

Anthony Schoonover, Operation Iraq Freedom veteran

I served in the United States Air Force from July 2001 until July 2008 as a petroleum specialist. During my time on active duty, I was assigned to Ellsworth AFB, S.D; Osan AB, South Korea; and Kadena AB, Okinawa. I was deployed in 2003 in support of Operation Enduring Freedom, and again in 2007/2008 in support of Operation Iraqi Freedom. At every location I was assigned, I received dominant healthcare in the form of annual physical health, and dental assessments. Every individual assigned as my health care provider, flight physician, or dentist epitomized professionalism. However, the correlation between outstanding health care and dedicated professionals ceased post my service obligation.

In October of 2011, I began to experience debilitating back spasms. The muscles in my lower back were so contorted that they began to pull my spine straight; I was unable to walk. As a result, I missed a week of classes and work. I called the Veterans Affairs Clinic to schedule an appointment in an effort to remedy the issue that was affecting my life. The individual whom I spoke with became very condescending when I informed him I had not filed a service connected disability claim. He informed me there was little the clinic could do for me because I was not a registered "member" in the system. When I offered to bring my DD Form 214 as proof of my service connection, I was informed that it would take several days to verify my identity and that I would be better served to seek medical attention in the civilian sector.

Granted, at the time I attempted to schedule an appointment, I was inept in the workings of the Veterans Affairs Clinic. But, I could not help to revert to the conversation between the Transition Assistance Program representative and myself; I was told I would be afforded health care through Veterans Affairs for five years. I called the Veterans Affairs Claims office to verify the information I received prior to separating from active duty; they confirmed my assertion to the representative at the clinic.

I understand no system is perfect; however, it is difficult for me to conceptualize that the very system established for the selfless men and women of our great nation turned its back when I needed it most. The amount of debt incurred as a result of seeking civilian health care is astronomical when one considers the debt-to-income ratio of a full-time college student living on their own. I absolutely loathe the thought of a fellow Veteran enduring a similar experience; therefore, I offer the following solution:

As a work-study student employed by the Veterans Affairs Claims office, I am inundated with a great deal of DD Form 214's weekly. Many times, transitioning Veterans will arrive at the claims office to establish a file identifying service connected disabilities before their DD Form 214 arrives. In this case, once the 214 is received, it simply placed in their folder to identify their affiliation, service dates, rank, etc. But, there are those Veterans that never file a service connected disability claim and their DD Form 214 is placed in an alphabetized filing cabinet in the event it is needed for potential future claims.

Rather than file the DD Form 214's of the Veterans who have not filed a claim, I propose that these forms are entered into a centralized database that is accessible to every Veterans Affairs Office statewide. If every office were able to look at the same information, relative to a Veteran's DD Form 214, I believe it would provide greater accessibility to the phenomenal benefits out

there for Veterans. Not only would this database increase efficiency, but it would also provide a Veteran aspiring to further their education an opportunity to gain employment as a work study and offset the costs associated with university attendance.

Furthermore, a centralized database would undoubtedly improve working relationships between the separate entities within Veterans Affairs. Returning Veterans do not always remain in their identified home of record, resulting in their files having to be mailed to the respective office. If all of the Veteran's pertinent information were stored in a location that is easily accessible, there would be little opportunity for a Veterans file to be lost. I am confident that if there were such a database implemented into the Veterans Affairs system, the possibility of a Veteran being refused health care would be drastically reduced.

Thank you.

Respectfully,

Anthony Schoonover