



The Post 320 Service Officer Monthly

Veterans Benefits • VA Updates • Claim Tips • Legislative Watch
A Monthly Update for Veterans, Families, Advocates, And Post Members.

Page 1
Volume One
Issue Three
October 2026

This Month's Topics

Topic	Page
VA Vision Care May Include Eyeglasses	1
Post 320 Service Officers Support 'Be The One' During Suicide Prevention Month	1
Good News for Veterans Affected by the 1973 Records Fire: VA Streamlines Claims Process	2
Did You Know? Tricare for Life, Medicare Part B & CHAMPVA	3

VA Vision Care May Include Eyeglasses

Veterans enrolled in **VA health care** may receive routine eye exams and preventive vision care through VA. However, **routine eye care and VA-provided eyeglasses are two different benefits**. VA may provide prescription eyeglasses to Veterans who meet additional eligibility requirements. One common way to qualify is having a **compensable service-connected disability rated 10% or higher**. Other qualifying categories include certain former POWs, Purple Heart recipients, some Veterans receiving benefits under **38 U.S.C. §1151**, and Veterans whose vision problems are connected to another medical condition being treated by VA or to VA treatment.

There is also an important prescription rule: VA generally will **not fill an eyeglass prescription from a completely private, non-VA provider**. The prescription generally must come from a **VA eye-care provider or a VA-authorized Community Care eye-care provider**. Eligible Veterans may be able to receive optical services at the **Fredericksburg VA Health Care Center, 10432 Patriot Highway, Fredericksburg, VA 22408**. Veterans with a current qualifying prescription may be assisted as walk-ins when availability permits, so it is a good idea to check with the facility before making a special trip.

Know the Difference

- **VA Eye Exam:** Available through VA vision care for Veterans enrolled in VA health care.
- **VA Eyeglasses:** Require additional eligibility. A 10% or higher compensable service-connected rating is one common way to qualify.
- **Private Prescription:** A prescription from an independent private provider generally cannot simply be brought to VA and filled.
- **VA or VA-Authorized Community Care Prescription:** May be used for VA-provided eyewear when the Veteran also meets VA eyeglass eligibility requirements.
- **Bottom line:** If you are enrolled in VA health care, ask what vision benefits you qualify for before paying out of pocket. You may be eligible for both routine eye care and VA-provided eyeglasses.

Post 320 Service Officers Support "Be the One" During Suicide Prevention Month

On Thursday, September 3, 2026, American Legion Post 320 Service Officers participated in the Suicide Prevention Month Resource Fair at the Fredericksburg VA Health Care Center. The event brought together VA programs and community partners to connect Veterans with information, resources and support available throughout the Fredericksburg region. Post 320 Service Officers take The American Legion's Be the One initiative seriously. Be the One encourages Legionnaires and communities to help reduce Veteran suicide by reaching out, listening, connecting Veterans with resources and reminding them that they do not have to face difficult moments alone. Although Be the One is recognized on the first day of every month, its mission calls us to act every day—and the resource fair provided another meaningful opportunity to do so.

During the event, Post 320 Service Officers distributed informational trifold, the monthly Service Officer newsletter and Be the One cards. More importantly, they spoke directly with Veterans about available benefits, resources and assistance—and simply listened. Our presence also reminded Veterans that Service Officers are here not only to support members of Post 320, but also to serve the broader Veteran community throughout Spotsylvania and the surrounding areas. Veterans do not have to be members of The American Legion to ask questions or seek assistance. Sometimes being present, listening and helping a Veteran make the right connection is exactly what it means to Be the One.

You do not need every answer to Be the One—you only need the courage to ask, the patience to listen, and the compassion to stay.

Post 320 Service Officers: Margarida Figueroa, Loretta Gulley, and Angela Hall

"Advocacy begins by showing up, grows through listening, and matters when we turn veterans' voices into action."

Good News for Veterans Affected by the 1973 Records Fire: VA Streamlines Claims Process

For more than 50 years, the effects of one devastating fire have followed generations of Veterans trying to prove their military service and obtain the VA benefits they earned. Now, the Department of Veterans Affairs has announced changes intended to make that process easier.

