

Veterans' health matters

New Funding Expands Health Benefits to Priority 8 Veterans

The U.S. Department of Veterans Affairs (VA) has announced that, with the recent passage of Public Law 110-329, it is reopening enrollment in its medical benefits package to approximately 265,000 additional Veterans whose incomes exceed the current VA means test and geographic means test income thresholds by 10 percent or less. The new law provides additional funding to allow expanded enrollment opportunities for some Priority 8 Veterans. It is anticipated that the change will be implemented by June 30, 2009.

The Veterans' Health Care Eligibility Reform Act of 1996 (P.L. 104-262) established a priority-based enrollment system and provided a uniform Medical Benefits Package of health care services to all enrollees. The legislation opened enrollment in VA's health care system to all eligible Veterans and required that each year the Secretary of Veterans Affairs assess Veteran demand and determine if the necessary resources are available to provide timely, quality care to all enrollees.

Enrollment for the lowest priority of the eight groups—Veterans who are not being compensated for a military-related disability and who have incomes above a set threshold—was suspended on January 18, 2003, although Veterans in that

priority group who were already enrolled for care were permitted to remain enrolled.

VA originally suspended enrollment for Priority 8 Veterans because it was unable to provide all enrolled Veterans with timely access to its health care services due to a tremendous growth in the number of Veterans seeking enrollment at that time. VA is now reopening enrollment for a portion of these Veterans without compromising the Department's ability to provide high quality health care services to all enrolled Veterans who are eligible.

This incremental approach to expanding enrollment allows VA to ensure that access to VA healthcare for a greater number of beneficiaries does not sacrifice timely access or quality for those Veterans already enrolled in VA's health care system.

Policy Change

The new provision allows Veterans whose incomes do not exceed VA's means test thresholds by more than 10 percent to enroll in VA's health care system. As soon as it takes effect, it will be applied retroactively to all enrollment applications received on or after January 1, 2009.

Effect for Veterans

On the effective date of the regulation, a Veteran who applies for enrollment, who does not

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VA National News

Helping Veterans with Health Care Costs

For Veterans struggling financially due to job loss or decreased income, the VA offers programs that can relieve the costs of health care or provide care at no cost.

Veterans whose previous income was ruled too high for VA health care may be able to enter the VA system based upon a hardship, if their current year's income is projected to fall below federal income thresholds due to job loss, separation from service or other financial setback. Veterans determined eligible due to hardship can avoid co-pays applied to higher-income Veterans. Qualifying Veterans may be eligible for enrollment and receive health care at no cost.

Also eligible for no-cost care or minimal co-pay are most Veterans who recently returned from a combat zone. Many are entitled to five years of free VA care. The five-year "clock" begins with their military discharge.

Each VA medical center has an enrollment coordinator to provide Veterans information about these programs. Veterans may also contact VA's Health Benefits Service Center at 1-877-222 VETS (8387) or visit the VA health eligibility web site at www.va.gov/healtheligibility.

VA Job Search for Injured Vets

Thirty percent of VA employees are Veterans, with nearly eight percent having service-connected disabilities. Yet, the VA intends to increase the number of disabled Veterans in its workforce. All severely injured Veterans of Iraq and Afghanistan wars will be contacted

by VA's Veterans Employment Coordination Service to determine their interest in – and qualifications for – VA jobs.

Nine regional coordinators are working with local facility human resources offices across the country, to reach out to potential job candidates and to ensure that local managers know about special authorities available to hire Veterans. For example, qualified disabled Veterans rated as having a 30 percent or more service-connected disability can be hired non-competitively.

VA coordinators participate in military career fairs and transition briefings, and partner with Veterans organizations, the Department of Labor's Veterans Employment and Training Service, as well as VA's Vocational Rehabilitation and Employment Service, the Marine Corps' Wounded Warrior Regiment and the Army's Warrior Transition Units.

