

Chapter 6

Veterans' Benefits

Michael L. Shea, Esq.
The Law Offices of Michael L. Shea, LLC

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A variety of benefits provided by the U.S. Department of Veterans Affairs (VA) are available to eligible veterans and their families. This chapter focuses on benefits most likely to be of interest to older veterans and their families.

6-1. Home Loans

Upon leaving military service, an honorably discharged veteran (Honorable, Under Honorable Conditions, General discharge) is entitled to apply for a Certificate of Eligibility for a VA Home Loan. The advantages of this type of loan are:

- ▶ No down payment (although some lenders *may* require a down payment for some buyers using the program);
- ▶ Competitively low interest rates;
- ▶ Limited closing costs; and
- ▶ No need for Private Mortgage Insurance (PMI).

This is a lifetime benefit and can be used multiple times.

The VA also has a number of homes for sale that have been reacquired by it, due to default on the original VA guaranteed loan. These homes are located around the country and are often reasonably priced for the area.

The surviving spouse of a deceased veteran, who had a VA Home Loan, may also be able to use this benefit if there is still eligibility. If the loan had been paid off and the surviving spouse wants to sell his or her existing home and purchase another home that better suits his or her needs, he or she may be able to use the Certificate of Eligibility for the new home.

6-2. Disability Compensation

Disability compensation is a monetary benefit paid to veterans who are disabled by injury or disease incurred or aggravated during active military service. The service of the veteran must have been terminated through separation or discharge under conditions other than dishonorable. This means that the service member must have an Honorable, Under Honorable Conditions, or General discharge. Disability compensation varies with the degree of disability and the number of dependents and is paid monthly. The benefits are not subject to federal or state income tax. The payment of military retirement pay, disability severance pay, and separation incentive payments known as SSB (special separation benefits) and VSI (voluntary separation incentives) also affects the amount of VA compensation paid. If you received separation pay, that amount will be deducted from any compensation benefits. If you are retired from the military, you will be paid the higher of your military retirement benefit or the VA compensation. If your VA disability rating is 50 percent or higher, you will be paid both your military retirement and your VA disability compensation.

Former prisoners of war (POW) are eligible for disability compensation if they are rated at least 10 percent disabled from certain conditions presumed by federal law to be related to the POW experience. Former POWs who were imprisoned for at least 30 days are also eligible by federal law for certain presumptive conditions.

Veterans who served on the ground in the Republic of Vietnam or who served on certain Navy ships during the Vietnam War are entitled to a presumption for certain illnesses due to exposure to Agent Orange. There are a number of illnesses that are presumptive, meaning that you do not have to show a connection between your military service and the current illness. Three of the major illnesses associated with Agent Orange today are ischemic heart disease, diabetes, and prostate cancer. However, the VA periodically adds new illnesses to the list of presumptions. Recent additions are Parkinson's disease, Parkinsonism, and prostate cancer.

Recent changes in federal law have expanded the groups eligible for presumptive conditions.

Blue Water Navy

Veterans who had “boots on the ground” in Vietnam during the Vietnam War were automatically presumed to be exposed to Agent Orange, and if they had any of the named illnesses (cancer, diabetes, heart disease, etc.), they were considered to be service connected and they received compensation appropriate to the level of symptoms. Some veterans who served aboard Navy ships were denied compensation for those same illnesses because they did not have “boots on the ground.” In 2019, Congress passed the Blue Water Navy Vietnam Veterans Act of 2019, which extended the presumption of herbicide exposure to those who served in the offshore waters of Vietnam between January 9, 1962, and May 7, 1975. Navy and Marine Corps veterans who served aboard named ships during that period and who were denied service connection for Agent Orange diseases should reapply. A list of qualifying ships can be found on the VA website, www.va.gov.

Certain members of the Air National Guard who flew on C-123 aircraft that were involved in the carrying and dissemination of Agent Orange are now covered.

