



PATIENT AND
CAREGIVER
RESOURCE GUIDE



Serving Those Who Served Us

*A Resource Guide for Hospice
& Palliative Care Veterans,
Families, and Caregivers*

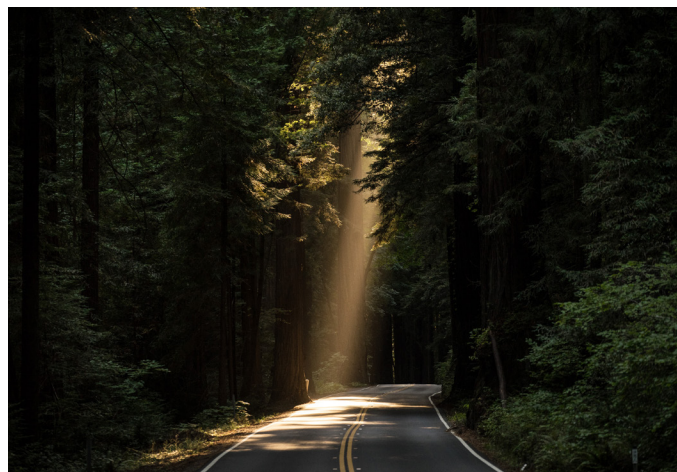


Table of Contents

Acknowledgements	3
------------------	---

About NPHI	4
------------	---

Introduction	5
--------------	---

Benefits for Veterans and Their Families with Limited Income	7
--	---

Benefits and Services for Veterans and Their Families for all Income Levels	10
---	----

Veterans Burial Benefits	20
--------------------------	----

Arrears of Pay and Survivor Benefit Plan (SBP) Annuity for Spouses/Families of Retired Military Members	24
---	----

Filing Claims	26
---------------	----

Advance Care Planning	28
-----------------------	----

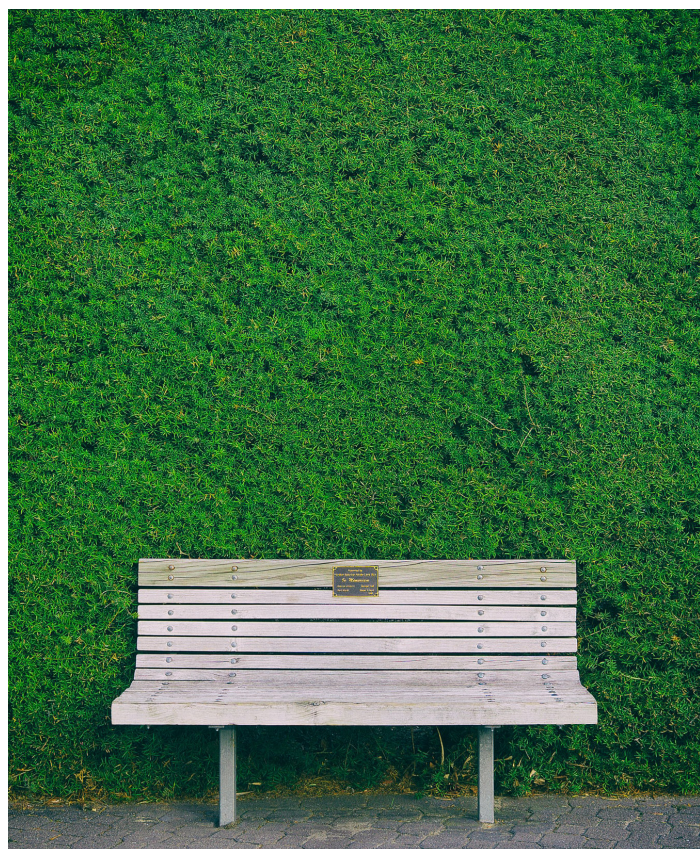
Appendix A: Diseases and/or Conditions Presumptively Qualifying for Disability Benefits	29
---	----

Appendix B: Military History Checklist	33
--	----

Appendix C: Additional/Local Resources for Veterans and Caregivers	37
--	----

Appendix D: Robotic Pets	39
--------------------------	----

Important Notes	40
-----------------	----



Copyright© 2023 by the National Partnership for Healthcare and Hospice Innovation. All rights reserved.

No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, recording, scanning or otherwise except as permitted under Sections 107 and 108 of the 1976 United States Copyright Act, without written permission of the publisher or rights holders.

Acknowledgements

The National Partnership for Healthcare and Hospice Innovation's (NPHI) Innovation Lab would like to thank the following individuals and member programs for their leadership in developing the Veterans Resources Guide:

NPHI Innovation Lab Project Steering Committee

- Cameron Muir, MD, FAAHPM – Chief Innovation Officer
- Ethan McChesney, BA – Policy Director
- Stephanie Rogers, BA – Administrative Services Manager
- Sarah Sharp, BS – Manager, Center for Education & Vendor Relations
- Matt Wilkinson, MA - Communications Manager

Guide Design

- Partner Plus Media for design services

Contributing NPHI Members and Program Leads

- Jeffrey Alexander, Avow Hospice
- Julie Alley, MSW, LISW, Hospice of Cincinnati
- Delea Bowerfind, BSW, MSSA, ConnectionsPlus Healthcare + Hospice
- Nate Gradisher, Hospice of the Western Reserve
- Staci Metzger, LMSW, LGSW, APHSW-C, Hospice of the Red River Valley
- Teresa Pendergraft, AuthoraCare Collective
- Ashton Stewart, MPA, MJHS Hospice & Palliative Care
- Noga Welner-Kessler, MSW, Hospice East Bay

How to use/scan the QR codes in this guide:

- Open the built-in camera app on your phone or tablet
- Point or focus the camera at the QR code
- Gently tap the banner that appears on your phone or tablet
- Follow the instructions on the screen to get to the appropriate website page



About NPHI

The National Partnership for Healthcare and Hospice Innovation (NPHI) is a membership organization comprised of 100+ not-for-profit, community-integrated hospice and palliative care providers dedicated to ensuring patients and their families have access to care that reflects their individual goals, values, and preferences. Representing providers from 37 states and the District of Columbia, NPHI and its members help design innovative and effective models of care, advocate for comprehensive and community-integrated care customized to meet each person's unique needs, and build collaboration between national thought leaders, decision-makers, and other healthcare stakeholders to improve hospice care.

Together with our members, we ensure our most important priorities, policies, and initiatives are learned at the bedside, not in the boardroom. To find a trusted NPHI provider, call 1-844-GET NPHI (1-844-438-6744).

We work tirelessly to ensure that patients and their families have access to high-quality care as they navigate the advanced illness experience. To achieve this, we focus on creating and fostering an inclusive environment where everyone feels a sense of belonging. We pride ourselves in being committed to honoring every person's culture, values, and wishes by respecting who they are and what matters most to them - ensuring our partners, members, and communities feel valued and appreciated as we interact with them.



Introduction

NPHI's Innovation Lab compiled and reviewed this reference guide to provide member organizations a tool to assist Veterans and their families identify, understand, and acquire appropriate Veteran benefits and services through the Veterans Administration and other resources.

While the U.S. Department of Veterans Affairs (VA) provides a wide range of commonly-known benefits and services for its Veterans (health care, education support through the GI Bill, and home loans), they also provide a bevy of lesser-known benefits that are specifically created to help Veterans, their family members, and their survivors. The Veteran must provide proof of discharge from the military under conditions other than dishonorable*. Many of the programs are also dependent upon the Veteran meeting certain financial eligibility requirements.

The guide also provides resource information for the Veteran and their survivor regarding military pay, retirement pay, and survivor benefits through the Defense Finance and Accounting Services.

- If, after reviewing this guide to determine if you may qualify for any of the listed benefits, you are still unsure, confused by the information, or think the task of applying may be too difficult, contact your hospice or palliative care team as they can either assist you, or direct you to someone who can help you navigate the process.
- **Appendix B of this document contains a military history checklist** you can use to talk to your loved one and document their military service for your family history. This information will also be useful should you choose to apply for VA benefits.
- **Disclaimer:** Certain information contained herein has been obtained from other parties including, but not limited to, the U.S. Dept. of Veteran Affairs, the Defense Finance and Accounting Service, and other local Veteran Affairs offices.. While such sources are believed to be reliable, neither NPHI nor its member organizations have or assume any responsibility for the accuracy or completeness of such information, nor do NPHI nor its member organizations have or assume any responsibility to update this guide in the event that such sources in the future release additional data.

