homeless>

**Other VA Helplines:**

VA Health Care: 1-877-222-8387

VA Benefits: 1-800-827-1000

MyVA311: 1-844-698-2311

White House VA Hotline: 1-855-948-2311

## WOUNDED, ILL OR INJURED PROGRAMS

Comprehensive care for service members who are traumatically injured or incur seriously disabling illness requires coordination across agencies and health disciplines. Each of the individual branches of military service has specific recovery, rehabilitation, and integration goals. These programs provide lifetime support for impacted service members for which eligibility does not necessarily end when the service member is discharged from a military treatment facility, particularly for those on the Temporary Disabled Retired List (TDRL). To learn more about the wounded, ill, and injured programs for each military service, click on this link: <https://warriorcare.dodlive.mil>

**Air Force Wounded Warrior (AFW2)** works together with the Air Force Survivor Assistance Program, Airman & Family Readiness Centers and the Air Force Medical Service to provide concentrated non-medical care and support for combat wounded, ill and injured Airmen (and their families) as they recover and transition back to duty or into civilian life. The Air Force defines a wounded warrior as “any Airman who is seriously wounded, ill, or injured that may require a Medical Evaluation Board/Physical Evaluation Board to determine fitness for duty.” [www.woundedwarrior.af.mil](http://www.woundedwarrior.af.mil)

**Army Recovery Care Program (ARCP)** develops, coordinates, and integrates

care for wounded, ill, and injured soldiers, veterans and their families or caregivers to promote success in the course of civilian life. ARCP serves an essential role, not only in managing the care and recovery of soldiers evacuated from theater, but also those preparing to deploy and those who have returned from combat that require complex care management to cope with the effects of war and multiple deployments. ARCP works to ensure that everything possible is done to enable soldiers to return to duty. ARCP also plays an important role in ensuring Reserve component soldiers receive the care they require prior to and after deployment to remain mission ready. [https://www.army.mil/article/229469/army\\_warrior\\_care\\_and\\_transition\\_program\\_restructures](https://www.army.mil/article/229469/army_warrior_care_and_transition_program_restructures)

**Marine Corps Wounded Warrior Regiment** provides leadership and ensures compliance with laws and Department of Defense (DOD) regulations related to the support, recovery, and non-medical care of combat and non-combat wounded, ill, and injured (WII) Marines, Sailors attached to Marine units, and their family members in order to maximize their recovery as they return to duty or transition to civilian life. [www.woundedwarrior.marines.mil](http://www.woundedwarrior.marines.mil)

**Navy Safe Harbor Foundation** aims to ensure that every seriously wounded, ill and injured Navy and Coast Guard Sailor is given every opportunity for a full recovery by providing non-medical care and support to them and their families. The Navy Safe Harbor Foundation provides financial assistance and support to Navy and Coast Guard Sailors and their families enrolled in the Navy Wounded Warrior Program. <https://safeharborfoundation.org>

**Navy Wounded Warrior (NWW)** is the Navy's sole organization for coordinating the non-medical care of seriously wounded, ill and injured Sailors and Coast Guardsmen, and providing resources and support to their families. Through proactive leadership, the program provides individually-tailored assistance designed to optimize the success of the wounded warriors' recovery, rehabilitation and reintegration. [www.navywoundedwarrior.com](http://www.navywoundedwarrior.com)

**U.S. Special Operations Command (SOCOM) Warrior Care Program (Care Coalition)** was established to provide Special Operations Forces (SOF) wounded, ill, or injured service members and their families, advocacy after life changing events in order to navigate through recovery, rehabilitation, and reintegration as quickly as possible, strengthening SOF readiness. Whether you are returning operational status, moving into a different field or transitioning into veteran status, the USSOCOM Warrior Care Program (Care Coalition) will help you get there. [www.socom.mil/care-coalition](http://www.socom.mil/care-coalition)



**Yellow Ribbon Reintegration Program (YRRP)** is a Department of Defense-wide effort to promote the well-being of National Guard and Reserve members, their families and communities, by connecting them with resources throughout the deployment cycle. Through Yellow Ribbon events, service members and loved ones connect with local resources before, during, and after deployments.

[www.yellowribbon.mil](http://www.yellowribbon.mil)

## FOR LOVED ONES:

### Being an Active Member of the Recovery Team

You are very important to your service member's recovery. But it can take a while to fully understand your active role. These suggestions can help:

- Know who is providing care. Learn names and specialties and write this information down.
- Learn everything you can about your service member's condition. Talk with doctors, nurses, case managers, social workers and other care providers.
- Be sure to read any written medical information your team provides. Knowledge will help alleviate fear of the unknown and help you make better decisions.
- Contact your Casualty Liaison, Recovery Care Coordinators (RCC) and Advocates.
- Learn the hospital's schedule and routines. Be aware of shift changes and times when staff is less available.
- Write your questions down ahead of time. It can be easy to forget things if

you don't write them down.

- Ask for explanations of procedures and medications. If you don't understand something, ask questions until you do understand.
- Remember that the diagnosis and treatment plan may change.
- Be flexible and try to stay positive.
- Learn patient and caregiver rights and responsibilities. Ask for a copy of your medical treatment facility's description of patient and caregiver rights and responsibilities.
- Pay attention to moods and feelings. The healing process involves both physical and emotional aspects. It's important to talk with care providers about any behavior changes you might notice.
- Remember that your observations are unique and valuable. You will spend more time with your service member than any other member of his or her medical team.
- You don't have to go it alone; connect to other caregivers.