Injury Protection Program Expands

The VA has announced some severely injured military personnel and Veterans will be eligible for improvements to the Servicemembers' Group Life Insurance Traumatic Injury Protection Program, known as TSGLI. Changes are retroactive to October 7, 2001.

VA recently completed a comprehensive review of the program, to consider whether it was meeting its intended purpose, whether new injuries or losses should be added, and whether improvements could be made in how the program is administered.

As a result, VA has increased the number of injuries covered and

liberalized the criteria of other injuries. New injuries covered include the partial amputation of a hand or foot and the degree of injuries based on severe burns.

Another important change is the payment of a \$25,000 benefit to service members hospitalized for 15 consecutive days due to traumatic injury, allowing payments to begin earlier and financial help to be provided more quickly.

The TSGLI program is designed to provide severely injured service members and their families with short-term financial assistance. Service members who sustained certain severe injuries are entitled to payments ranging between \$25,000 and \$100,000.

TSGLI was designed to offset the expenses a service member's parents or spouse often incur when they move to be with their loved one during long and difficult treatment and rehabilitation periods. To date, more than \$309 million in TSGLI benefits have been paid to injured members and their families.

Veterans whose claims for TSGLI benefits were previously disallowed are being contacted if it appears their loss is now eligible for payment. Service members or Veterans who sustained severe traumatic injuries are encouraged to check the VA Insurance web site at www.insurance.va.gov for eligibility criteria and contact information.

For additional information about VA benefits, contact VA's toll-free number at 1-800-827-1000.

VA National News

Technology Improves Access to Care

Veterans with chronic conditions can manage their health and avoid hospitalization by using special technology provided by the VA in their homes, according to a recent study.

The study found a 25 percent reduction in the average number of days hospitalized and a 19 percent reduction in hospitalizations for patients using home telehealth. For some patients, the cost of home telehealth services averaged \$1,600 a year – much lower than in-home clinician care costs.

VA's home telehealth program, the largest of its kind in the world, cares for 35,000 patients. VA officials, however, emphasize that it does not necessarily replace nursing home care or traditional care, but can help Veterans understand and manage chronic conditions such as diabetes, hypertension and chronic heart failure. Patients' partnership with the medical team can delay the need for institutional care and maintain independence for an extended time.

New Women Veterans Committee Members

The VA has announced the appointment of four new members to the Advisory Committee on Women Veterans, an expert panel that advises VA on issues and programs affecting women Veterans. The new committee members are:

- Davy Coke, Poway, Calif., a retired Navy petty officer who served in Vietnam. He currently is a trainer and mentor for new service members in the aerospace field.

- Yanira Gomez, Germantown, Md., a former Army medical specialist who served in Iraq. She is currently national outreach officer for the Veterans of Foreign Wars.
- Gloria Maser, Alexandria, Va., a colonel in the Army Reserves, and a former deputy chief of staff for health affairs with the Multi-National Security Transition Command in Iraq. She currently works for a strategy and technology organization.
- Barbara Ward, Sacramento, Calif., a former Air Force staff nurse, currently serving as deputy secretary for women and minority Veterans affairs in the California Department of Veterans Affairs.

The approximately 1.8 million women Veterans constitute nearly eight percent of the Veteran population and about five percent of Veterans using VA health care. VA estimates that by 2020 women Veterans will comprise 10 percent of the Veteran population.

VA has women Veterans program managers at VA medical centers and women Veterans coordinators at VA regional offices to assist women Veterans with health and benefits issues.

VA Urges Vets to Sign-up for Direct Deposits

Every month, 730,000 Veterans or survivors look for their compensation, pension checks or educational assistance payments in their mailboxes. In a few cases, theft and mail delays cause problems, which can be prevented by direct deposits. The VA is urging Veterans and family members now receiving paper checks to join nearly 3.1 million others whose VA payments are

deposited electronically.