*Discharge classification & eligibility/upgrade:

Generally, in order to receive VA benefits and services, the Veteran's character of discharge or service must be under other than dishonorable conditions (e.g., honorable, under honorable conditions, general). However, depending on a determination made by the VA, individuals who received undesirable, bad conduct, or other types of dishonorable discharges may still qualify for VA benefits.





Who is considered a Veteran?

Active Duty: Federal Law states that a Veteran is any person who served honorably on active duty in the armed forces of the United States. (Discharges marked GENERAL AND UNDER HONORABLE CONDITIONS also qualify.) Title 38 of the U.S. Code states that there is no minimum time of service required to be considered a “Veteran”, as long as they served on active duty.

National Guard and Reserve: Generally, all Reserve and National Guard members discharged or released under conditions that are not dishonorable are eligible for some VA benefits. The length of service, service commitment, and/or duty status may determine eligibility for specific benefits. Several VA benefits may include a certain length of active service eligibility requirement. Legislation signed in 2016 now states that any Guard and Reserve member who has successfully completed a 20-year commitment – even without any Active Duty time – is considered a Veteran.

Important Note: In order to pursue any of the benefits or assistance detailed in this guide, you must possess official discharge document DD214 or equivalent official discharge document.

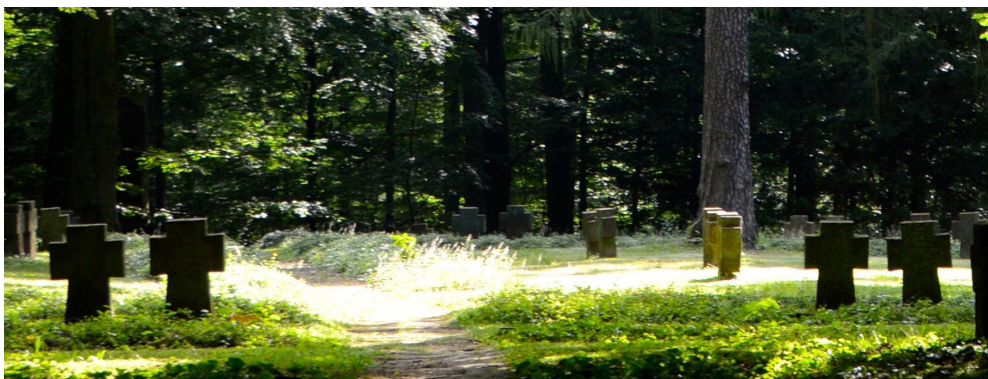
Character of
Discharge
Information



Request
Military
Service
Records/
DD214



How to
Expedite
DD214
Replacement



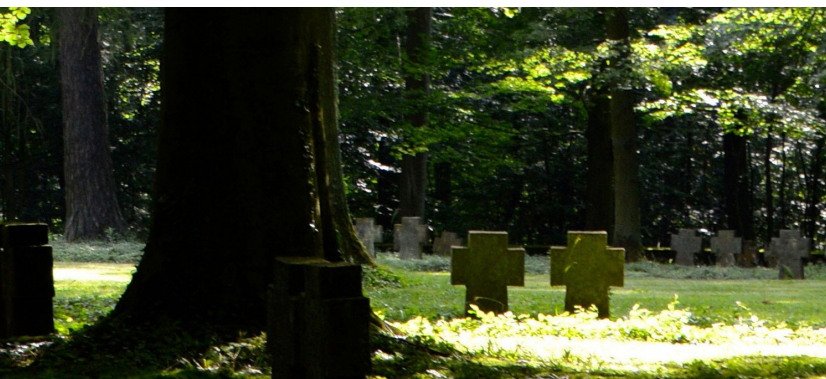
Benefits for Veterans and Their Families with Limited Income

Veterans Pension

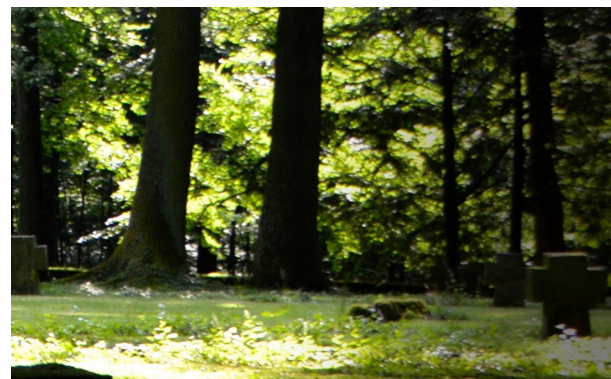
This benefit is available to limited-income Veterans who:

- Received a discharge from service under conditions other than dishonorable
- Have a yearly family income and net worth* below a yearly limit set by Congress (this changes annually)
- AND who (at least one must apply):
 - Started on active duty before September 8, 1980, and served on active duty at least 90 days with at least 1 day served during wartime (stateside or overseas), OR
 - Started on active duty after September 7, 1980, and served at least 24 months with at least 1 day served during wartime (stateside or overseas), OR
 - Served as an officer on active duty after October 16, 1981, and previously didn't serve on active duty for at least 24 months
- AND who (at least one must apply):
 - Are at least 65 years old, OR
 - Has a permanent or total disability, OR
 - Is a patient in a nursing home for long-term care because of a disability, OR
 - Is getting Social Security Disability Insurance or Supplemental Security Income

***Net worth is the total of the Veteran's and their spouse's assets, including income, but excluding items such as a primary residence and personal vehicles.**