### Communicating with the Recovery Team

Sometimes it will feel as though doctors and military people are speaking another language and you're the only one who doesn't understand. You will be expected to learn new words and acronyms when your mind is full of emotion and your life is in upheaval. Sometimes you will have to make important decisions after hearing unpleasant news. It can make anyone feel overwhelmed.

In circumstances like these, it can be hard to communicate well, but you will get better results if you try. Begin now to practice effective communication in order to build relationships of trust with the members of the recovery team. Here are some suggestions from other people who have been in situations similar to yours:

- Be assertive in a friendly way. Don't say, "Yes, I understand," if you don't understand. Ask for clarification, again and again if necessary. There are no dumb questions and you can't afford to be shy. You need to understand as much as possible.
- Remember that the medical team takes care of many patients, but that you take care of one. Speak up to make sure that your service member's needs are met, but try to be patient when members of the medical team are doing their best to help many people.

- Keep in mind that all these people are on your side. You are on the same team, rooting for your service member's recovery. Try to trust and support each other.
- Recognize that when you are stressed, scared, or confused you may need to step back from your emotions to communicate effectively. If you feel rushed to make a decision but can't think clearly, ask for a few minutes to clear your head. Count to ten or step outside and take some time to calm down.
- Be friendly with the people around you. You will find that they can help you in many ways. Remembering to say "please" and "thank you," even when you feel stressed, seems like a small gesture, but in the end, civilities like these can make a big difference in how you, your service member, and the rest of the recovery team feel. From Military OneSource, Keeping It All Together.

## Department of Defense Resources

**Defense Manpower Data Center (DMDC)** serves under the Office of the Secretary of Defense (OUSD) to collate personnel, manpower, training, financial, and other data for the DOD. The DMDC website provides sponsors, spouses, and children 18 years and older with access to personal information, healthcare eligibility, personnel records, and other information from the Defense Enrollment Eligibility Reporting System that contains information for each uniformed service member.

For Benefits Support, call the DMDC/DEERS Support Office (DSO): 800-538-9552. For assistance with technical support, call the DMDC Support Center: 800-477-8227; <https://milconnect.dmdc.osd.mil/milconnect>

Service members and their support networks can access a guide to compensation and benefits titled **DOD's Wounded, Ill and/or Injured Compensation and Benefits Handbook** [https://warriorcare.dodlive.mil/files/2019/06/DoD\\_Compensation\\_and\\_Benefits\\_Handbook.pdf](https://warriorcare.dodlive.mil/files/2019/06/DoD_Compensation_and_Benefits_Handbook.pdf)

Military caregivers can access information about national-level resources and programs in a booklet titled **DOD's Caregiver Resource Directory** <https://warriorcare.dodlive.mil/files/2019/08/Caregiver-Directory-2019-Edition.pdf>

The **National Resource Directory** is a searchable database of resources vetted for service members, veterans, family members and caregivers and provides access to resources to support recovery, rehabilitation and reintegration. <https://nrd.gov>

## VETERANS SERVICE ORGANIZATIONS (VSO)



**American Legion** is a Congressionally chartered mutual-aid veterans organization founded in 1919 by veterans returning from Europe after World War I. Today the group has nearly 2 million members in more than 13,000 posts worldwide. The Legion supports the interests of veterans and service members, including veterans' benefits and the VA hospital system. 317-630-1200, toll-free 1-800-433-3318; [www.legion.org](http://www.legion.org)

**AMVETS (or American Veterans):** In one recent year, AMVETS national service officers processed more than 24,000 claims that resulted in veterans receiving \$400 million in compensation. Toll-free 1-877-726-8387; [www.amvets.org](http://www.amvets.org)

**AMVETS HEAL Program** ensures veterans with medical needs receive the help they have earned to access the best quality healthcare, including mental health and specialized services (traumatic brain injury, polytrauma, post-traumatic stress) and live longer, healthier lives. These services are free. HEAL, which stands for healthcare, evaluation, advocacy, legislation, encompasses all necessary steps the team will take to intervene directly on behalf of veterans, service members, families, and caregivers to reduce veteran suicide, unemployment, homelessness, and hopelessness as it relates to mental and physical wellness. <https://amvets.org/vet-heal>

**Disabled American Veterans (DAV)** was founded in 1920 to represent disabled veterans returning from World War I. DAV provides free assistance to veterans and their families in obtaining benefits and services earned through military service. Toll-free 1-877-426-2838; [www.dav.org](http://www.dav.org)

**Paralyzed Veterans of America (PVA)** was founded by a band of service members who came home from World War II with spinal cord injuries. A core strength of PVA is its network of National Service Officers, highly trained in VA law, benefits, and healthcare. Toll-free 1-800-424-8200; [www.pva.org](http://www.pva.org)

**Veterans of Foreign Wars (VFW)** traces its roots to 1899. VFW maintains a nationwide network to assist veterans with their VA disability claims. A VFW program called Unmet Needs assists military service members and their families who run into unexpected financial difficulties; assistance grants of up to \$1,500 do not need to be repaid. 816-756-3390; [www.vfw.org](http://www.vfw.org)



## MEDICAL EVALUATION PROCESS

Service members who suffer serious injury or develop any sort of debilitating condition that impacts typical mental or bodily function may be preliminarily deemed unfit for service. A unit commander or designee will be responsible for ensuring these service members are given the opportunity to undergo a review of their disqualifying condition and circumstances around its incurrence, overall health and fitness, and character of service. Prior to the implementation of the Integrated Disability Evaluation System (IDES), the Defense Department would provide separation exams to service members, and those same service members had to undergo another exam pursuant to a VA claim of entitlement to disability compensation and other benefits.