Camp Lejeune Justice Act of 2022

The water at Camp Lejeune, NC was contaminated with toxic chemicals: trichloroethylene, benzene, vinyl chloride, and tetrachloroethylene. Navy and Marine Corps members and their families who were stationed at Camp Lejeune or Marine Corps Air Station New River were exposed to these chemicals and some developed certain cancers and other health issues as a result. The Act allows those veterans and their families to file tort actions against the government. These actions are handled by private attorneys, and it is advised to seek out veteran service organizations (VFW, American Legions, Disabled American Veterans, etc.) or contact a county Veteran Services Officer for advice. However, if the veteran has one of the listed diseases, he or she should file a claim for compensation with the VA.

The surviving spouse of a veteran who served at Camp Lejeune for more than 30 days may apply for Dependency and Indemnity Compensation if the veteran died of one of the illnesses listed in the Act, regardless of when the veteran died.

PACT Act (Promise to Address Comprehensive Toxics Act)

Due to the Congressional focus on toxic substances (and veteran pressure), the President signed the PACT Act in 2021. This Act expands health care benefits to veterans of Vietnam, the Gulf War, and subsequent wars in Iraq and Afghanistan.

Veterans, especially those Army National Guard and Air National Guard, who served in the Gulf War, Iraq, and Afghanistan are now of the age to take advantage of the information here. The exposure to burn pits, dust, and other environmental hazards, and the subsequent diseases that occurred, now provide these veterans with a path to file for compensation. There are 23 specific diseases covered by the PACT Act. For Gulf War veterans, the most critical diseases/illnesses are respiratory cancers and respiratory conditions (such as sleep apnea).

Increased Ratings for Current Disabilities

Veterans who are currently receiving compensation for service-connected injuries or illnesses should be aware that they are entitled to apply for an increase in their rating if the

symptoms get worse. For example, the rating and payment for a Vietnam veteran who has diabetes and a spouse and can manage the diabetes by diet alone is 10 percent and \$171.23 (2024 rates). If the veteran's diabetic symptoms increase so that he or she is now required to have one or more daily insulin injections, a restricted diet, and a regulation of activities, the rating is now 40 percent with a monthly payment of \$838.28.

Total Disability, Individually Unemployable

If a veteran has a VA disability rating of 70 percent or higher, and the veteran cannot maintain a steady job, the VA has a category called TDIU. If the veteran has a total disability rating of 60 percent and at least one of the ratings is 40 percent or more, or a single disability rating of 70 percent, the VA may approve TDIU. This would allow the veteran to receive compensation at the 100 percent rate, even though he or she is only service connected at the 60 or 70 percent rate. There is a separate application process, which usually needs to be accompanied by a doctor's opinion that the veteran cannot maintain "substantial gainful employment" due to the disabilities. An example would be a veteran who is rated at 70 percent for PTSD and cannot have a good relationship with employers or fellow employees, cannot maintain concentration on a computer for more than a few moments, and cannot sit in one place or stand in one place for more than a few minutes. The same would apply to a veteran with a serious service-connected back injury who cannot lift more than a few pounds, cannot stand or sit for more than a few minutes, etc.

Appeals Improvement and Modernization Act (AMA)

Veterans whose claims have been previously denied by the VA now have additional options for appealing those denials. The Appeals Improvement and Modernization Act of 2017 modified the VA's entire appeals process. It now allows a veteran who has been denied service connection to continue to file appeals long after the regional office or Board of Veterans Appeals has denied the claim. A claim may now be reopened by use of a Supplemental Claim form with the addition of "new and material" evidence. An example would be a doctor's opinion that the symptoms are worse, or that new medical evidence shows the relationship between military service and the disease/injury. An Air Force fighter pilot with back problems may reopen a previously denied claim by showing the relationship between high G forces and the back problems.

The Specially Adapted Housing (SAH) Grants help veterans with certain service-connected disabilities to adapt or purchase a home to accommodate the disability. You can use SAH grants in one of the following ways:

- ▶ To adapt an existing home the veteran or a family member already owns in which the veteran lives; or
- ▶ To adapt a home the veteran or family member intends to purchase in which the veteran will live.