Veterans and family members can sign up for direct deposit by calling VA toll-free at (800) 333-1795, enrolling online at www.GoDirect.org, or by contacting a VA regional benefits office or their financial institution. Information about direct deposits will be included in VA's monthly compensation and pension envelopes throughout 2009.

Direct deposits relieve worry about mail delivery being delayed by severe weather or natural disasters. The deposits also eliminate trips to banks or credit unions to deposit checks, while providing immediate access to money at the same time each month.

New Services for Rural Veterans

As part of a two-year program to improve the access and quality of health care for Veterans in geographically isolated areas, the VA is providing \$21.7 million to its regional health care systems. The funds will be used to increase the number of mobile clinics, establish new outpatient clinics, expand fee-based care, explore collaborations with federal and community partners, accelerate the use of telemedicine deployment, and fund innovative pilot programs.

The new funds will be distributed according to the proportion of Veterans living in rural areas within each VA regional health care system, called VISNs, for "Veterans Integrated Service Networks." VISN 21, the VA Sierra Pacific Network, with a population of rural Veterans between three and six percent, will receive \$1 million. ■

VA facility highlights

pacific islands

New Outpatient Clinic Coming to Guam

On January 7, VA Pacific Islands Health Care System (VAPIHCS) hosted a groundbreaking ceremony for a replacement Veterans Affairs Community Based Outpatient Clinic on the grounds of the U.S. Naval Hospital, Guam. The \$4.5 million, 6,000-square-foot construction project includes a free-standing VA clinic with its own parking area and improved

entry through a dedicated access road connected to the adjacent public highway.

The ceremony was well attended and extensively covered by the Guam media. Speakers included Guam Governor Felix Camacho; Lieutenant Governor Dr. Michael Cruz; Rear Admiral William French, USN, Commander Naval Forces Marianas; Captain David Miller, USN, Commanding Officer of the Naval Hospital Guam; Captain Paul Fuligni, USN, Commanding Officer, Naval Facilities Engineering Command Marianas; and VA PIHCS Director Dr. James Hastings as keynote speaker.

The new clinic is designed to serve



an estimated 9,000 Veterans who reside in Guam, and is expected to be completed in approximately 12 months. Efforts are also well underway to establish a VA outreach clinic on the neighboring island of Saipan to offer quality health care to the growing number of Veterans who reside there. ■

sierra nevada

Reno VA Medical Center Honors Family for Help

On January 9, the Reno VA Medical Center paid tribute to the Stassinopoulos family in appreciation for their donation of \$100,000 in memory of their uncle, Ioannis "John" A. Lougaris. The family flew from Athens, Greece to join Lougaris' daughter, Betty Lougaris of Las Vegas, to honor the late Mr. Lougaris, for whom the facility was renamed in

1981 as the Ioannis A. Lougaris VA Medical Center.

Mr. Lougaris was born in 1887 and immigrated to America in 1907 from a small Greek island in the Ionian Sea, Zakynthos. He became a U. S. Citizen in 1915. In 1917, he enlisted in the U.S. Army and fought in World War I. After the war, he settled in Reno and began practicing law in 1927.

Mr. Lougaris joined a new organization shortly after it was formed: the American

Legion. As a National Executive Committeeman for the organization, he went to Washington D. C. to campaign for the building of a VA Hospital in Reno. He kept up his fight to continue adding new additions and new equipment until his death in 1988, at the age of 100.

The generosity of the Stassinopoulos family has helped the Reno VAMC provide additional equipment and services for our Veterans, and we're grateful for their support. ■

central california

Clinic Renovations in 2009

The Emergency Department has been temporarily relocated to the second floor of VACCHCS, while a major renovation transforms the ground floor into state-of-the-art emergency services. The renovation project, costing \$4.1 million, will double the total patient gurney bays, while improving the entire

area and adding new equipment. The new ER will reopen in January 2010.

Other clinic renovations include the Eye Clinic, with the addition of three new eye exam rooms and a larger waiting room. This project is forecast for completion in June. The Primary Care Clinic Renovation project will add 10 new exam rooms, more restrooms and enlarges the consolidated waiting room, while the clinics remain open in a very busy area.