DOD and the Department of Veterans Affairs (VA) work together to make disability evaluation seamless and transparent with the IDES. The IDES integrates DOD and VA's disability processes and uses a single set of medical examinations to determine fitness for duty as well as a single set of disability ratings to determine the level of DOD and VA disability benefits. The IDES improves the accuracy and consistency of disability determinations and the timeliness of providing both DOD and VA disability benefits to eligible service members. It is the primary disability evaluation system used by the military departments.

A service member is referred into the IDES when their doctor determines the member, within 12 months of the onset of their condition, is not likely to return to duty. Once the examination results are received, the Physical Evaluation Board Liaison Officer will coordinate with administrative staff at the Military Treatment Facility to convene a Medical Evaluation Board (MEB).

**Medical Evaluation Board (MEB)** - The MEB is the medical portion of the disability evaluation process. The results determine whether the service member meets the service-specific medical retention standards. The MEB does not determine the service member's fitness for duty or level of disability.

**Physical Evaluation Board (PEB)** - The PEB is the personnel portion of the disability evaluation process that determines whether the service member is fit for continued military service. For members determined unfit because of duty-related impairments, it determines their eligibility for disability benefits. The board looks at many factors, including the service member's medical information, letters from their chain of command, as well as their rate or military occupational specialty to determine how their medical condition(s)



impact their ability to perform required military duties.

Read more about the military evaluation process through the DoD's Warrior Care webpage: <https://warriorcare.dodlive.mil/disability-evaluation/integrate-ddes/#MedicalEvaluationBoard>

## DEPARTMENT OF VETERANS AFFAIRS (VA)

If you are serving on active duty in the United States uniformed services, including active National Guard and Reserve with federal pay, you may be eligible for VA benefits both during service and after separation or retirement. If you're a traditional or technical member of the National Guard and Reserve, you may also be eligible for some VA benefits. Find out which benefits you may qualify for—and when to apply. You can also learn about these benefits in your required Transition Assistance Program (TAP) briefing through this link: <https://www.va.gov/service-member-benefits>

### VA Benefits to Consider while on Active Duty

**Pre-discharge disability claim** - If you have an illness or injury that you believe was caused—or made worse—by your service, learn how to file a disability

claim through the Benefits Delivery at Discharge program. This may help speed up your claim so you can get your benefits sooner. You'll need to file 90 to 180 days before separation. Open to active-duty service members, Guard members, and Reservists.

**GI Bill and other education benefits** - Find out if you qualify for VA education benefits to help pay for school or training. If you qualify for the Post-9/11 GI Bill, learn how to transfer your unused benefits to your spouse or dependent children. Open to service members and veterans (active duty, Guard, and Reserve).

**Home Loan Guaranty** - used for a VA-backed home loan to buy, build, improve, or refinance a home. Open to service members and veterans (active duty, Guard, and Reserve).

### Time-sensitive VA benefits to consider when separating or retiring

**Converting your life insurance after separation** - There is a limited window of time (usually 180 days) to determine coverage options for you and your family after separation or retirement.

Find out how to convert your SGLI coverage to a Veterans' Group Life Insurance (VGLI) or commercial policy. Learn about other options for coverage if you have service-connected disabilities. In some cases, you must act within 120 days of separation to ensure no lapse in coverage. Open to service members and veterans (active duty, Guard, and Reserve) who have a Servicemembers' Group Life Insurance policy.

**Educational and career counseling** - Get support transitioning to a civilian career with free educational and career counseling (also called Chapter 36). You'll need to apply between six months before and one year after separation. Open to active-duty service members and veterans only.

**Active-duty service members and VA health care** - Learn about your health care options after separation or retirement and how to apply for VA health care when you receive your separation or retirement orders. If you're a combat veteran, apply right away to take advantage of five years of enhanced eligibility. Open to active-duty service members and veterans only.

**Vocational Rehabilitation and Employment** - If you have a service-connected disability that limits your ability to work or prevents you from working, find out how to apply for vocational rehab. You can apply up to 12 years from when you receive your notice of separation or your first VA disability rating. Open to

service members and veterans (active duty, Guard, and Reserve).

### REMEMBER

*It is important to note that once the window of opportunity closes on these decisions, there's no recourse even if the service member was not advised of the options.*

### Other VA benefits to consider as a veteran

**Disability compensation** - File a claim for disability compensation for conditions related to your military service, and manage your benefits over time. Open to veterans (active duty, Guard, and Reserve).

**Support for veteran-owned small businesses** - If you served on active duty, register to do business with the VA and get support for your veteran-owned small business. If you have a service-connected disability related to active-duty service or training, you may qualify to register as a service-disabled veteran-owned small business. Open to veterans (active duty, Guard, and Reserve).

**Veterans Pension program** - If you served on active duty during wartime, are at least 65 years old or have a service-connected disability, and have limited or no income, find out if you qualify for Veterans Pension benefits. Open to active-duty veterans only.

**Aid and attendance or housebound allowance** - If you need help with your daily activities or you're housebound, check whether you're eligible to have increased aid added to your monthly veteran's pension payments. Open to active-duty veterans only.

**VA Automobile Allowance and Adaptive Equipment** - Run by the Veterans Benefits Administration. These allowances are solely for service connected veterans with qualifying conditions.