In July 1973, a massive fire at the National Personnel Records Center (NPRC) near St. Louis destroyed an estimated 16 to 18 million military personnel records. The loss primarily affected Army Veterans discharged between 1912 and 1960 and certain Air Force Veterans discharged between 1947 and 1964 whose last names began with Hubbard through Z. For affected Veterans, the loss of those records was not simply a historical event. Important personnel and medical records that could help establish military service, injuries, illnesses, treatment, assignments, or other events needed for a VA disability claim were gone.

What Has Changed? When military records are believed to have been destroyed in the NPRC fire, VA may attempt to reconstruct the Veteran's service information using alternative sources such as morning reports, hospital admission records, Surgeon General's Office records, unit information, and other historical documents.

Veterans may be asked to complete:

- NA Form 13055 – Request for Information Needed to Reconstruct Medical Data
- NA Form 13075 – Questionnaire About Military Service

In the past, some Veterans were asked to complete these forms more than once because previously submitted information was not always readily visible to each claims processor working the case. VA has now implemented a more streamlined process.

Under the new procedure:

- **One comprehensive packet will be provided:** Veterans will receive the necessary forms together at the beginning of the development process.
- **Previously submitted information can be reused:** Once completed, the information will remain available for future development of the claim rather than routinely requiring the Veteran to provide the same information again.
- **Duplicate requests should be reduced:** If VA already has the required forms, the Veteran generally should not be asked to complete them again unless the NPRC determines that additional or different information is necessary.
- **VA employees will have better access to fire-related information:** The information is being organized so claims processors can more easily identify records and forms already associated with the Veteran's claim.

Missing Records Do Not Automatically Mean a Claim Cannot Be Granted: This may be one of the most important messages for Veterans affected by the fire - Do not assume that missing military records mean you cannot file or establish a VA claim. When records are known or reasonably believed to have been lost in the NPRC fire, VA can consider other credible evidence. Depending on the circumstances, that may include statements from the Veteran, fellow service members, family members, or others who have knowledge of what occurred. Other evidence may also help reconstruct the Veteran's story, such as private medical records, letters written during service, photographs, employment or insurance examinations, pharmacy records, unit information, and other documentation.

Previously Denied Because Your Records Couldn't Be Found? Do not automatically assume that the answer is still "no." VA specifically encourages Veterans who believe their records were affected by the 1973 fire—including Veterans who may have previously been denied benefits because records could not be located—to consider filing or pursuing their claim. A prior denial does not necessarily determine what should happen today. The appropriate review option will depend on the Veteran's individual circumstances and prior VA decision.

The Bottom Line

For Veterans whose military records were lost through no action of their own, repeatedly being asked to recreate information from decades ago added another burden to an already difficult claims process. VA's new procedure is intended to reduce repeated paperwork, make fire-related information easier for claims processors to locate, and create a more consistent process for affected Veterans. If you believe your military records may have been affected by the 1973 National Personnel Records Center fire, do not let missing records alone stop you from asking about VA benefits. Talk with an accredited Service Officer before deciding that there is nothing that can be done (*Source: VA.News/ August 24, 2026*).

"Your records may have been lost. Your service was not."



TRICARE + MEDICARE PART B

IMPORTANT INFORMATION FOR MILITARY RETIREES & THEIR FAMILIES



WHO THIS AFFECTS:

Military retirees and eligible family members who are eligible for Medicare.



THE SIMPLE RULE:

If you have Medicare Part A (premium-free), you generally must have Medicare Part B to keep your TRICARE coverage.



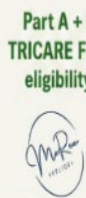
WHY IT MATTERS:

Not having Part B when you're required to have it could cause you to lose TRICARE coverage and may result in a late enrollment penalty with Medicare.



UNDER AGE 65?

Some people become Medicare-eligible before 65 due to disability or certain medical conditions. Rules can still apply.



Part A + Part B = TRICARE For Life (TFL) eligibility for most.



ACTIVE-DUTY FAMILIES:

Different rules may apply. You may be able to delay Part B while your sponsor is on active duty. Timing is important!