Construction is currently in Phase 5 of 7, with completion expected by July. The Pharmacy Renovation project includes a completely rebuilt I.V. preparation room and an outpatient medication

mail-out center to help ensure the latest standards in safe and sterile medication preparations, and improving delivery times for prescription mail-out. Completion is expected in April.

In the first new building since 1988, a stand-alone 12,000-square-foot Outpatient Mental Health Building will be built, beginning in April. The Mental Health Outpatient Programs, currently in various locations in the main hospital, will be consolidated in one outstanding new location, with a dedication ceremony scheduled for January 2010. ■

Nestlé Military Team Volunteers

A group of 53 Nestlé employees recently spent a day volunteering at the San Francisco VA Medical Center, in their effort to give something back to Veterans. Through the coordinated effort of the Department of Veterans Affairs' Veterans Canteen Service and the San

Francisco VA Medical Center, Nestlé Military Team donated not only their skills and talent, but also \$5,000.

The Nestlé staff broke up into four teams, each tackling a

different project. Two teams completed landscaping projects in front of several clinic areas. At the Community Living Center, which serves as home to nearly 100 Veterans, another team placed decorative rock and set up pots with soil and plants.

"Clean and Shine" was the theme for the team which focused its efforts on cleaning and shining the wheelchairs of the residents in the Community Living Center. Team members scrubbed wheelchairs until they sparkled, much to the delight and appreciation of Veteran residents.



Jeff Lozito, Director of Nestlé Military Channel stated, "This is the first group volunteering project Nestlé Military Team has performed. This was such a worthwhile experience, and we plan to continue having the Nestlé Military Team volunteer at other VA Medical Centers." ■

Volunteerism Among VA Providers

Healthcare providers at VANCHCS exemplify the VA spirit of selflessness and generosity by donating their skills for the benefit of underserved people. David Chapman, MD, and Tim Kress, RN, regularly participate in Flying Doctors, and recently provided care for needy individuals in the Coachella Valley, in Southern California. In addition to providing child car seats and other social services, the team delivered health services

to 1,377 people, mostly in the migrant labor community.

Another Northern California group recently completed a 20-day trip to Northern India. Led by Harkesh Sandhu, MD, the team, in collaboration with local providers and volunteers from Canada, delivered care to both rural and urban homeless citizens in a series of eight clinics.

The team included Dr. Sandhu; Arthur Swislocki, MD; Mervyn Nicholas, PA; Joy Meier, Pharmacist; Wafa Samara, Pharmacy; Dolores Menesini,

RN; Ann Manheimer, teacher; and Carol Bowden, Pharmacy. Approximately 4,500 people were served, receiving both medical and ophthalmologic care, as well as free medicines and counseling on medication use.

Scott Carter, MD, a primary care physician at the Martinez OPC, and his family, have made several trips to Central America, with several agencies, such as Global Health Outreach, and Alternative Missions, providing health care to underserved rural people, and also assisting in building projects. ■

Homeless Program Receives National Recognition

Veterans make up nearly one-third of the nation's homeless population. California has more homeless Veterans than any state in the Union and the VA at Palo Alto is taking those numbers seriously. The VAPAHCS recently was awarded the



VA Secretary's top Award for Outstanding Achievement in

Service to Homeless Veterans.

Last year, nearly 2,500 homeless Veterans received housing or care through a VAPAHCS initiative called THRIVE (The Health and Resource Initiative for Veterans Everywhere). This is the initiative that caught the attention of the Secretary in Washington, D.C.