<https://www.benefits.va.gov/compensation/claims-special-auto-allowance.asp>

**Disability housing grants** - If you have a service-connected disability, find out how to apply for a housing grant to make changes to your home so you can live more independently. Open to veterans (active duty, Guard, and Reserve).

Read more about these benefits and more through this link:

<https://www.va.gov/service-member-benefits/#va-benefits-you-can-use-during-and-after-service>

## About VA/DOD eBenefits

The eBenefits web portal provides service members, veterans, their families, and authorized caregivers with a single sign-on, central access point to clinical and benefits information. To gain access to most eBenefits resources and services, you need an account. There are two types of accounts that are free and require a *DS logon* to register:

- A Basic account that gives you limited access to various features.

### VA BENEFITS FOR NON-SERVICE CONNECTED SPINAL CORD INJURY/ DISORDERS



*Sherman Gillums*

**Q.** *My spinal cord was injured in a motor vehicle accident after I returned from active duty. Do I still get VA medical benefits?*

**A.** *Yes, you are eligible for VA healthcare based on your service, which basically means you earned an honorable discharge and have a DD214. The VA will assign you to a Priority Group based on whether you have service-connected conditions. Depending on the Priority Group in which you're placed, you may have co-pays for inpatient care, outpatient care, and prescriptions. If you have private insurance, the insurance company may get billed as well. In your case of a non-service-connected catastrophic injury, you will be assigned to Priority Group 4, following what's called a Catastrophic Disability Evaluation conducted by a VA physician. Once deemed catastrophic, a veteran's income will determine whether he or she will be responsible for co-pays. There are other benefits available to veterans who are non-service-connected and have a spinal cord injury. Based on being enrolled in the VA system and having loss of use of lower extremities, a veteran is entitled to two customized wheelchairs, a grant to have a vehicle modified for wheelchair ingress/egress, and a small grant for home modifications. These don't cost the veteran anything as they are administered as an extension of VA healthcare. If the veteran has a need for bowel/bladder services, the VA can pay for this contracted care in the home through a fee basis. In many instances, the spouse is the veteran's caretaker and, once trained by VA, can perform and get paid for these contracted services.*

*Thanks to Sherman Gillums, Jr., Chief Advocacy Officer, AMVETS National*

## NON-ACTIVE DUTY VETERANS PROCESS CHECKLIST AFTER SPINAL CORD INJURY/ DISORDERS

*Non-active duty veterans who incur a spinal cord injury/disorder should try to do the following:*

*Acute Care*

1. **Admission** to nearest trauma center for surgery and stabilization (VA does not provide trauma care)

2. **Locate DD214**

- *If already receiving VA care, request transfer to VA SCI/D unit*
- *If not receiving VA services, apply for category 4 status through VA*
- *Transfer to either civilian or VA SCI rehabilitation center*
- *If at civilian SCI rehabilitation center, upon qualification transfer to VA SCI/D unit*
- *If receiving care at civilian facility, apply for outpatient VA SCI/D care*

3. **Contact a VSO** (PVA or AMVETS) to assess benefits eligibility and conduct an evaluation to determine whether spinal cord injury can be directly or secondarily connected to military service

4. **Establish your “center”** for SCI care

*Pay attention to the following resources and sections in this chapter for key areas of assistance: eBenefits web portal, Crisis and VA Helplines, Suicide and Crisis Prevention, Military Relief Organizations, VA Benefits for Non-Service Injuries.*

- A Premium account that gives you unlimited access.

Read more about eBenefits through this link:

<https://www.ebenefits.va.gov/ebenefits/about>

### VA Health Benefits

**VA Health Care Enrollment and Eligibility** - If you served in the active military, naval or air service and are separated under any condition other than dishonorable, you may qualify for VA health care benefits. Current and former members of the Reserves or National Guard who were called to active duty

(other than for training only) by a federal order and completed the full period for which they were called or ordered to active duty also may be eligible for VA health care. Most veterans who enlisted after September 7, 1980, or entered active duty after October 16, 1981, must have served 24 continuous months or the full period for which they were called to active duty to be eligible. This minimum duty requirement may not apply to veterans who were discharged for a disability incurred or aggravated in the line of duty, were discharged for a hardship or received an “early out.” Since there are a number of other exceptions to the minimum duty requirements, VA encourages all veterans to apply to determine their enrollment eligibility.

**Returning Service Members (OEF/OIF/OND)** - Every VA medical center has a team ready to welcome OEF/OIF/OND service members and help coordinate their health care and other services. For more information about the various programs available for recently returned service members, log on to the Returning Service Members website at [www.oefoif.va.gov](http://www.oefoif.va.gov)

Veterans who served in a theater of operations after November 11, 1998, are eligible for an extended period of eligibility for health care for five years after their discharge. In the case of multiple call-ups, the five-year enrollment period begins on the most recent discharge date. This special eligibility includes cost-free health care services and nursing home care for conditions possibly related to military service and enrollment for five years from their date of discharge or release from active duty, unless they are eligible for enrollment in a higher priority group.

Combat veterans who enroll with VA under this enhanced Combat Veteran authority will continue to be enrolled even after their enhanced eligibility period ends,

although they may be shifted to a lower priority group, depending on their income level, and be required to make applicable copayments. Additionally, for care not related to combat service,



copayments may be required, depending on their financial assessment and other special eligibility factors.