Under this entitlement, a Temporary Residence Adaptation grant (TRA) may be available to veterans who are or will be temporarily residing in a home owned by a family member. Any veteran who is entitled to receive compensation for a service-connected disability for which he or she uses prosthetic or orthopedic appliances may receive an annual clothing allowance. The allowance also is available to any veteran whose service-connected skin condition requires prescribed medication that irreparably damages the veteran's outer garments.

Severely disabled veterans who are entitled to a SAH grant may also be entitled to receive a grant to purchase a vehicle and the adaptive equipment needed so the veteran can access and utilize the vehicle.

Veterans whose service-connected disabilities are rated at 30 percent or more are entitled to additional allowances for dependents. The number of dependents and the degree of disability determines the additional amount.

A veteran who is determined by the VA to need the regular aid and attendance of another person, or a veteran who is permanently housebound, may be entitled to additional disability compensation or pension benefits. A veteran evaluated at 30 percent or more disabled is entitled to receive a special allowance for a spouse who needs the aid and attendance of another person.

6-3. Pension Benefits

Veterans with low income who are permanently and totally disabled, or are age 65 and older, may be eligible for monetary support if they have 90 days or more of active military service, at least one day of which was during a period of war. Veterans who entered active duty on or after September 8, 1980, or officers who entered active duty on or after October 16, 1981, may have to meet a longer minimum period of active duty, usually 24 months of active duty.

Requirements for eligibility to receive pension benefits include a discharge from active duty under conditions other than dishonorable. Permanent and total disability cannot be because of the veteran's own willful misconduct, such as lung cancer from smoking. Payments are made to qualified veterans to bring their total income, including other retirement or Social Security income, to a level set by Congress. Unreimbursed medical expenses may reduce countable income.

This benefit may be of substantial help to children with a non-service-connected disabled veteran parent. For example, a veteran father, with no spouse, has total income less medical expenses of zero. The father resides in an assisted living facility and needs the aid and attendance of another person. The expenses of the facility, plus doctor, nurse, and medication expenses qualify as deductions against the veteran's income. The children support the father's expenses of the care facility. The father may qualify for VA pension, which in 2024 is \$27,609. This can certainly offset the amounts paid by the children for their father's care. If the veteran is married, the amount went up to \$32,729 in 2024. Given that nursing home care in Colorado is approximately \$100,000 per year, this benefit is not trivial.

The VA has set certain net worth and income limits to be eligible for a VA pension. In 2023, assets plus income have to be less than \$155,356, but unreimbursed medical expenses may reduce the income.

Like Medicare, the VA has now established a look-back period for the disposal of assets. It is advised to contact a Veterans Service Organization, a county Veteran Services Officer, or an accredited attorney or representative for advice on applying for a VA pension.

6-4. Survivor Benefits

Dependency and indemnity compensation (DIC) is a monthly tax-free benefit that may be available to a veteran's survivor. For survivors to be eligible, the deceased veteran must have died from (1) a disease or injury incurred or aggravated while on active duty or active duty for

training; (2) an injury incurred or aggravated in the line of duty while on inactive duty training; or (3) a disability compensable by the VA. Death cannot be the result of the veteran's willful misconduct. To be eligible, the surviving spouse must have been married to the veteran at the time of death, and for a period of one year prior to death.

DIC also may be authorized for survivors of veterans who, at the time of death, were determined to be totally disabled as a result of military service, even though their service-connected disabilities did not cause their deaths. The veteran must have been discharged under conditions other than dishonorable. The survivor qualifies if (1) the veteran was continuously rated totally disabled for a period of 10 or more years immediately preceding death; (2) the veteran was so rated for a period of at least five years from the date of military discharge; or (3) the veteran was a former POW who died after September 30, 1999, and who was continuously rated totally disabled for a period of at least one year immediately preceding death. Payments are subject to offset by any amount received from judicial proceedings brought on account of the veteran's death. The amount of DIC is not the same as the amount of compensation the veteran was receiving at the time of his or her death. In 2024, the amount paid to the surviving spouse is \$1,612.75 per month, or approximately what a veteran with a 60 percent disability rating and a spouse and one child was receiving at the time of death.