"Our work at VA on behalf of our nation's homeless Veterans is

enhanced by so many outstanding organizations, national and community leaders and countless volunteers, who reach out with heartfelt compassion to their brothers and sisters on the street and in shelters," said Dr. Keith Harris, chief of VAPAHCS Homeless Programs. "But the fight to reclaim our nation's heroes is far from over. Homelessness is a complex issue and VA continues to work diligently with community partners to develop strategies to end chronic homelessness in America." ■

Funding Expands Benefits

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qualify for a higher priority group and whose income exceeds VA's means test thresholds by 10 percent or less will be placed in a priority group that allows the Veteran to be enrolled in VA's health care system.

Prior to the effective date of the rule, a Veteran who applies for enrollment, who does not qualify for a higher priority group and whose income exceeds the VA's means test thresholds by 10 percent or less, will not be enrolled.

However, while VA is not advising Veterans who may meet the new eligibility criteria to apply prior to effective date of the regulation, VA will inform Veterans and

Veterans Service Organizations of plans for the Health Eligibility Center (HEC) to re-determine the enrollment status of those Veterans who applied on or after January 1, 2009 but were rejected for enrollment due to income.

This approach reduces burdens to the sites (by not requiring Veterans to apply for enrollment twice in the same year), provides for greater benefit to Veterans, and uses consistent income information in the application process. For those Veterans who apply on or after January 1, 2009 and are placed into a rejected priority group due to income, VA enrollment correspondence will indicate that HEC will re-determine enrollment after the effective date of the new rule.

Retired Army Gen. Eric K. Shinseki, the newly appointed Secretary of Veterans Affairs, has pledged his complete support for this program, which is a top priority within VA and will be monitored on an ongoing basis at senior levels of the organization to ensure successful implementation.

For more information, Veterans are encouraged to contact VA's Health Benefits Service Center at 1-877-222 VETS (8387), or visit the VA health eligibility web site at www.va.gov/healtheligibility. Also, each VA Medical Center has an Enrollment Coordinator available to provide Veterans with information about their eligibility under this new provision. ■

WORD SEARCH

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New VA Leader Named

Retired Army Gen. Eric K. Shinseki has been appointed the nation's seventh Secretary of Veterans Affairs, assuming the leadership of the Department of Veterans Affairs following his confirmation by the Senate.



previously unable to enroll in it, while facilitating access for returning Iraq and Afghanistan Veterans.

Shinseki, a former Army Chief of Staff, takes the reins of a 284,000-employee organization

delivering health care and financial benefits to millions of Veterans and survivors under a \$98 billion budget authorized this year through networks of regional benefits offices and health care facilities from coast to coast.

Born in 1942 on the island of Kauai, Hawaii, Shinseki graduated from the U.S. Military Academy at West Point, N.Y., in 1965. He served two combat tours and was wounded in action in Vietnam. He served with distinction in Europe, the Pacific and stateside, eventually becoming the Army's senior leader from June 1999 to June 2003. Retired from military service in August 2003, Shinseki's military decorations include three Bronze Stars and two Purple Hearts.

Shinseki succeeds Dr. James B. Peake as Secretary of Veterans Affairs. ■

"The overriding challenge I am addressing from my first day in office is to make the Department of Veterans Affairs a 21st century organization focused on the nation's Veterans as its clients," Shinseki said.

Shinseki plans to develop a 2010 budget within his first 90 days that realizes the vision of President Barack Obama to transform VA into an organization that is people-centric, results-driven and forward-looking.

Key issues on his agenda include smooth activation of an enhanced GI Bill education benefit that eligible Veterans can begin using next fall, streamlining the disability claims system, leveraging information technology to accelerate and modernize services, and opening VA's health care system to Veterans

Burial and Memorial Benefits

A statement often heard by personnel in our Decedent Affairs Office is "Our father just passed away and we were told VA would take care of everything." Although some benefits may be offered and used, burial arrangements are made by the family, with the help of a funeral home of their choice.

For those eligible, benefits include:

- burial in a VA or State Veterans' cemetery at no cost;
- a burial flag which can be used in a memorial service, kept as a memento or donated to a national cemetery;
- an inscribed headstone or marker for their grave at any cemetery;
- a Presidential Memorial Certificate recognizing the Veteran's honorable military service can be requested by family and friends.