Veterans
Pension
Rates

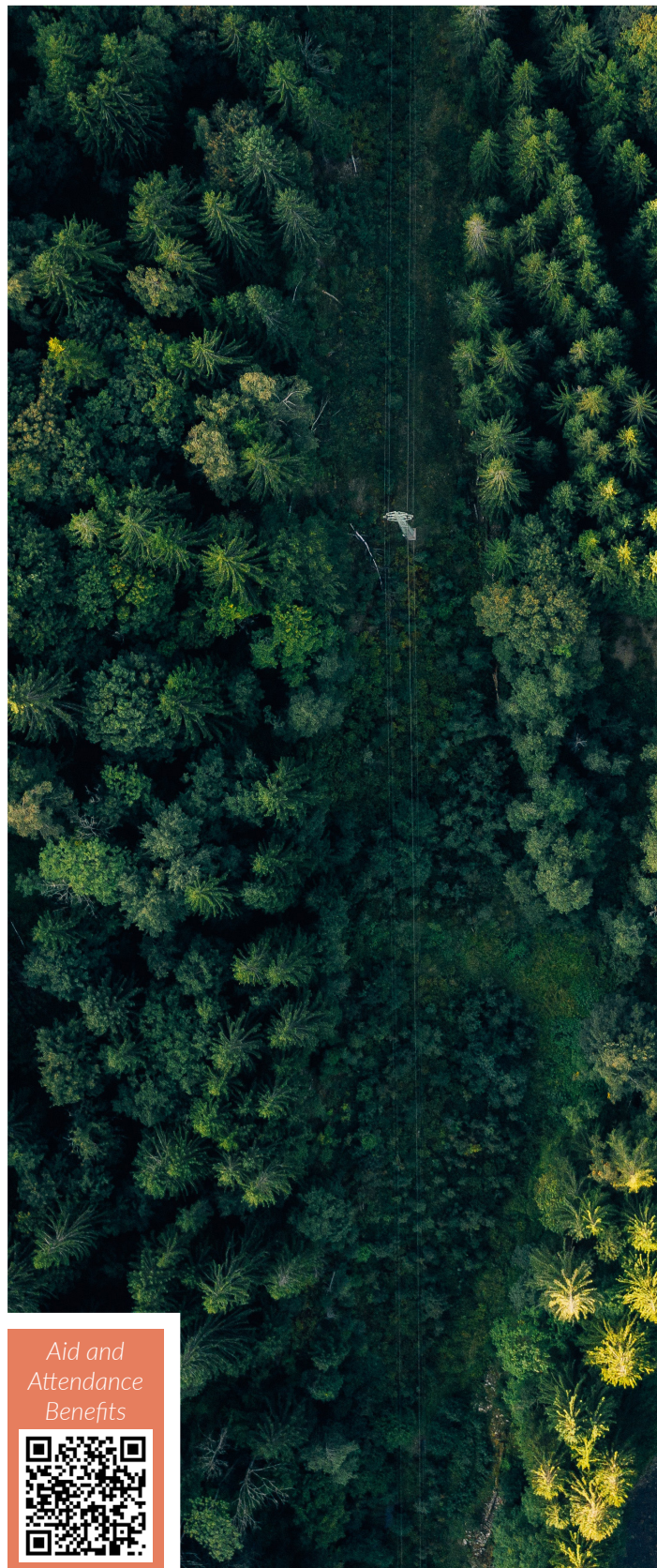


Aid and Attendance Allowance

This little-known benefit can help Veterans and their spouses pay towards in-home care, an assisted living facility, or nursing home care. The allowance is in addition to the Veterans Pension. To qualify, the Veteran* must:

- Be at least 65 years old or permanently disabled
- Have served during wartime
- Meet certain medical and financial requirements set annually by Congress (same as for Veterans Pension)
- AND (at least one must apply)
 - Need help to perform basic everyday living tasks such as eating, bathing, or dressing, OR
 - Be bed-bound, OR
 - Be a patient in a nursing home or assisted living facility, OR
 - Be blind

*Spouses also qualify for this benefit if they are currently married to the Veteran or were married to the Veteran at the time of the Veteran's death.



Aid and
Attendance
Benefits



Survivors Pension

Survivors Pension is a tax-free, needs-based benefit paid to an un-remarried surviving spouse and/or qualifying dependent child(ren) of a deceased wartime Veteran. Ex-spouses are not authorized for this benefit. To qualify, the deceased Veteran must:

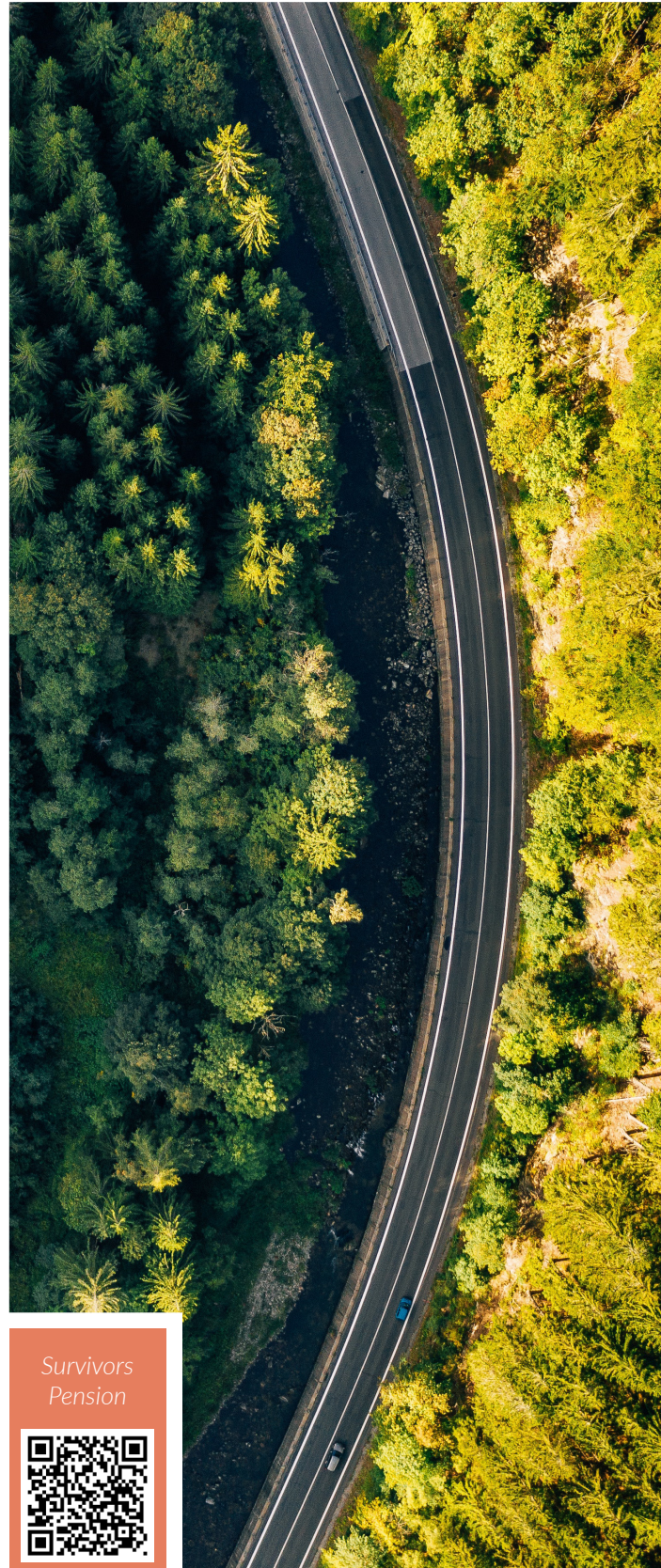
- Meet certain financial requirements set annually by Congress (same applies to Veterans Pension)
- AND (at least one must apply)
 - Have entered active duty on or before September 7, 1980, served on active duty at least 90 days with at least 1 day served during wartime (stateside or overseas), OR
 - Have entered active duty after September 7, 1980, and served at least 24 months with at least 1 day served during wartime (stateside or overseas), OR
 - Have served as an officer on active duty after October 16, 1981, and previously didn't serve on active duty for at least 24 months

Dependent children may be eligible for Survivors Pension if they are younger than 18 (or between the ages 18 and 23 if attending school) or permanently incapable of self-support due to a disability incurred before the age of 18 and are not married.

If in crisis, dial 988, then press 1

(or text 838255, or chat online at www.veteranscrisisline.net)

Survivors
Pension



Benefits and Services for Veterans and Their Families for all Income Levels

Service-Connected Disability Compensation

Veterans may qualify for benefits and/or compensation due to a service-connected disability. A service-connected disability results from a condition or an injury that occurred or became aggravated during active military service. Four types of service connections can result in entitlement:

- **Direct:** The disability is directly related to the Veteran's military service.
- **Secondary:** A condition that is caused by a direct service-connected disability.
- **Aggravated:** A prior unrelated condition or injury in which the military service is believed to have caused it to progress beyond normal expected progression. (Medical records from before and after the military service can help establish this.)
- **Presumptive:** A condition "presumed" to be related to serving under certain unique circumstances.

Veterans are given a service-connected rating, identified in percentages. The higher the percentage, the more benefits the Veteran qualifies for, the higher the priority group he or she is placed in for care at the VA, and the more spousal benefits the spouse may be eligible for.

For direct, secondary, and aggravated conditions, the Veteran needs to prove that his or her service caused the condition. For conditions that are presumptive, the VA does not require the Veteran to prove his or her service caused the condition. The Veteran only needs to meet the service requirements for the presumption.

The VA has established a list of presumptive diseases and conditions listed in **Appendix A** (this list is periodically updated as new conditions are recognized; it is always advisable to clarify a Veteran's individual eligibility with a benefits officer).

Eligibility for
VA Disability
Benefits



PACT Act

The Promise to Address Comprehensive Toxics (PACT) Act expands and extends eligibility for VA healthcare and benefits for Veterans with toxic exposures and Veterans of Vietnam, Gulf, and Post 9/11 eras. This Act adds new presumptive conditions for exposure to burn pits, Agent Orange, and other toxins, and adds additional presumptive-exposure locations for those exposed to Agent Orange and radiation. It also requires the VA to provide toxic exposure screening to every Veteran enrolled in the VA.