HOW TRICARE FOR LIFE WORKS:

1

MEDICARE PAYS FIRST

2

TRICARE PAYS SECOND

For services covered by both, TRICARE may pay some or all of the costs Medicare leaves behind.



IMPORTANT!

Don't cancel or decline Medicare Part B before speaking with TRICARE. Verify how it affects YOUR specific coverage.



NEED HELP?

TRICARE / DEERS: 800-538-9552
Medicare: 1-800-633-4227



OFFICIAL WEBSITES:

tricare.mil/TFL | tricare.mil/Plans/Eligibility/MedicareEligible
medicare.gov | ssa.gov/medicare

Medicare has **four main parts**, and the easiest way to remember them is:

Part A = Hospital | Part B = Medical | Part C = Medicare Advantage | Part D = Prescription Drugs

CHAMPVA and Medicare: A CHAMPVA beneficiary who becomes eligible for Medicare Part A generally must also obtain and maintain Medicare Part B to keep CHAMPVA eligibility. Limited exceptions may apply.

Here's a breakdown:

Medicare Part	What It Covers
Part A – Hospital Insurance	Inpatient hospital stays, skilled nursing facility care, hospice care, and some home health care. Many people qualify for Part A without a monthly premium based on their or their spouse's work history.
Part B – Medical Insurance	Doctor visits, outpatient care, preventive services, medical equipment, lab work, some home health care, and other medically necessary services. Part B normally has a monthly premium.
Part C – Medicare Advantage	A private insurance alternative to Original Medicare. It combines Parts A and B , and many plans also include Part D prescription coverage plus extras such as dental, vision, or hearing benefits.
Part D – Prescription Drug Coverage	Helps pay for outpatient prescription medications. Coverage is provided through private Medicare-approved plans.

Did You Know? TRICARE For Life, Medicare Part B & CHAMPVA

Military retirees and eligible family members who become entitled to **Medicare Part A** generally must also have **Medicare Part B** to keep their TRICARE coverage. For most Medicare-eligible retired service members and eligible family members, having both Medicare Parts A and B means they are automatically covered by **TRICARE For Life (TFL)**. With TRICARE For Life, **Medicare generally pays first and TRICARE pays second** for services covered by both programs.

Depending on the service, TRICARE may pay some or all of the remaining Medicare cost-sharing amount. This is important because Medicare eligibility does not always begin at age 65. Some people become Medicare-eligible earlier because of disability or certain medical conditions. When that occurs, the Medicare Part B requirement may apply even though the beneficiary is younger than 65. Retirees and family members should be especially careful about **declining, delaying, or canceling Medicare Part B**. If Part B is required for your TRICARE eligibility, losing Part B can also mean losing your TRICARE coverage, and enrolling later may result in a Medicare late-enrollment penalty.

- **TRICARE / TRICARE For Life:** TRICARE is the Department of Defense health care program. Military retirees and their eligible family members may qualify for TRICARE. When a TRICARE-eligible retiree or family member becomes entitled to Medicare Part A and has Medicare Part B, **TRICARE For Life** generally becomes their Medicare-wraparound coverage.
- **CHAMPVA:** CHAMPVA is a Department of Veterans Affairs health benefit generally available to certain **spouses, dependent children, survivors, and some qualifying caregivers**. One common eligibility category is the spouse or dependent child of a Veteran whom VA has rated **permanently and totally disabled because of a service-connected disability**. Certain surviving spouses and children may also qualify. A person who is eligible for TRICARE generally **cannot also receive CHAMPVA**.

- **VA Health Care:** VA health care primarily provides medical care directly to **eligible Veterans** through the Department of Veterans Affairs health care system. Eligibility is based on factors such as military service, discharge status, disability rating, toxic-exposure eligibility, income, and other qualifying circumstances. A Veteran may be eligible for VA health care even if the Veteran also has Medicare, TRICARE, or private insurance.

Because every family's situation is different, do not decline or cancel Medicare Part B based only on what someone else was told. Verify how the decision will affect your specific TRICARE or CHAMPVA eligibility before making a change. Need Help? TRICARE/DEERS: 800-538-9552 / Medicare: 1-800-MEDICARE (1-800-633-4227).