Some Veterans' families may be eligible for monetary reimbursement for burial expenses. Details concerning reimbursement of burial expenses and other VA benefits may be found in VA Pamphlet 80-0-01, "Federal Benefits for Veterans and Dependents," which can be obtained from most VA offices. Online information can be obtained from the national cemeteries web site www.cem.va.gov.

Military honors are not provided by the Department of Veterans Affairs. Families may request a funeral with military honors from local Department of Defense military bases or units. Additionally, Veterans service organizations or volunteer groups may help provide honors. ■

A Laughing Matter:

- The guy who invented the first wheel was an idiot. The guy who invented the other three, he was the genius. (Sid Caesar)
- Fortunately the wheel was invented before the car, otherwise the scraping noise would have been terrible. (Laurence J. Peter)
- My therapist told me the way to achieve true inner peace is to finish what I start. So far I've finished two bags of M&Ms and a chocolate cake. I feel better already. (Dave Barry) ■

Kerri Childress, Editor
 VISN 21
 3801 Miranda Avenue
 Palo Alto, CA 94304-1290
 www.visn21.med.va.gov

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Where to find us!

VA MEDICAL CENTER SAN FRANCISCO

**VA MEDICAL CENTER
 SAN FRANCISCO**
 4150 Clement Street
 San Francisco, CA 94121-1598
 (415) 221-4810

DOWNTOWN S.F. VA OPC
 401 3rd Street
 San Francisco, Calif., 94107
 (415) 551-7300

VA EUREKA OPC
 714 F Street
 Eureka, CA 95501
 (707) 442-5335

VA SAN BRUNO OPC
 1001 Sneath Lane
 San Bruno, Calif., 94066
 (650) 615-6000

VA SANTA ROSA OPC
 3315 Chanate Road
 Santa Rosa, CA 95404
 (707) 570-3855

VA UKIAH OPC
 630 Kings Court
 Ukiah, CA 95482
 (707) 468-7700

VA NORTHERN CALIFORNIA HEALTH CARE SYSTEM

**VA SACRAMENTO
 MEDICAL CENTER**
 10535 Hospital Way
 Mather, CA 95655
 (916) 843-7000

VA MARTINEZ OPC
 150 Muir Road
 Martinez, CA 94553
 (925) 372-2000

VA REDDING OPC
 351 Hartnell Avenue
 Redding, CA 96002
 (530) 226-7555

VA CHICO OPC
 280 Cohasset Road
 Chico, CA 95926
 (530) 879-5000

VA MCCLELLAN OPC
 5342 Dudley Boulevard
 McClellan Park, CA 95652-1074
 (916) 561-7400

VA MARE ISLAND OPC
 201 Walnut Avenue
 Mare Island, CA 94592
 (707) 562-8200

**OAKLAND MENTAL HEALTH
 AND SUBSTANCE ABUSE
 PROGRAM**
 Oakland Army Base
 2505 West 14th Street
 Oakland, CA 94607
 (510) 587-3400

VA OAKLAND OPC
 2221 Martin Luther King Jr. Way
 Oakland, CA 94612
 (510) 267-7800

VA FAIRFIELD OPC
 103 Bodin Circle, Bldg. 778
 Travis AFB, CA 94535
 (707) 437-1800

VA PALO ALTO HEALTH CARE SYSTEM

VA PALO ALTO DIVISION
 3801 Miranda Avenue
 Palo Alto, CA 94304-1290
 (650) 493-5000

VA MENLO PARK DIVISION
 795 Willow Road
 Menlo Park, CA 94025
 (650) 493-5000

VA LIVERMORE DIVISION
 4951 Arroyo Road
 Livermore, CA 94550
 (925) 373-4700

VA CAPITOLA OPC
 1350 N. 41st Street, Suite 102
 Capitola, CA 95010
 (831) 464-5519