*PACT Act
Benefits*



Environmental Health Registries

The VA has Environmental Health toxic exposure registries that provide focused health screenings for Veterans exposed to certain environmental hazards during their military service. These are no-cost voluntary medical exams, which can alert a Veteran to possible health problems associated with his or her service. The registries include:

*Toxic Exposure
Screening
Information*



- Agent Orange
- Airborne Hazard and Open Burn Pit
- Gulf War (Includes Operations Iraqi Freedom and New Dawn)
- Ionizing Radiation
- Depleted Uranium Follow-Up Program
- Embedded Fragment Surveillance Center

The registries help the VA respond more effectively to these health problems. A Veteran can participate even if he or she does not recall exposure during service.

Note: Participation in a registry does not mean applying for VA disability compensation or health care. The two are independent activities and involvement in one is not required for involvement in the other.

Caring for Camp Lejeune Families Act of 2012

Veterans stationed at Camp Lejeune for at least 30 days between Aug. 1, 1953 and Dec. 31, 1987 (regardless of a health condition presumed to be related to exposure) may receive all their health services (except dental care) from the VA. Veterans will have a co-pay, depending on income and health eligibility priority group, except for any Veteran having one of the 15 identified medical conditions below, in which case there will be no charge. Healthcare funding assistance for these conditions is also available for family members who lived in Camp Lejeune base housing during the qualifying period.

- Bladder cancer
- Breast cancer
- Esophageal cancer
- Female infertility
- Hepatic steatosis
- Kidney cancer
- Leukemia
- Lung cancer
- Miscarriage
- Multiple myeloma
- Myelodysplastic syndromes
- Neurobehavioral effects
- Non-Hodgkin's lymphoma
- Renal toxicity
- Scleroderma

*Camp Lejeune:
Information*



*Camp Lejeune:
Veteran &
Family
Benefits*



*Camp Lejeune:
Know Your
Options*



While these conditions may also create eligibility for disability compensation, some are recognized as presumptive and will not require the Veteran to establish proof of service connection. Presumptive diseases recognized by the VA for active duty, reserve, and National Guard members exposed to contaminants in the water supply at this location during the qualifying period are listed in **Appendix A**.

How to apply for disability benefits?



- Contact your county Veterans services office
- Submit a claim online
- Call VA Benefits Hotline at 800-827-1000 for assistance
- Contact a Veteran Service Officer through the QR code located on page 27

Veterans who previously had claims denied may be eligible under expanded guidelines and can file supplemental claims.

Patients enrolled in hospice, or their representative with a power of attorney, may expedite registration by gathering the appropriate documentation: DD214 discharge papers (see page 6), official diagnosis with a doctor's authentication, and a hardship letter. Proof of hospice admission satisfies the hardship requirement.

If in crisis, dial 988, then press 1

(or text 838255, or chat online at www.veteranscrisisline.net)

Survivor and Dependent Compensation (DIC)

A surviving spouse, child, or parent of a Veteran who meets **one** of the criteria listed below may be eligible for a monthly tax-free monetary benefit called the VA Dependency and Indemnity Compensation (VA DIC).

- Veteran died from a service-related injury or illness (see **Appendix A** for presumptively associated diseases and conditions)
- Veteran did not die from a service-related injury or illness, but one of the following conditions existed at the time of death:
 - Veteran received VA Disability Compensation for a total disability for the last 10 years. (Note: This also includes Veterans who would have received VA compensation, but did not because they were receiving military retirement or disability pay).
 - Veteran received VA Disability Compensation for a total disability continuously since released from active duty for at least 5 years.
- Veteran died in the line of duty

How to apply for compensation?

- The surviving spouse or child of a Veteran can fill out an Application for DIC, Survivors Pension, and/or Accrued Benefits, VA Form 21P-534EZ
- A surviving parent can fill out an Application for Dependency and Indemnity Compensation by Parent(s), VA Form 21P-535



Home-Based Primary Care (HBPC)

Home-Based Primary Care is a mobile Primary Care Team that provides healthcare services to Veterans who are homebound, have physical/functional impairments, and have complex diseases. An interdisciplinary team (comprised of a primary care provider - a physician or nurse practitioner, a nurse care manager, a social worker, a pharmacist, a registered dietitian, an occupational therapist, and a psychologist/neuropsychologist) provides comprehensive primary care in the Veteran's home environment, assisted living facility, or board and care.

HBPC Eligibility:

- Veteran is actively enrolled in the VHA (Veterans Health Administration)
- Veteran's VA primary care physician provides a referral
- Veteran is elderly and has difficulty attending VA medical appointments
- Veteran has a complex disease process that would benefit from the care of an interdisciplinary team
- Veteran's needs can be effectively met in the home environment by routine monthly home visits
- Veteran/caregiver will accept HBPC as their primary care provider
- Veteran's home environment is safe for the well-being of the Veteran, caregiver, and HBPC team member
- Veteran lives within an HBPC service area

HBPC does not include these services:

- Home Health Aide (HHA)
- Homemakers, housekeeping services
- Daily nursing care (bathing for example)
- Acute skilled nursing care (IV infusions for example)

Homemaker/Home Health Aid Program (H/HHA)

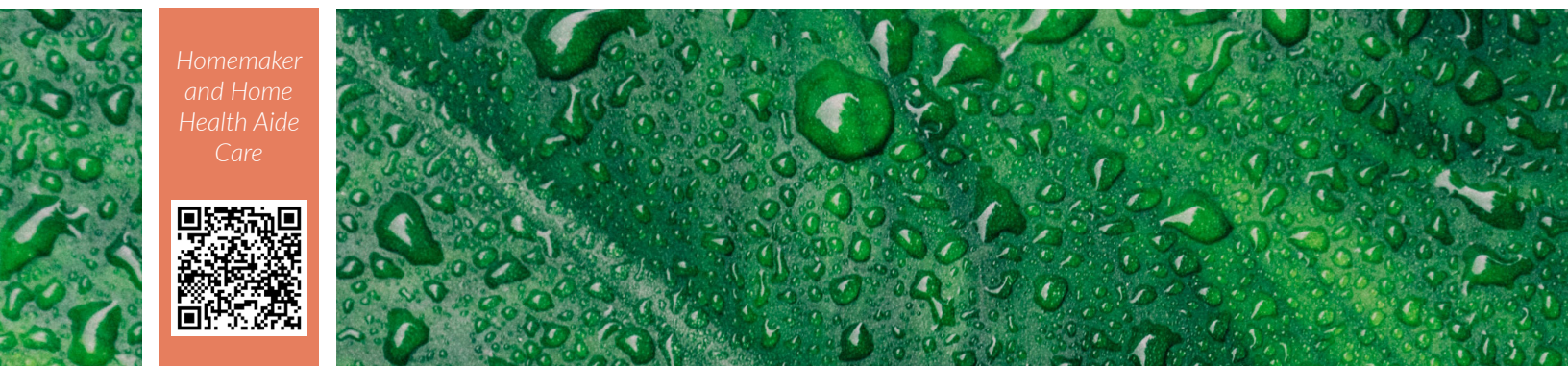
H/HHA services enable a Veteran requiring help with daily tasks to remain at home with a higher quality of life. These services provide assistance with:

- Activities of daily living, such as bathing, dressing, grooming, toileting, eating, ambulation (moving), transfers, and exercises
- Instrumental activities of daily living, which may include light housekeeping, laundry, meal preparation, and grocery shopping
- Veterans who are isolated or whose caregivers are experiencing a burden

H/HHA Eligibility:

- H/HHA is available to all Veterans who are enrolled in the VA standard health medical benefits program and who meet the clinical need for services
- H/HHA services are provided by licensed and accredited private agencies
- H/HHA services do not include authorization for payment for skilled home health services or adult sitter services
- To find services, call the local VA and ask for a Homemaker/Home Health Aid Program representative
- Contact the Veteran's primary care social worker

*Homemaker
and Home
Health Aide
Care*



Caregiver Respite

The respite program is offered to Veterans who are actively enrolled in the VA through their primary care provider. Qualifying Veterans can receive 30 days of respite for their caregivers each year.