A survivor's pension is paid to a surviving spouse of a veteran who met the active-duty criteria if the surviving spouse meets the income criteria set by law. Some medical expenses can reduce the income of the surviving spouse. The surviving spouse pension is not the same as the pension received by a veteran. In 2024, a surviving spouse with no dependent children who does not qualify for Aid and Attendance, and whose income for VA purposes was \$0, is entitled to receive an annual pension of \$11,102 or \$925.17 per month.

There are additional amounts if there are dependent children, such as children with special needs.

6-5. Health Care Benefits

The VA operates the nation's largest integrated health care system, with more than 1,700 sites of care, including hospitals, community clinics, nursing homes, domiciliaries, readjustment counseling centers, and various other facilities. For additional information on VA health care, visit www.va.gov/health-care/.

The VA assigns those eligible for VA health care into priority groups. Those groups are determined by the rating level for service-connected disabilities. Those without service-connected disabilities may have to pay some co-pays, but the co-pays are minimal, compared to outside insurance. For example, in 2024, the co-pay for a visit to a VA primary care doctor is \$15 per visit.

Additionally, by being in the VA health care system, the veteran may eliminate the need for a Medicare supplemental policy.

Veterans will be assigned to the highest priority group for which they qualify. The VA uses the priority group system to balance demand with available resources. Changes in the VA's available resources may reduce the number of priority groups the VA can enroll. If this occurs, the VA will publicize the changes and notify affected enrollees. Veterans will be enrolled to the extent that congressional appropriations allow. If appropriations are limited, enrollment will occur based on the following priorities:

Priority Group 1: Veterans with service-connected disabilities rated 50 percent or more and veterans determined by the VA to be unemployable due to service-connected conditions.

Priority Group 2: Veterans with service-connected disabilities rated 30 or 40 percent.

Priority Group 3: Veterans with service-connected disabilities rated 10 and 20 percent, veterans who are former POWs or were awarded a Purple Heart, veterans awarded special eligibility for disabilities incurred in treatment or participation in a VA vocational rehabilitation program, veterans whose discharge was for a disability incurred or aggravated in the line of duty, and veterans awarded the Medal of Honor.

Priority Group 4: Veterans receiving aid and attendance or house-bound benefits and veterans determined by the VA to be catastrophically disabled. Some veterans in this group may be responsible for co-payments.

Priority Group 5: Veterans receiving VA pension benefits or eligible for Medicaid programs, and non-service-connected veterans and non-compensable, zero percent, service-connected veterans whose annual income and net worth are below the established VA means test thresholds.

Priority Group 6: Compensable, zero percent, service-connected veterans; veterans exposed to ionizing radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki; Project 112/SHAD participants; veterans who served in the Republic of Vietnam between January 9, 1962, and May 7, 1975; veterans of the Persian Gulf War who served between August 2, 1990, and November 11, 1998; veterans who served on active duty at Camp Lejeune for at least 30 days between August 1, 1953, and December 31, 1987; and veterans who served in a theater of combat operations after November 11, 1998, as follows:

- ▶ Currently enrolled veterans and new enrollees who were discharged from active duty on or after January 28, 2003, are eligible for the enhanced benefits for five years post discharge.

Priority Group 7: Veterans with gross household income below the geographically adjusted income limits (GMT) for their resident location and who agree to pay copays.

Priority Group 8: All other non-service-connected veterans and non-compensable, zero percent, service-connected veterans who agree to pay co-payments. (*Note:* Effective January 17, 2003, the VA no longer enrolls new veterans in Priority Group 8.) It is best if you apply for disability compensation prior to attempting to enroll in the VA health care system if you are not currently service connected for a disease or injury.