VA STOCKTON OPC
 500 W. Hospital Road
 Stockton, CA 95231
 (209) 946-3400

VA MODESTO OPC
 1524 McHenry Blvd., Suite 315
 Modesto, CA 95350
 (209) 557-6200

VA MONTEREY OPC
 3401 Engineer Lane
 Seaside, CA 93955
 (831) 883-3800

VA SAN JOSE OPC
 80 Great Oaks Boulevard
 San Jose, CA 95119
 (408) 363-3011

VA SONORA OPC
 19747 Greenley Road
 Sonora, CA 95370
 (209) 588-2600

VA CENTRAL CALIFORNIA HEALTH CARE SYSTEM

**VA CENTRAL
 CALIFORNIA HEALTH
 CARE SYSTEM**
 2615 E. Clinton Avenue
 Fresno, CA 93703-2286
 (559) 225-6100

VA SOUTH VALLEY OPC
 1050 North Cherry Street
 Tulare, CA 93274
 (559) 684-8703

VA CASTLE OPC
 3605 Hospital Road, Suite D
 Atwater, CA 95301-5140
 (209) 381-0105

VA SIERRA NEVADA HEALTH CARE SYSTEM

**IOANNIS A. LOUGARIS VA
 MEDICAL CENTER**
 1000 Locust Street
 Reno, NV 89502-2597
 (775) 786-7200

VA LA HONTAN VALLEY OPC
 345 West A Street
 Fallon, NV 89406
 (775) 428-6161

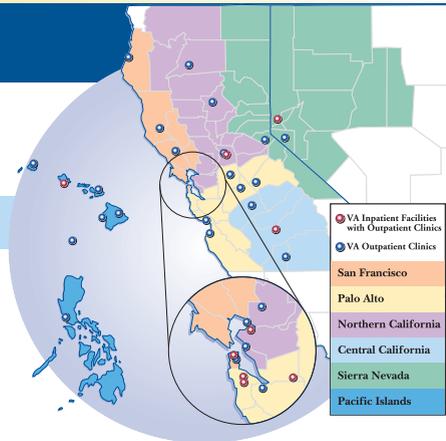
VA SIERRA FOOTHILLS OPC
 11985 Heritage Oak Place
 Suite #1
 Auburn, California 95603
 (530) 889-0872

VA CARSON VALLEY OPC
 925 Ironwood Drive, Suite 2102
 Minden, NV 89423
 (775) 786-7200 Ext. 4000

VA PACIFIC ISLANDS HEALTH CARE SYSTEM

**SPARK M. MATSUNAGA VA
 MEDICAL CENTER**
 459 Patterson Road
 Honolulu, HI 96819
 (808) 433-0600

**VA PTSD RESIDENTIAL
 REHABILITATION PROGRAM**
 459 Patterson Road
 Honolulu, HI 96819
 (808) 433-0004



VA MAUI OPC
 203 Ho'ohana Street, Suite 303
 Kahului, HI 96732
 (808) 871-2454

VA HILO OPC
 1285 Waiuanue Ave., Suite 211
 Hilo, HI 96720
 (808) 935-3781

VA KONA CBOC
 75-377 Hualalai Road
 Kailua-Kona, HI 96740
 (808) 329-0774

VA KAUAI OPC
 3-3367 Kuhio Hwy, Suite 200
 Lihue, HI 96766
 (808) 246-0497

VA GUAM CLINIC
 US Naval Hospital
 Wing E-200, Box 7608
 Agana Heights, GU 96919
 (671) 472-7250

VA AMERICAN SAMOA CBOC
 Fiatele Teo Army Reserve Building
 Pago Pago, American Samoa 96799
 (684) 699-3730

VA REGIONAL OFFICE & OUTPATIENT CENTER MANILA

United States Department of
 Veterans Affairs
 PSC 501
 FPO, AP 96515-1100
 (011) 632-523-6300