Respite options:

- The Veteran may stay at a VA-contracted community skilled nursing facility
- The VA may have a bed available at one of their inpatient units
- Veterans and their caregivers who receive and "bank" a number of H/HHA hours each week may be eligible for in-home respite (if they accumulate hours needed to add to "additional days" of respite at home)

Respite eligibility:

- Veterans are eligible if they meet the clinical criteria (see QR code below) and respite care is available in the Veteran's location
- If respite is provided by a community agency, adult day health care center, or nursing home, the Veteran must also meet community care eligibility

For additional information on in-home respite, contact the Veteran's primary care social worker or the local VA office.

Caregiver Self-
Assessment



Respite
Care



Hospice Benefit

Hospice is a covered benefit for all medically enrolled Veterans who are in the final phase of their lives, typically 6 months or less. Veterans with Medicare, Medicaid, or other forms of health insurance can use this VA benefit in addition to a private/community hospice. It is important to discuss whether there is an advantage to using dual services with your healthcare social worker. Hospice care is also open to Veterans who are not medically enrolled through Medicare, Medicaid, or private insurance. Services may include:

- Nursing care
- Personal care aides
- Social worker support
- Spiritual care support
- Volunteer support
- Bereavement support
- Additional therapies, such as art and music

National hospice policy and standards for VA medical centers include:

- Provision of hospice services in all settings
- Inpatient hospice beds or access to them in the local community
- Referral assistance to area community hospices
- An interdisciplinary palliative care consult team

Death Certificate Classification

It is important to collaborate with the healthcare team to establish the correct information to be included on the Death Certificate when a Veteran passes, especially if that Veteran received service-connected disability benefits.

In some cases, the cause of death is directly related to, or "at least as likely as not" to their service-connected injury. This information can be used to establish ongoing benefits to members of the Veteran's family.

VA Caregiver Support Program

The VA Caregiver Program offers a number of services to eligible Veterans and their caregivers:

- The General Caregiver Support Services (PGCSS) provides peer support mentoring, skills training, coaching, telephone support, online programs, and referrals to available resources to caregivers of Veterans. The Veteran must be enrolled in Veterans Affairs (VA) health care and be receiving care from a caregiver in order for the caregiver to participate. Caregivers who participate in PGCSS are called General Caregivers. General Caregivers do not need to be a relative or live with the Veteran.
- The Program of Comprehensive Assistance for Family Caregivers (PCAFC). PCAFC is for eligible Veterans who have incurred or aggravated a serious injury in the line of duty on or before May 7, 1975, or on or after September 11, 2001. This program provides resources, education, support, a financial stipend, health insurance (if eligible), and beneficiary travel (if eligible), to caregivers of eligible Veterans.

To identify your specific Caregiver Program Coordinator please use the QR code on the right.

*Find a
Caregiver
Program
Coordinator*



*Program of
Comprehensive
Assistance
for Family
Caregivers
(PCAFC)*



Military Medals

For Veterans who wish to obtain replacement military medals or learn of any medals awarded and not previously received, the Veteran or next of kin should complete Standard Form 180 (Request Pertaining to Military Records).

Information that is needed to complete the request:

- Veteran's full name
- Veteran's branch of service, service number, or social security number
- Veteran's exact or approximate dates of service
- Signature of the Veteran, or the Veteran's next of kin, if Veteran is deceased

Any Veterans Service Officer or county Veteran's office may also help to submit the request.

*Form 180:
Request
Pertaining
to Military
Records*



Veterans Burial Benefits

Burial Benefits

Regardless of income and assets, burial benefits provide eligible Veterans, spouses, and qualified dependents (minor children and, in some cases, unmarried adult dependent children), a free burial at a national or state cemetery, a free grave marker, and a burial with military honors, which includes a presentation of an American flag and the playing of taps at funerals/memorials. The VA created Planning Your Legacy: VA Survivors and Burial Benefits Kit to assist Veterans and their family members in pre-need planning.

*Burial Benefits
for Veterans
and Their
Families*



What is VA Burial Allowance?

A VA Burial Allowance is a partial reimbursement of an eligible Veteran's burial and funeral costs. When the Veteran's cause of death is not service-related, the reimbursement generally falls into two categories:

- A burial and funeral expense allowance
- A plot interment allowance
- Transportation reimbursement for cost of transporting the Veteran's remains to the final resting place

*Planning Your
Legacy Kit*



*Veterans
Burial
Allowance*



Burial benefits are available for all legal burial types, including cremation, burial at sea, and donation of the Veteran's remains to a medical school. Cremation may be arranged through a cremation service that will work directly with a national cemetery.

Who is Eligible?

You may be eligible for a VA burial allowance if:

- You paid for a Veteran's burial and funeral **AND**
- You have not been reimbursed by any other government agency or some other source, such as the deceased Veteran's employer **AND**
- The Veteran's discharge was under conditions other than dishonorable

In addition, at least one of the following conditions must be met:

- The Veteran died because of a service-related disability **OR**
- The Veteran was receiving VA pension or compensation at the time of death **OR**

- The Veteran was entitled to receive VA pension or compensation but decided not to reduce his/her military retirement or disability pay **OR**
- The Veteran died in a VA hospital or nursing home under VA contract

VA Form
10-2065



VA Form
27-2008



VA Form
40-0247



Military
Service
Records
Request



How to
Expedite
DD214
Replacement



What information is required to apply for burial benefits?

- Social Security number
- Date and place of birth
- Military status and service history (service dates, discharge character, and rank—commonly found on the DD214 or other separation documents)
- Death Certificate
- Discharge papers (DD214 or other separation documents) Note: See QR codes to request military service records. The healthcare team may be able to help with this.
 - If the Veteran has already passed away, and a copy of the discharge papers is needed for immediate burial arrangements, call the National Cemetery Scheduling Office at 800-535-1117. They can help you get the Veteran's DD214 or other necessary discharge documents.

The Veteran and/or family can choose a funeral home, mortuary, or cremation service and request that they assist in contacting the National Cemetery to coordinate the burial arrangements for the Veteran/family to be buried there with military honors.

Military Honors

The following military honors are provided to all qualified Veterans:

- The Department of Defense, through the “Honoring Those Who Have Served” program, provides funeral service Honor Teams to include the folding and presentation of the United States burial flag and the playing of taps. These are generally scheduled for the Veteran by the funeral home on behalf of the Veteran's family. If the burial is at a VA cemetery, funeral honors can be requested from the VA using VA Form 10-2065.
- One United States Flag is provided through the national VA to drape the casket or accompany the urn. A flag can be obtained by:
 - The funeral home for the funeral service

- Completing VA Form 27-2008 to obtain one directly from the VA
- Obtaining one from the US Postal Service:
 - Submit completed VA Form 27-2208 along with a copy of the Veteran's DD214 to the local post office
- Applications can be submitted by a family member or a funeral director on behalf of the Veteran
- There is no time limit on flag requests

The national VA can provide a Presidential Memorial Certificate (PMC) to the family of a deceased Veteran. A PMC is an engraved paper certificate signed by the current President. As with other honors, this can be arranged by the funeral home on behalf of the Veteran's family, or directly through the VA with a VA Form 40-0247 and a copy of the DD214.

VA Burial/
Memorial
Eligibility



Arlington
National
Cemetery



Burial and Grave Marker Provided at No Cost

National and State Cemeteries:

Regardless of income and assets, the VA provides all honorably discharged Veterans, spouses, and qualified dependents a free burial and grave marker in any of the national cemeteries.

- 142 VA national cemeteries
- Arlington National Cemetery: This cemetery is run by the U.S. Army. Veterans who won top awards, died on duty, retired from service, and others who qualify, are buried here.

Veterans and families can apply for pre-approval for national and state VA cemetery admission. Other U.S. military service members and civilians may be eligible for these benefits. Unfortunately, funeral or cremation costs are not covered.