Veterans enrolling in Priority Group 5 based on their inability to defray the cost of care must provide information on their annual household income and net worth so the VA may determine whether they are below the annually adjusted "means test" financial threshold. Veterans completing a financial assessment must report their annual gross household income plus net worth, which includes Social Security, U.S. Civil Service retirement, U.S. Railroad retirement, military retirement, unemployment insurance, any other retirement income, total

wages from all employers, interest and dividends, workers' compensation, black lung benefits, and any other gross income for the calendar year prior to application for care. Also considered are assets such as the market value of property that is not the primary residence, stocks, bonds, notes, individual retirement accounts, bank deposits, savings accounts, and cash. The VA also is required to compare veterans' financial assessment information with a geographically based income threshold. If the veteran's income is below the threshold where the veteran lives, he or she is eligible for an 80 percent reduction in the inpatient co-payment rates.

Non-service-connected veterans and non-compensable, zero percent, service-connected veterans whose income is above the national "means test" threshold must agree to pay appropriate co-payments for care. If they do not agree to make co-payments, they are ineligible for VA care. Veterans whose income is determined to be above the means test threshold and below the VA's geographically based income threshold are responsible for paying 20 percent of the Medicare deductible for the first 90 days of inpatient hospital care during any 365-day period.

With certain exceptions, a veteran must agree to pay co-payments for extended care. A veteran's application for extended care services (VAF 10-10EC) requires financial information used to determine the monthly co-payment amount, based on each veteran's financial situation.

Prosthetic and Sensory Aid Services

The VA will furnish needed prosthetic appliances, equipment, and devices, such as artificial limbs, orthopedic braces and shoes, wheelchairs, crutches and canes, and other durable medical equipment and supplies to veterans receiving VA care for any condition. The VA will provide hearing aids and eyeglasses to veterans who receive increased pension based on the need for regular aid and attendance or being permanently housebound, receive compensation for a service-connected disability, or are former POWs. Otherwise, hearing aids and eyeglasses will be provided only in special circumstances, and not for normally occurring hearing or vision loss. Noise exposure is the defining criteria. Veterans who worked in engine rooms, on flight decks, in the motor pool, or were aviators or flight crew and have hearing loss or tinnitus may have a service-connected disability with at least a 10 percent rating.

6-6. Services and Aids for Blind Veterans

Blind veterans may be eligible for services at a VA medical center or for admission to a VA blind rehabilitation center. Services are available at all VA medical facilities through the Visual Impairment Services coordinator. In addition, blind veterans enrolled in the VA health care system may receive VA aids for the blind, including:

- 1) A total health and benefits review;
- 2) Adjustment to blindness training;
- 3) Home improvements and structural alterations to homes;
- 4) Specially adapted housing and adaptations;
- 5) Automobile grants;
- 6) Low-vision aids and training in their use;
- 7) Electronic and mechanical aids for the blind, including adaptive computers and computer-assisted devices such as reading machines and electronic travel aids;

- 8) Guide dogs, including the expense of training the veteran to use the dog; and
- 9) Talking books, tapes, and Braille literature.

6-7. Home Improvements

VA provides funding for eligible veterans to make home improvements necessary for the continuation of treatment or for disability access to the home and essential lavatory and sanitary facilities provided. See section 6-2, above.

6-8. Outpatient Dental Treatment

Outpatient dental treatment provided by VA includes examinations and the full spectrum of diagnostic, surgical, restorative, and preventive procedures. Veterans eligible to receive dental care include:

- 1) Veterans having service-connected and compensable dental disabilities or conditions;
- 2) Former POWs;
- 3) Veterans with service-connected, non-compensable dental conditions as a result of combat wounds or service injuries;
- 4) Veterans with non-service-connected dental conditions determined by VA to be aggravating a service-connected medical problem;
- 5) Veterans having service-connected conditions rated as permanently and totally disabling or rated 100 percent by reason of individual unemployability;
- 6) Veterans participating in a vocational rehabilitation program under Chapter 31 of Title 38 in the U.S. Code;
- 7) Certain enrolled homeless veterans participating in specific health care programs;
- 8) Veterans with non-service-connected dental conditions for which treatment began while the veteran was an inpatient in a VA facility when it is necessary to complete such treatment on an outpatient basis; and
- 9) Veterans requiring treatment for dental conditions clinically determined to be complicating a medical condition currently under treatment.