This guide is not intended to provide information on all of the health benefits and services offered by VA. Additional information is available at the following resources: Toll-Free: 1-877-222-VETS (8387)

[www.va.gov/healthbenefits](http://www.va.gov/healthbenefits)

**MyHealtheVet** - this is a web-based customizable management application that offers tips and tools to help you partner with your health care team, so together you may work to manage your health. Here you may find useful

### SOCIAL SECURITY & MEDICARE

*Military service members can receive expedited processing of disability claims from Social Security. These benefits are different than those from the VA and require a separate application. Social Security pays disability benefits through two programs: the Social Security Disability Insurance (SSDI) program, which pays if you worked long enough and paid Social Security taxes; and the Supplemental Security Income (SSI) program, which pays benefits based on financial need. File an application for disability benefits as soon as possible. Full details at [www.ssa.gov/people/veterans](http://www.ssa.gov/people/veterans)*

**Medicare:** *Coverage begins automatically after you have received disability benefits for twenty-four months. For service members who are entitled to Medicare Part A (hospital insurance) and Part B (medical insurance), TRICARE provides Medicare “wrap-around” coverage. Medicare is the primary payer for these beneficiaries, and TRICARE serves as a supplement, paying the Medicare deductible and patient cost share. For more about TRICARE, visit <https://tricare.mil>. For information about Medicare, see [www.medicare.gov](http://www.medicare.gov)*

*Please see Chapter 6, Navigating the System for more information on Social Security and Medicare.*

resources when you need them. The support tools on this page are designed to enrich your experience with My HealtheVet and help you make informed decisions. Read more about MyHealtheVet and how to register for an account through this link:

<https://www.myhealth.va.gov/mhv-portal-web/web/myhealthvet/about-mhv>





## Post-Traumatic Stress Disorder (PTSD)

The **National Center for PTSD** does not provide direct clinical care or individual referrals. The center provides information to help you find local mental health services and information on trauma and PTSD. No matter where you live, PTSD treatment in the Department of Veterans Affairs is available. Each medical center within VA has PTSD specialists who provide treatment for veterans with PTSD and there are nearly 200 specialized PTSD treatment programs throughout the country. [www.ptsd.va.gov/gethelp/tx\\_programs.asp](http://www.ptsd.va.gov/gethelp/tx_programs.asp)

Some large Community Based Outpatient Clinics (CBOCs) also offer PTSD care. When there are no nearby facilities, smaller CBOCs provide needed treatment services by telemental health (counseling or mental health services delivered via technology) or by referral to veteran centers or community clinicians. You can find specialized PTSD programs and other options within the VA for getting PTSD treatment using this VA PTSD Program Locator to see if there is a specialized program near you:

[www.va.gov/directory/guide/PTSD.asp](http://www.va.gov/directory/guide/PTSD.asp)

## Polytrauma System of Care

VA's Polytrauma System of Care (PSC) is an integrated network of specialized rehabilitation programs dedicated to serving veterans and service members with both combat and civilian related traumatic brain injury (TBI) and polytrauma. Services available through PCS include: interdisciplinary evaluation and treatment, development of a comprehensive plan of care, case management, patient and family education and training, psychosocial support, and application of advanced rehabilitation treatments and prosthetic

technologies. Learn more about the Polytrauma System of Care through this link: <https://www.polytrauma.va.gov/system-of-care/index.asp>

## Spinal Cord Injuries and Disorders System of Care

VA's Spinal Cord Injuries and Disorders (SCI/D) System of Care provides a coordinated life-long continuum of services for veterans with a spinal cord injury or disorder. VA serves veterans in a convenient and connected network that delivers care for each phase of life. VA's Spinal Cord Injuries and Disorders System of Care is designed around a system of "hub and spokes." The 25 SCI/D centers are the hubs. Each center has highly trained and experienced providers including doctors, nurses, social workers, therapists, psychologists, and others who can deal with the unique problems that can affect people with a spinal cord injury or disorder.

SCI/D centers work closely with other designated medical facilities that do not have SCI/D Centers (called spokes) to provide excellent care as close to home as possible. SCI/D spokes teams are located around the country. At SCI/D spokes, health care providers work closely with the centers to ensure that comprehensive primary and specialized care needs are addressed. It is important to get primary care from providers that have SCI/D training so that they can check for the development of problems unique to SCI/D. There are 25 Spinal Cord Injuries and Disorders Centers (SCI/D Centers) located around the country. See the list of them on the next page.

## Rehabilitation and Prosthetic Services (includes assistive technology, sports, and other support services)

**Prosthetic & Sensory Aids Service (PSAS)** provides comprehensive support to optimize health and independence of the veterans with severely disabling conditions through prosthetic and orthotic services, sensory aids, medical equipment, and support services.

Veterans who are rated for a service-connected disability for which he or she uses prosthetic or orthopedic appliances may receive an annual clothing allowance. The allowance is also available to veterans whose service-connected skin condition requires prescribed skin medication that irreparably damages the veteran's outer garments. Learn more through this link:

[https://www.prosthetics.va.gov/psas/Clothing\\_Allowance.asp](https://www.prosthetics.va.gov/psas/Clothing_Allowance.asp)

The **Automobile Adaptive Equipment (AAE)** program permits physically challenged persons to enter, exit, and/or operate a motor vehicle or other