What the VA Cannot Do

- Gravesites in a national cemetery cannot be reserved
- A national cemetery typically does not conduct burials on weekends
- National cemeteries cannot place headstones or markers from outside sources
- The national cemetery system cannot enter into contracts or agreements with local funeral directors or mortuaries
- The National Cemetery Administration cannot endorse local mortuaries or offer any discounts through a local funeral director or mortuary

Burial at Sea

Burial at Sea is a means of final disposition of remains performed on U.S. Navy vessels. The committal ceremony is performed while the ship is deployed and family members are, therefore, not allowed to be present. Once completed, the ship's commanding officer assigned to perform the ceremony will notify the family of the date, time, longitude, and latitude of the committal service. The average wait time for burial at sea is **12 to 18 months** once the remains/cremains are received at the port of embarkation. Individuals eligible for this program are:

- Active duty members of the uniformed services
- Retirees and Veterans who were honorably discharged
- U.S. civilian marine personnel of the Military Sealift Command
- Dependent family members of active duty personnel, retirees, and Veterans

Call the U.S. Navy Mortuary Affairs office at 866-787-0081 or scan the QR code for more information.

*Burial at Sea
Information*



Grave Markers and Medallions

The VA provides a headstone, columbarium niche cover, or a flat marker for a Veteran's final resting place, whether in a private or state/national cemetery, for qualifying Veterans. If a private grave marker is purchased, a medallion for placement on the grave marker can be obtained from the VA. The funeral home can arrange to obtain the grave marker or medallion, or the grave marker and medallion can be requested directly from the VA.

*Memorial
Headstone
Markers and
Medallions*



Honoring all Veterans

Some states have programs that offer reimbursements of up to \$2,000 to a Veterans Service Organization tasked by a county's government with providing interment services for indigent Veterans. Consult your State Department of Veterans Services for more information.

Arrears of Pay and Survivor Benefit Plan Annuity for Spouses/Families of Retired Military Members

If the Veteran retired from the military and received retirement pay, contact the Defense Finance and Accounting Service (DFAS) to stop retiree pay, start Survivor Benefit Plan (SBP) annuity payments, and obtain any other compensation owed from retirement services. **Report the Veteran retiree's death on the DFAS website or call DFAS customer care center at 800-321-1080.** Upon notification, DFAS will stop monthly retirement payments to prevent overpayment.

After reporting a Veteran's death to DFAS, a letter containing the following documents will be sent:

- SF1174 Claim for Unpaid Compensation of Deceased Member of the Uniformed Service and instructions
- Annuity account forms DD2656-7 and instructions if the deceased retiree was enrolled in the SBP

What is Arrears of Pay?

Arrears of Pay is a one-time payment made to a beneficiary that includes the pro-rated amount of the deceased retiree's final month's pay and any other money owed at the time of the retiree's passing. Please see the **How to Claim a Retiree's Arrears of Pay Using the SF1174** fact sheet.

Filing for Arrears of Pay

The completed SF1174 form and death certificate are required to receive the Arrears of Pay (a direct deposit form is optional). There are three options on where to send the SF1174 form and supporting documents:

Upload a PDF of the completed and signed SF1174 and supporting documents via the askDFAS online upload tool.

OR, fax the forms to 800-469-6559

OR, mail the forms to:
Defense Finance and Accounting Service
U.S. Military Retired Pay
8899 E 56th Street, Indianapolis IN 46249-1200

Report
Retiree
Death



SF 1174
Information



askDFA
Online
Upload Tool



Survivor Benefit Plan (SBP)

The designated beneficiary of a deceased military service member's SBP must complete several documents to start receiving SBP payments. Please see the **Start a Survivor Benefit Plan Annuity** fact sheet for more detailed information.

- The DD Form 2656-7 is the Verification of Survivor Annuity form, which, once received by DFAS, starts SBP payments.
- The IRS W-4P is the Withholding Certificate for Pension or Annuity form to have federal taxes withheld from the annuity.
- Direct Deposit forms: either the Fast Start Direct Deposit Form (FMS 2231), **OR** Direct Deposit Enrollment Form (SF 1199A), **OR** International Direct Deposit Enrollment Form (SF1199-I).

Filing for SBP

There are three options for submitting SBP documents:

Upload a PDF of the completed and signed DD2656-7 and supporting documents via the askDFAS online upload tool.

OR, fax the forms to 800-982-8459

OR, mail the forms to:
U.S. Military Annuitant Pay
8899 E 56th Street
Indianapolis IN 46249-1300

For questions about starting the SBP annuity process, please contact the appropriate Branch of Service Retiree Service Organization or call the Customer Care Center at 800-321-1080.

Survivor
Benefit Plan
Annuity Fact
Sheet



DD Form
2656-7



IRS W-4P



DD Form
2656-7
Upload Tool



Filing Claims

Proof of Military Service

For benefits applications, a copy of the discharge papers (form DD214, or other separation documents), military status, and service history (service dates, discharge character, and rank—commonly found on the DD214 or other separation documents), are required. See QR codes on page 6 to request military service records. The healthcare team may be able to help with this.

Medical Nexus Letters

It is important to include a medical Nexus letter with a VA disability claim. This letter establishes the connection between the Veteran's disability and the Veteran's military service. A medical Nexus letter helps the VA examiner (who may not be a medical expert) make a more thorough determination and often helps lead to a successful claim. Veterans are encouraged to work with their VSO (see page 27) or their physician to obtain a medical Nexus letter, which should contain the following information:

*How to
Write a
Nexus
Letter*



- A description of the Veteran's disability with evidence supporting that disability's existence
- Medical evidence to show that the disability was **at least as likely as not** caused by or exacerbated by the Veteran's military service
- Level of severity of the Veteran's disability and in what ways this impacts the Veteran's quality of life
- Author's qualifications for writing the letter (education, training, experience, length of time providing medical care to the Veteran, etc.)

Assistance in Filing Claims with the VA

There are a lot of benefits for Veterans, and figuring out which forms are required for a VA claim, how to fill them out, and where to send them can be confusing. However, there are agencies ready to assist. The healthcare team can help provide information and agencies that can help. An accredited representative can be selected to help in the preparation, presentation, and prosecution of claims for VA benefits for anyone who needs help to complete the application process.

Accredited Representative

An Accredited Representative is an individual who has undergone a formal application and training process, and who is recognized by the VA as capable of assisting claimants with their affairs before the VA.

Most accredited representatives work for Veteran service organizations (VSOs) such as the American Legion, the Disabled American Veterans (DAV), or the Veterans of Foreign Wars (VFW). Accredited representatives may also work for state or county government entities, may be lawyers or claims agents. These individuals have completed a certification process with the VA.

Recognized organizations and individuals, whether congressionally chartered VSOs, Veteran Service Officers, or VA accredited attorneys or claims agents, can legally represent a Veteran, service member, dependent, or survivor before the VA. Non-recognized organizations and individuals can provide information but cannot be a representative. Further information on types of claims agents:

- **Veterans Service Organizations (VSO):** Most accredited representatives work for VSOs, which are private non-profit groups that advocate on behalf of Veterans and their families. Most VSOs provide their services free of charge, but they may request reimbursement for unusual expenses or ask that you join their organization. VA-recognized VSOs can be named as the legal agent for a Veteran or the Veteran's family. A VSO can help gather any evidence needed and submit a fully developed claim on your behalf. In addition to assisting Veterans and their families with VA claims, VSOs also sponsor a range of Veteran-centric services, such as providing transportation to and from VA medical center appointments.
- **Veteran Service Officers:** Veteran service officers are agents who work for the state. They are trained to help Veterans file claims. Their services are free.
- **Attorneys and Claims Agents:** Attorneys and claims agents must be VA-approved to legally represent and file claims for Veterans or their families. They must pass a test and take classes every 1-2 years to keep their license. Unlike VSOs, claims agents and attorneys typically charge a fee for their services.

To seek representation from a VSO, download a copy of VA Form 21-22 form (Appointment of Veterans Service Organization as Claimant's Representative). Complete and mail or hand deliver to the selected VSO. If the VSO agrees to assist with the claim, that organization will then submit it to the VA regional office on your behalf.

To seek representation from an attorney or claim's agent, download a copy of VA form 21-22a form. Fill out and mail or hand deliver it to the selected attorney or claims agent. That individual will then submit the form to the VA regional office on your behalf.