Recently discharged veterans who served on active duty 90 days or more and who apply for VA dental care within 180 days of separation from active duty may receive a one-time treatment for dental conditions if the veteran's certificate of discharge does not indicate that the veteran received necessary dental care within a 90-day period prior to discharge or release.

6-9. Outpatient Pharmacy Services

While many veterans are exempt from medication co-pays, non-service-connected veterans in Priority Groups 7 and 8 and veterans enrolled in Priority Groups 2 through 6 will be responsible for a small co-pay. Veterans may have their prescriptions delivered to the pharmacy at the VA hospital in Denver or may have them delivered by mail through Express Scripts.

6-10. Nursing Home Care

The VA provides nursing home services through three national programs: VA owned and operated nursing homes, state veterans' homes owned and operated by the state, and contract community nursing homes. Each program has its own admission and eligibility criteria. VA owned and operated homes typically admit residents requiring short-term skilled care, or who have a 70 percent or more service-connected disability, or who require nursing home care because of a service-connected disability. The state veterans' home program is a cooperative venture between the VA and states whereby the VA provides funds to help build the home and pays a portion of the costs for veterans eligible for VA health care. States, however, set eligibility criteria for admission. The contract nursing home program is designed to meet the long-term, nursing home care needs of veterans who may not be eligible and/or qualify for placement in a VA or state veterans' home or if there is no VA or state home available.

To be placed in a nursing home, veterans must be medically stable, have a condition that requires inpatient nursing home care, and be assessed by an appropriate medical provider to be in need of institutional nursing home care. They also must meet the eligibility requirements for the home to which they are applying. For VA nursing homes, they may have to pay a co-payment depending on their financial status. VA social workers can help interpret eligibility and co-payment requirements.

In addition to nursing home care, the VA offers other extended care services either directly or by contracting with community agencies, including adult day care, respite care, geriatric evaluation and management, hospice and palliative care, and home-based primary care. These services may require co-payment.

6-11. Domiciliary Care

Domiciliary care provides rehabilitative and long-term health maintenance care for veterans who require minimal medical care but do not need the skilled nursing services provided in nursing homes. The VA may provide domiciliary care to veterans whose annual income does not exceed the maximum annual rate of VA pension or to veterans the Secretary of Veterans Affairs determines have no adequate means of support. The co-payments for extended care services apply to domiciliary care.

6-12. Medical Care for Dependents and Survivors

CHAMPVA, the Civilian Health and Medical Program of the Department of Veterans Affairs, provides reimbursement for most medical expenses: inpatient, outpatient, mental health, prescription medication, skilled nursing care, and durable medical equipment. To be eligible for CHAMPVA, an individual cannot be eligible for TRICARE (the medical program for civilian dependents, provided by the Department of Defense) and must be one of the following: (1) the spouse or child of a veteran who the VA has rated permanently and totally disabled for a service-connected disability; (2) the surviving spouse or child of a veteran who died from a VA-rated service-connected disability, or who, at the time of death, was rated permanently and totally disabled; or (3) the surviving spouse or child of a military member who died in the line of duty, not due to misconduct (however, in most cases, these family members are eligible for TRICARE, not CHAMPVA).

A surviving spouse under age 55 who remarries loses CHAMPVA eligibility on midnight of the date of remarriage. However, eligibility may be re-established if the remarriage is terminated by death, divorce, or annulment, effective the first day of the month after the termination of the remarriage or December 1, 1999, whichever date is later. A CHAMPVA-eligible surviving spouse who is 55 or older does not lose eligibility upon remarriage.