## VA SCI/D CENTERS

- *Long Beach SCI/D Center, Long Beach, CA 90822, 562-826-5701*
- *Palo Alto SCI/D Center, Palo Alto, CA 94304; 650-493-5000*
- *San Diego SCI/D Center, San Diego, CA 92161, 858-642-3117*
- *Denver SCI/D Center, Aurora, CO 80045, 720-723-3300*
- *Miami SCI/D Center, Miami, FL 33125, 305-575-3174*
- *Tampa SCI/D Center, Tampa, FL 33612, 813-972-2000, ext 7517*
- *Augusta SCI/D Center, Augusta, GA 30904, 706-733-0188*
- *Hines VA SCI/D Center, Hines, IL 60141, 708-202-2241*
- *Boston SCI/D Center, West Roxbury, MA 02132, 857-203-5128*
- *Minneapolis SCI/D Center, Minneapolis, MN 55417, 612-629-7005*
- *St. Louis SCI/D Center, St Louis, MO 63125, 314-894-6677*
- *East Orange SCI/D Center, East Orange, NJ 07018, 973-676-1000*
- *Albuquerque SCI/D Center, Albuquerque, NM 87108, 505-256-2849*
- *Bronx SCI/D Center, Bronx, NY 10468, 718-584-9000*
- *Syracuse SCI/D Center, Syracuse, NY, 315-425-2682*
- *Cleveland SCI/D Center, Cleveland, Ohio 44106, 216-791-3800*
- *Memphis SCI/D Center, Memphis, TN 38104, 901-577-7373*
- *Dallas SCI/D Center, Dallas, TX 75216, 214-857-1757*
- *Houston SCI/D Center, Houston, TX 77030, 713-794-7057*
- *San Antonio SCI/D Center, San Antonio, TX 78229, 210-617-6414*
- *Hampton SCI/D Center, Hampton, VA 23667, 757-722-9961*
- *Richmond SCI/D Center, Richmond, VA 23249, 804-675-5000, ext. 5128*
- *Seattle SCI/D Center, Seattle, WA 98108, 206-764-2332*
- *Milwaukee SCI/D Center, Milwaukee, WI 53295, 414-384-2000, ext. 41230*
- *San Juan SCI/D Center, San Juan, PR 00921, 787-641-7582*

Source: [www.sci.va.gov/VAs\\_SCID\\_System\\_of\\_Care.asp](http://www.sci.va.gov/VAs_SCID_System_of_Care.asp)

conveyance. Veterans are trained, through the VA Driver's Rehabilitation Program, how to safely operate their vehicle on our nation's roadways. The VA also provides necessary equipment such as platform wheelchair lifts, UVLs (under vehicle lifts), power door openers, lowered floors/raised roofs, raised doors, hand controls, left foot gas pedals, reduced effort and zero effort steering and braking, and digital driving systems. Additionally, VA's program provides reimbursements for standard equipment including, but not limited to, power steering, power brakes, power windows, power seats, and other special equipment necessary for the safe operation of an approved vehicle.

<https://www.prosthetics.va.gov/psas/AAE.asp>

**Home Improvements and Structural Alterations (HISA)** grants provide medically necessary improvements and structural alterations to veterans and service members' primary residence. Some excluded HISA structural alterations are exterior decking; purchase or installation of spa/hot tubs/Jacuzzi type tubs; home security systems; removable equipment or appliances such as portable ramps; porch lifts, and stair glides; and routine repairs. Learn more through this link: <https://www.prosthetics.va.gov/psas/HISA2.asp>

**Service dogs** are guide or service dogs prescribed for a disabled veteran diagnosed as having a visual, hearing, or substantial mobility impairment. Eligible veterans may receive assistance from VA with maintaining the health and viability of a qualifying service animal.

<https://www.prosthetics.va.gov/ServiceAndGuideDogs.asp>

**VA's Office of National Veterans Sports Programs and Special Events** provides veterans with opportunities for health and healing





through adaptive sports and therapeutic art programs. These specialized rehabilitation events aim to optimize veterans' independence, community engagement, well-being, and quality of life. The programs are built on clinical expertise within VA, with essential support from Veteran Service Organizations, corporate sponsors, individual donors and community partners. [sports4vets@va.gov](mailto:sports4vets@va.gov)

## Community Care Overview

VA provides healthcare for veterans from providers in your local community outside of VA. Veterans may be eligible to receive care from a community provider when VA cannot provide the care needed. This care is provided on behalf of and paid for by VA. Community care is available to veterans based on certain conditions and eligibility requirements, and in consideration of a veteran's specific needs and circumstances. Community care must be first authorized by VA before a veteran can receive care from a community provider. As with care provided directly by VA, veterans are charged a copayment for non-service-connected care. Learn how to pay your bill and alternative payment options. In addition, VA may bill veterans' health insurance for medical care, supplies, and prescriptions related to treatment of

non-service-connected conditions. Learn more through this link:

<https://www.va.gov/COMMUNITYCARE/programs/veterans/index.asp>

## Information for Dependents

**Benefits for Dependents** - VA offers health care and services for a veteran's family members and dependents (beneficiaries) based on certain conditions and eligibility requirements. VA serves more than 360,000 beneficiaries through its family member and dependent health care benefit programs. In general, these programs reimburse the costs of specific types of covered services provided. Information about specific programs is provided below.

**Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA)** is a comprehensive health care program in which the VA shares the cost of covered health care services and supplies with eligible beneficiaries. The program is administered by the Veterans Health Administration Office of Community Care (VHA OCC) in Denver, Colorado.

Due to the similarity between CHAMPVA and the Department of Defense (DOD) **TRICARE program** (sometimes referred to by its old name, CHAMPUS), the two are often mistaken for each other. CHAMPVA is a Department of Veterans Affairs program while TRICARE is a regionally managed health care program for active duty and retired members of the uniformed services, their families, and survivors. In some cases, a veteran may appear to be eligible for both or either program on paper; however, if you are a military retiree, or the spouse of a veteran who was killed in action, you are and will always be a TRICARE beneficiary and cannot choose between the two programs.