Search for
Attorney,
Claim Agent,
or VSO



VA Form 21-
22 and VA
Form 21-22a



Advance Care Planning

Sharing what matters most with loved ones helps families, medical providers, and communities alike understand your values. That knowledge—and the exercise of talking to one another about deeply personal desires and eliminating the need for family to guess what your wishes might be—can bring comfort and peace of mind in times of stress. There are important topics that must be explored regarding your healthcare wishes, hopes, and fears with each other. It is a big step and not easy; however, it is necessary and will give those you love the guiding principles required to confidently make decisions for you if needed, ensuring that your healthcare journey takes the course that you establish and lead. Advance Care Planning allows you to have your voice heard when you are not able to physically speak for yourself.

Your healthcare team will talk to you more about this and help guide the discussion with you and those you choose to participate in this discussion—this person is often called your healthcare surrogate or proxy.

If in crisis, dial 988, then press 1

(or text 838255, or chat online at www.veteranscrisisline.net)



APPENDIX A:

Diseases and/or Conditions Presumptively Qualifying for Disability Benefits

What is a "Presumptive" Condition?

VA presumes that certain disabilities were caused by military service. This is because of the unique circumstances of a specific Veteran's military service. If a presumed condition is diagnosed in a Veteran in a certain group, they can be awarded disability compensation.

A diagnosis of Amyotrophic Lateral Sclerosis or ALS (also known as Lou Gehrig's Disease) in any Veteran who served continuously for at least 90 days under any circumstances is considered a presumed condition. There is a minimum 100 percent disability rating for Veterans diagnosed with ALS, qualifying them for both services and disability compensation, as well as qualifying their families and survivors for benefits.

*Presumptive
Disability
Benefits*



Veterans in the following groups may qualify for “presumptive” disability benefits:

- Former prisoners of war who have a condition that is at least 10 percent disabling
- Veterans exposed to radiation risk activities through one of the following service experiences:
 - Participated in atmospheric nuclear weapons tests conducted primarily in Nevada and the Pacific Ocean between 1945 and 1962
 - Were prisoners of war in Japan near Hiroshima and Nagasaki during World War II
 - Participated in the occupation of Hiroshima and Nagasaki, Japan between August 6, 1945 and July 1, 1946
 - U.S. Air Force plutonium cleanup mission near Palomares, Spain (1966)
 - U.S. Air Force plutonium cleanup mission at Thule, Greenland (1968)
 - Radiological cleanup of Enewetak Atoll (1977-1980)
- Participated in underground nuclear weapons testing at:
 - Amchitka Island, Alaska before January 1, 1974

- Nevada Test Site for at least 250 days from January 1, 1963 through December 31, 1992
- Served at one of the following gaseous diffusion plants for at least 250 days before February 1, 1992:
 - Paducah, Kentucky
 - Portsmouth, Ohio
 - K25 in Oak Ridge, Tennessee
- Vietnam Era Veterans who served in the following locations during specified dates:
 - Republic of Vietnam - January 9, 1962 to May 7, 1975
 - Thailand (any U.S. or Royal Thai base) - January 9, 1962 to June 30, 1976
 - Guam or American Samoa (or in their territorial waters) - January 9, 1962 to July 31, 1980
 - Laos - December 1, 1965 to September 30, 1969
 - Cambodia (at Mimot or Krek, Kampong Cham Province) - April 16, 1969 to April 30, 1969
 - Johnston Atoll (or on a ship that called there) - January 1, 1972 to September 30, 1977
- Gulf War and Post 9/11 Era Veterans assigned to a duty station in (including airspace above) certain locations during specific periods of time on or after:
 - August 2, 1990, in Bahrain, Iraq, Kuwait, Oman, Qatar, Saudi Arabia, Somalia, or United Arab Emirates
 - September 11, 2001, in Afghanistan, Djibouti, Egypt, Jordan, Lebanon, Syria, Uzbekistan, Yemen, or any other country determined relevant by the VA
- Veterans serving active duty, reserve, or National Guard at Camp Lejeune and MCAS New River boundaries for at least 30 days between August 1, 1953 and December 31, 1987

Presumptive Conditions

See this list for specific presumed conditions for these groups (Former Prisoners of War, Vietnam Veterans Exposed to Agent Orange, Veterans Exposed to Radiation Risk Activities, Camp Lejeune Veterans, Gulf War and Post 9/11 Veterans, and Veterans Exposed to Airborne Hazards and Open Burn Pits) who served during qualifying time periods and locations. Click on the QR code at right for the most up-to-date presumed conditions information.

Former Prisoners of War	Vietnam Veterans Exposed to Agent Orange	Veterans Exposed to Radiation Risk Activities	Camp Lejeune Veterans
<p>Imprisoned for any length of time:</p> <ul style="list-style-type: none"> • A neuropsychiatric condition • Any anxiety state, such as PTSD • Dysthymic disorder (persistent depressive disorder) • Hypertensive vascular disease, including hypertensive heart disease, and related problems (stroke, blood clots, or other serious issues) • Lasting damage from frostbite • Post-traumatic osteoarthritis • Psychosis • Osteoporosis (if you filed a claim on or after Oct. 10, 2008, and have a diagnosis of PTSD) • Stroke or problems caused by stroke <p>Imprisoned for at least 30 days:</p> <ul style="list-style-type: none"> • Avitaminosis • Beriberi (including Beriberi heart disease) • Chronic dysentery • Helminthiasis • Irritable bowel syndrome • Liver cirrhosis • Malnutrition (including optic atrophy) • Osteoporosis • Pellagra • Peptic ulcer • Peripheral neuropathy 	<ul style="list-style-type: none"> • AL amyloidosis • Bladder Cancer • Chronic B-cell leukemia • Hodgkin's disease • Hypertension • Hypothyroidism • Ischemic heart disease • Monoclonal gammopathy of undetermined significance (MGUS) • Multiple Myeloma • Non-Hodgkin's lymphoma • Parkinson's disease • Parkinsonism • Prostate cancer • Respiratory cancers • Soft-tissue sarcomas (not including osteosarcoma, chondrosarcoma, Kaposi's sarcoma or mesothelioma) • Type 2 diabetes <p>The following conditions, if they become greater than 10 percent debilitating within a year of exposure to an herbicide agent:</p> <ul style="list-style-type: none"> • Chloracne or other similar acneform disease • Peripheral neuropathy, early onset • Porphyria cutanea tarda 	<ul style="list-style-type: none"> • Cancers of the bile ducts, bone, brain, breast, colon, esophagus, gall bladder, liver (primary site, but not if cirrhosis or hepatitis B is indicated), lung (including bronchiolo-alveolar cancer), pancreas, pharynx, ovary, salivary gland, small intestine, stomach, thyroid, urinary tract (kidney/renal, pelvis, urinary bladder, and urethra) • Leukemia, except chronic lymphocytic leukemia • Lymphomas, except Hodgkin's disease • Multiple myeloma 	<ul style="list-style-type: none"> • Adult leukemia • Aplastic anemia and other myelodysplastic syndromes • Bladder cancer • Kidney cancer • Liver cancer • Multiple myeloma • Non-Hodgkin's lymphoma • Parkinson's disease

Gulf War and Post 9/11 Veterans

- Fibromyalgia
- Functional gastrointestinal disorders
- Infectious diseases:
 - Mycobacterium Tuberculosis
 - Visceral Leishmaniasis
- Infectious diseases where the condition must be 10 percent disabling within one year from date of separation:
 - Brucellosis
 - Campylobacter Jejuni
 - Chronic Fatigue Syndrome (CFS)
 - Coxiella Burnetii (Q Fever)
 - Malaria
 - Nontyphoid Salmonella
 - Shigella
 - West Nile Virus Myalgic Encephalomyelitis (ME)
- Undiagnosed illnesses with symptoms that may include but are not limited to:
 - Abnormal weight loss
 - Cardiovascular disease
 - Fatigue
 - Headache
 - Menstrual disorders
 - Muscle and joint pain
 - Neurological and psychological problems
 - Respiratory disorders
 - Skin conditions
 - Sleep disturbances

Veterans Exposed to Airborne Hazards and Open Burn Pits

- Adenocarcinoma of the trachea
- Adenosquamous carcinoma of the lung
- Asthma that was diagnosed after service
- Brain cancer
- Chronic bronchitis
- Chronic obstructive pulmonary disease (COPD)
- Chronic rhinitis
- Chronic sinusitis
- Constrictive bronchiolitis
- Emphysema
- Gastrointestinal cancer of any type
- Glioblastoma
- Granulomatous disease
- Head cancer of any type
- Interstitial lung disease (ILD)
- Kidney cancer
- Large cell carcinoma of the lung
- Lymphatic cancer of any type
- Lymphoma of any type
- Melanoma
- Neck cancer
- Pancreatic cancer
- Pleuritis
- Pulmonary fibrosis
- Reproductive cancer of any type
- Respiratory (breathing-related) cancer of any type
- Salivary gland-type tumors of the lung
- Salivary gland-type tumors of the trachea
- Sarcoidosis
- Sarcomatoid carcinoma of the lung
- Squamous cell carcinoma of the larynx
- Squamous cell carcinoma of the trachea
- Typical and atypical carcinoid of the lung

APPENDIX B:

Military History Checklist

Please use this military checklist to talk to your Veteran and to document their military service for your family history and to use as a resource when applying for VA benefits.