Individuals who have Medicare entitlement may also have CHAMPVA eligibility secondary to Medicare. Eligibility limitations apply.

6-13. Burial Benefits

Veterans discharged from active duty under conditions other than dishonorable and service members who die while on active duty, as well as spouses and dependent children of veterans and active-duty service members, may be eligible for VA burial and memorial benefits. The veteran does not have to predecease a spouse or dependent child for them to be eligible for benefits.

With certain exceptions, active-duty service beginning after September 7, 1980, as an enlisted person, and after October 16, 1981, as an officer, must be for a minimum of 24 consecutive months or the full period of active duty (as in the case of reservists or National Guard members called to active duty for a limited duration). Eligibility is not established by active duty for training in the reserves or National Guard.

Reservists and National Guard members, as well as their spouses and dependent children, are eligible if they were entitled to retirement pay at the time of death or would have been if they were over age 60.

Burial in a VA national cemetery is available for eligible veterans and their spouses and dependents at no cost to the family, and includes the gravesite, grave liner, opening and closing of the grave, a headstone or marker, and perpetual care as part of a national shrine. For veterans, benefits also include a burial flag (with a case, for active-duty veterans) and military funeral honors. Family members and other loved ones of deceased veterans may request Presidential Memorial Certificates.

The VA operates 155 national cemeteries in 42 states and Puerto Rico, as well as 34 soldiers' lots and monument sites, of which 77 are open for new interments (casket and cremation) and 17 accept only cremated remains (data from 2023). Burial options are limited to those available at a specific cemetery but may include an in-ground casket, or interment of cremated remains in a columbarium, in the ground, or in a scatter garden. Surviving spouses of veterans who died on or after January 1, 2000, do not lose eligibility for burial in a national cemetery if they remarry. Burial of dependent children is limited to unmarried children under 21 years of age, or under 23 years of age if a full-time student at an approved educational institution. Unmarried adult children who become physically or mentally disabled and incapable of self-support before age 21, or age 23 if a full-time student, also are eligible for burial.

Veterans may apply for a pre-need eligibility decision letter. This can ease the burden on the family at the time of the veteran's death, if the veteran wanted to be buried in a national cemetery.

Burial in a non-VA cemetery may entitle the surviving spouse a monetary benefit for out-of-pocket costs. In many cases, the funeral home may be able to assist with the burial and VA application.

6-14. Miscellaneous Benefits

The State of Colorado (and many other states) provides a variety of benefits to veterans that are outside of the VA.

- 1) Property tax exemption. There is a property tax exemption of 50 percent of the first \$200,000 of a home's value for 100 percent permanently and totally disabled service-connected veterans. This exemption is also allowed to seniors 65 and over if they have lived in the home for more than 10 years.
- 2) Colorado has five state veterans' homes, in Aurora, Florence, Homelake, Rifle, and Walsenburg. Veterans' homes are now called veterans community living centers (VCLCs). VCLCs serve honorably discharged veterans, spouses of veterans, and "gold star" parents, who are the parents of veterans who died while serving in the military. VA regulations require that at least 75 percent of the residents at each state home be veterans. The VA pays the VCLCs a per diem rate for eligible veteran residents, starting at \$127.17 (2023 rates) for nursing home care. Veterans with a service-connected disability of 70 percent or higher, or those who meet certain less common eligibility standards, are eligible for a higher per diem rate of \$506.73 at the Fitzsimons VCLC or \$518.38 at the other facilities. The above rates are provided for comparison purposes only and may be higher or lower at the time of publication.
- 3) Veterans who are rated as totally and permanent disabled may be eligible to fly Space A on military aircraft. This may mean a savings of \$1,200 on a round-trip to Hawaii. Military retirees have the same benefit.
- 4) One year of qualifying service entitles a non-U.S. veteran to apply for citizenship.
- 5) Colorado offers free hunting and fishing licenses to veterans rated at 50 percent or higher.

For more general information on veteran's benefits see Appendix A: Resources, Chapter 6.