[www.va.gov/COMMUNITYCARE/programs/dependents/champva/index.asp](http://www.va.gov/COMMUNITYCARE/programs/dependents/champva/index.asp)

**Camp Lejeune Family Member Program (CLFMP)** is for family members of veterans that lived or served at U.S. Marine Corps Base Camp Lejeune, North Carolina, between August 1, 1953, and December 31, 1987, and were potentially exposed to drinking water contaminated with industrial solvents, benzene, and other chemicals. On August 6, 2012, the Honoring America's Veterans and Caring for Camp Lejeune Families Act of 2012 was signed into law. This law (H.R. 1627, now Public Law 112-154) requires the Department of Veterans Affairs (VA) to provide health care to veterans who served on active duty at Camp Lejeune and to reimburse eligible Camp Lejeune family members for health care costs related to one or more of 15 specified illnesses or medical conditions listed in the law.

<https://www.va.gov/COMMUNITYCARE/programs/dependents/CLFMP.asp>

## CAREGIVER RESOURCES

**VA Caregiver Support** The VA provides benefits and services specifically to support family caregivers, both in and out of the home. Contact the VA's Caregiver Support Line, toll-free 1-855-260-3274, or connect with a Caregiver Support Coordinator at a VA Medical Center. A Caregiver Support Coordinator is a licensed professional who can match you with services and offer resources that can help you stay smart, strong, and organized. Services may include adult day care centers, home-based primary care, skilled home care, home telehealth resources, respite care, and home hospice care. Family caregivers of veterans injured post-9/11 may be eligible for additional VA services, including a stipend, travel expenses, respite care, comprehensive training, and medical coverage through the VA if you are not already covered by a plan. Call the support line listed above or visit [www.caregiver.va.gov](http://www.caregiver.va.gov)

**Elizabeth Dole Foundation: Caring for Military Families** has created a Military and Veteran Caregiver journey map, that addresses all aspects of the caregiver's role and participation from time of injury forward.

<https://caregiverjourney.elizabethdolefoundation.org>,  
[www.elizabethdolefoundation.org](http://www.elizabethdolefoundation.org)

**Resources and Education for Stroke Caregivers' Understanding and Empowerment (RESCUE)** is an online VA resource providing stroke caregivers—applicable also to caregivers of loved ones with other sudden

disabilities—with information and resources to help better care for a loved one. The website also offers information to help caregivers take care of themselves. The site features over forty easy-to-read fact sheets about stroke and stroke caregiving (also available in Spanish). [www.cidrr8.research.va.gov/rescue](http://www.cidrr8.research.va.gov/rescue)



**Special Compensation for Assistance with Activities of Daily Living**

**(SCAADL)** was authorized by the Fiscal Year 2010 National Defense Authorization Act. This special monthly compensation is for service members who incur a permanent catastrophic injury or illness. SCAADL helps offset the loss of income by a primary caregiver who provides non-medical care, support and assistance for the service member thus keeping the service member out of institutional care.

<https://warriorcare.dodlive.mil/benefits/scaadl>

**Tragedy Assistance Program for Survivors (TAPS)** offers compassionate care to all those grieving the death of a loved one serving in the Armed Forces. Since 1994, TAPS has provided comfort and hope 24 hours a day, seven days a week through a national peer support network and connection to grief resources, all at no cost to surviving families and loved ones. [www.taps.org](http://www.taps.org)

*For more on the topic of caregiving, see Chapter 10.*

**BRAIN INJURY RESOURCES**

The VA offers rehabilitation for service members with brain injuries so they receive coordinated, comprehensive care. Specialized services are available at four traumatic brain injury (TBI) centers (Palo Alto, CA; Tampa, FL; Minneapolis, MN; and Richmond, VA). The goal is to return the brain injury survivor to the highest quality of life and level of functioning and to educate family members and caregivers on the patient's long-term needs. Contact your local VA medical center for more information about TBI services available.

**Bob Woodruff Foundation** works to support injured service members with a special emphasis on the hidden injuries of war—traumatic brain injury and combat stress. <https://bobwoodrufffoundation.org>

**Brain Injury Association of America (BIAA)** works toward brain injury prevention, research, treatment and education and to improve quality of life for all people affected by brain injury. 703-761-0750; [www.biausa.org](http://www.biausa.org). BIAA's

**National Brain Injury Information Center:** Toll-free 1-800-444-6443.

**Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE)** evaluates and disseminates evidence-based practices and standards for the treatment of psychological health and TBI within the Defense Department. DCoE is part of the Military Health System's continuum of care—from initial accession to deployment to discharge. *DCoE's centers include:*



- **Deployment Health Clinical Center (DHCC):** improves deployment-related health by providing assistance and medical advocacy to military personnel and families, including assessment of post-deployment physical symptoms, specialized care programs, education and clinical and health services research. 301-295-7692; [www.pdhealth.mil](http://www.pdhealth.mil)
- **Defense and Veterans Brain Injury Center** ensures expert care, coordination, and individualized, evidence-based treatment to maximize function and minimize disability. DVBIC provides services to enable return to duty, work, or community. Any service member or veteran with TBI covered by TRICARE or VA benefits may be referred to DVBIC; toll-free 1-800-870-9244; [www.dvbic.org](http://www.dvbic.org)
- **Connected Health:** designs, builds, tests and evaluates technologies in support of psychological health and traumatic brain injury recovery. 253-968-1914; <https://health.mil/About-MHS/OASDHA/Defense-Health-Agency/Operations/Clinical-Support-Division/Connected-Health>

## NO WRONG DOOR PROGRAMS (NWD)

The current long-term services and supports (LTSS) access system involves multiple funding streams with often duplicative eligibility and enrollment processes, leaving many individuals feeling bewildered and overwhelmed. The NWD System vision is developed and supported through a partnership between the Administration for Community Living, the Centers for Medicare and Medicaid Services and the Veterans Health Administration.