Full name (last, first, middle):

.....

Did the Veteran serve under a maiden name or other name (alias)?

If Yes, list the other name(s) here:

.....

Do you have a copy of Veteran's DD214 discharge papers? ☐ Yes ☐ No

Does the Veteran have any immediate family members who served or are serving in the military?

☐ Yes ☐ No

If Yes, please list here:

.....

.....

.....

Would you like to talk with someone about VA benefits you or your family might be eligible to receive? ☐ Yes ☐ No

If yes, please notify the healthcare team. Is there a specific benefit where more information/help is desired?

.....

.....

.....

Military Background

In which branch of the military did the Veteran serve?

- ☐ Army ☐ Navy ☐ Air Force ☐ Marines ☐ Coast Guard
☐ Reservist or National Guard member ☐ Space Force
☐ Merchant Marines during WWII ☐ Other.....

What are the Veteran's dates of service (date entered and date left service):

.....

What is the highest rank the Veteran attained:

.....

In which war era or period of service did the Veteran serve?

- ☐ WWII (12/7/41 to 12/31/46) ☐ Korea (6/27/50 to 1/31/55) ☐ Cold War
☐ Vietnam War Era - "in country" (11/1/55 to 5/7/75)
☐ Vietnam War Era - outside of Vietnam (8/5/64 to 5/7/75)
☐ Gulf War (8/2/90 through a date to be set by law or presidential proclamation)
☐ Peace Time ☐ Afghanistan/Iraq (OEF/OIF) Other:.....

Did the Veteran serve on active duty? ☐ Yes ☐ No

Did the Veteran's service include combat, dangerous, or traumatic assignments? ☐ Yes ☐ No

Comments:.....
.....
.....

Was the Veteran a prisoner of war? ☐ Yes ☐ No Comments:.....

.....
.....

What was the Veteran's job in the service? (e.g., engineering, infantry, communications, maintenance, construction, medical field, other)

.....
.....
.....

What military bases and/or places did the Veteran serve?

.....
.....

List any specific missions, operations, or projects that the Veteran served in:

.....
.....

Did the Veteran earn a military award? If yes, list the award(s) below (for example, Medal of Honor, Purple Heart, Silver Star, etc.):

List awards here (listing all of the Veteran's combat decorations on the DD214 may help with claims for service connection, including PTSD):

.....
.....

Overall, how does the Veteran view their experience in the military?

.....

.....

Do any memories particularly stand out?

.....

.....

VA Benefits Information

Is the Veteran enrolled in VA? ☐ Yes ☐ No

Does the Veteran receive any VA benefits? ☐ Yes ☐ No If yes, which benefits?

.....

.....

Does the Veteran have a service-connected condition?

☐ Yes ☐ No If yes, what is the condition?

.....

.....

Does the Veteran get his/her medications from the VA? ☐ Yes ☐ No

Does the Veteran go to a VA hospital or clinic for services? If so, what is the hospital and/or clinic's name?

.....

.....

What is the name and contact information of the Veteran's VA physician or Primary Care Provider?

.....

.....

APPENDIX C:

Additional/Local Resources for Veterans and Caregivers

General:

- Your regional Department of Veterans Services office or local Veterans' services organization may provide personalized help in filing claims
- Your palliative care/hospice provider listed at the bottom of each page of this guide
- Online: www.ebenefits.va.gov
- Online: www.vba.va.gov
- VA benefits helpline at 800-827-1000

Veterans Crisis Line

If a Veteran is in crisis, the Veterans Crisis Line is available 24 hours/day, 365 days/year. The crisis line is a phone, online chat, and text-messaging service, free to all Veterans. It is staffed by caring, trained VA responders, many of whom are Veterans themselves. They can help with problems such as chronic pain, anxiety, depression, sleeplessness, anger, and homelessness.

The Veterans Crisis Line is also available to a Veteran's family, friends, and caregivers to help them ensure their loved one gets the care they need. Veterans Crisis Line responders can also refer calls to Suicide Prevention Coordinators (available at each VA Medical Center), who will follow up with the Veteran and organize care they may need.

- Veteran Crisis Line: Dial 988, then press 1
- Online Crisis Chat Line: www.veteranscrisisline.net
- Text Crisis Line: 838255

General VA
Benefits



VA Home
Health Services
and Hospice
Care



Requesting
DD-214



Military
Personnel
Records
Request



Health Benefits/
Means Test/
Income
Threshold



Application
for VA Health
Care Benefits



State Depts
of Veterans
Affairs Office
Locations



State/Local Resources

Please see this list for your state/local resources or contact your local palliative care/hospice provider listed at the bottom of each page of this guide.

Department of Veterans Services

County Veterans Service Commissions

Veteran and Family Support

Veteran Service Organizations

Other Local Resources

APPENDIX D:

Robotic Pets

Robotic pets are a way to assist Veterans living with dementia. These pets respond to sight, sound, and touch, like real pets, and are proven to bring comfort, connections, and therapeutic benefits to people living with memory loss, dementia, and depression. Once a person receives a pet, there is often an immediate transformation in behavior. The pets may provide such comfort and joy that sometimes behavior medications may be reduced. Additionally, since living with dementia often precludes caring for a live pet, robotic pets are a great solution.

To obtain a robotic dog or cat, please contact your healthcare team or order one directly from Joy for All.

If in crisis, dial 988, then press 1

(or text 838255, or chat online at www.veteranscrisisline.net)



*Joy for All
Robotic Pets*



Important Notes

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Important Notes

.....

.....

.....

.....

.....

.....

.....

.....

.....

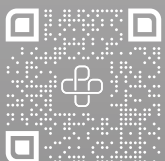
.....

.....

.....



PARTNERPLUS
MEDIA



Partner Plus Media Limited has endeavored to provide an informative guide to the services and products available within this publication. While every effort has been made to ensure the accuracy of the editorial content in this guide, Partner Plus Media Limited is not liable for the accuracy of any content received from 3rd parties.

📞 704-228-7475

✉ info@partnerplusmedia.com

🌐 www.partnerplusmedia.com



PARTNERPLUS
MEDIA

Inform. Educate. Engage.

Partner Plus Media specializes in the supply of zero-cost, custom-designed, branded hospice & palliative care guides designed to help your hospice cultivate referral sources, grow your census, increase community engagement & education, and reduce costs.

"Partner Plus Media has been amazing to work with!! We absolutely love our Brochures and are constantly getting compliments on how beautiful they are. Thank you for making this such an easy transition!! Kristy Shaw has been amazing and so attentive to all of our needs. Thank you for assisting us in taking care of our sweet patients." - **Martha Duplechain LPN, Admissions Coordinator - Hospice of Acadiana**

"The publications help us to educate our community and the referral sources, preparing patients and families for admission and raising the profile of HPH Hospice, Chapters Health System & hospice care. We have also built new relationships with relevant local aftercare businesses who can help our families, thanks to Partner Plus." - **Shannon Chaffin, Professional Relations, HPH Hospice**



Scan the QR
code with your
smartphone