The NWD System makes it easier for people of all ages, disabilities and income levels to learn about and access the services and supports they need. This includes veterans and their caregivers. The foundation of a No Wrong Door System is built on key initiatives designed to help states effectively transform their access systems for veterans, families, and caregivers. To learn more, log onto <https://nwd.acl.gov/serving-veterans.html#Services>

**NWD's Veteran Directed Care Program** provides veterans greater choice and control over the long-term services and supports that help veterans live at home. <https://nwd.acl.gov/vdc.html>

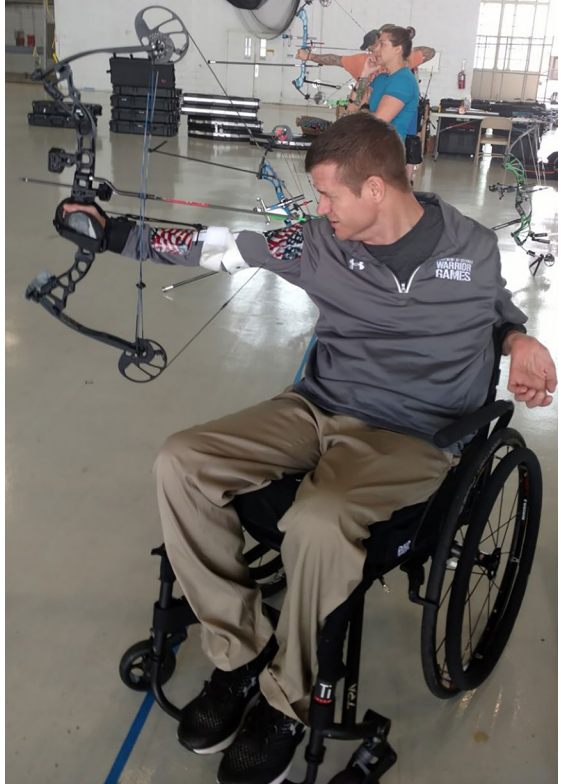
**NWD's Connecting Older Veterans (Especially Rural) to Community or Veteran Eligible Resources (COVER to COVER) Program** helps veterans in

rural areas gain information and access to benefits within their communities. <https://nwd.acl.gov/cover-to-cover.html>

**NWD's Ask the Question Initiative** improves access to and quality of services for veterans and their families. <https://nwd.acl.gov/ask-the-question.html>

## ADAPTIVE SPORTS

For many veterans with spinal cord injuries, the transition from physical, occupational, and recreational therapy culminates in adaptive sports. While the competitive aspects of wheelchair sports, such as quad rugby, basketball, motorized soccer, air guns, and others are part of the experience, these recreational activities mimic the mental and physical challenges of everyday living and movement that ultimately promote problem solving and independence. It is for this reason that adaptive sports are encouraged as an extension of rehabilitation and as part of a lifestyle of wellness and activity in individuals who have limited opportunities to exercise.



Investment in adaptive sports and recreation opportunities will vary depending on several factors, including location, concentration of persons with disabilities, funding, staffing, and awareness of the need.

**Challenged Athletes Foundation** offers “Operation Rebound” which is designed specifically for veterans by offering grants for adaptive sports equipment. [www.challengedathletes.org](http://www.challengedathletes.org)

**Independence Fund** empowers severely wounded veterans and their caregivers to take control of their lives. (Through adaptive sports, all terrain mobility devices as well as networking opportunities for caregivers.) [www.independencefund.org](http://www.independencefund.org)

**National Veterans Golden Age Games** is the premier senior adaptive rehabilitation program in the United States.

<https://www.blogs.va.gov/nvspse/national-veterans-golden-age-games>

**National Veterans Summer Sports Clinic** promotes the value of rehabilitation through sports therapy.

<https://www.blogs.va.gov/nvspse/national-veterans-summer-sports-clinic>

**National Veterans Wheelchair Games** is the world's largest annual wheelchair sports event solely for military veterans. <https://www.wheelchairgames.org>

**National Veterans Winter Sports Clinic** involves disabled veterans with profound injuries and medical concerns the opportunity to engage in therapeutic outdoor experiences and education.

<https://www.wintersportsclinic.org>

**Oscar Mike Foundation** strives to be a leading provider of funding for injured veterans to participate in life-changing adaptive sports. The organization utilizes 100% of donations to its foundation and proceeds from its Oscar Mike apparel sales to provide support to injured veterans looking for an opportunity to stay active. By focusing on the arena of adaptive sports, the Oscar Mike Foundation assists in offering an outlet for an ongoing competitive lifestyle to thousands of American veterans who have sacrificed for the defense of our country. <https://www.oscarmike.org/pages/foundation>

**Wounded Warrior Independence Program** is designed to help warriors living with moderate to severe brain injuries, traumatic brain injury, spinal cord injury, or neurological conditions, take positive steps towards independent living through various services including recreation.

<https://www.woundedwarriorproject.org/programs/independence-program>



ZACK WEINSTEIN BY CHRISTOPHER VOELKER