Veteran & Service Members

Prevention and Connection to Care

Amber McCoy Oklahoma Army National Guard Alcohol & Drug Control Officer

Kellen Brooks Oklahoma Army National Guard Suicide Prevention Program Manager

VA Access

- Not all Service Members of the military components are awarded VA benefits
- In order to receive VA benefits a Service Member must complete an active duty mission that is 180 days or more or served for 20+ years to be considered a Veteran.
- To determine "veteran" status the VA uses the DD214 (Active Duty release form)
- If the discharge is DISHONORABLE the Veteran will NOT qualify for VA benefits
 - <u>to apply for healthcare or determine your eligibility</u> <u>for VA healthcare 405-456-1000</u>

Active vs National Guard Service Members

- National Guard Service Members pay for medical treatments, to include substance abuse and mental health, out of pocket, unless insurance is available.
- National Guard Service Members are not mandated to carry medical insurance but Tricare Reserve Select is an option for them
- National Guard Service Members pay for Tricare Reserve Select out of their pocket whereas Active Service Members it is free.
- Active Duty Service Members receive medical care, to include substance abuse and mental health, on their active duty installation/base. This is a free service to Active Duty personnel.
- Active Duty Service Members are also enrolled in Tricare Prime

Service Member vs. Veteran

- Service Member: a person serving in the armed forces.
 - Often service members feel that they should not have a substance abuse or mental health issue due to not seeing combat.
- Veteran: former member or current member of the active military, naval, or air service who was discharged or released under conditions other than dishonorable.
 - Often Veterans feel ashamed or in denial that they are needing treatment because they are resilient.

As you can see both of these responses pose threats to the safety of the Soldier and the stigma that surrounds underlying issues they are facing

Service Member vs. Veteran

• Not all service members are veterans

• Not all Veterans are service members

Positive UA with Guard Members

- Medical Review of Illicit Drugs: If a Soldier tests positive for a prescription medication the Soldier must provide prescription within 90 days before the positive urinalysis becomes illicit use.
- If a Soldier tests positive for a prescribed substance and the fill date is after the testing date it is considered illicit, unless they have a previous prescription for that substance.
 - The regulation is currently being reviewed to possibly add prescriptions will only be authorized for 6 months (a soldier can use a prescription for 6 months past the prescription date)

• Implementation of revision TBD

Positive UA steps-Army Guard

SM is notified of Positive UA **>**

Soldier contacts the ADCO or ADCO contacts Soldier ar

Once the SM requests the SASSI the ADCO will send an email to Psychological Health Coordinator (PHC)to request SASSI

PHC sends results to ADCO

Service member completes SASSI The PHC emails SASSI to SM

-

PHC and ADCO staff the case for treatment/counseling needed



If needed the SM is referred to local resource for necessary treatment/counseling

Prevention & Efforts

- Self-Referral the preferred method of discovering alcohol or other drug abuse.
 - The Soldier's unit commander becomes involved in the process.
 - Soldiers with an alcohol or other drug problem should seek help from their unit commander and the Alcohol & Drug Control Officer (all self-referrals for alcohol are case managed by Psychological Health Coordinators)
 - Soldiers can request help from their installation chaplain, or any officer or non commissioned officer in their chain of command.
 - The Limited Use policy will apply when Soldiers seek help from any of the listed personnel or organizations.

Prevention & Efforts Cont.

• Limited Use Policy: prevents use of evidence of substance abuse to punish a soldier or affect their characterization of service under certain circumstances.

This is a one time use policy

Prevention & Efforts Cont.

- Unit Risk Inventories (URIs)
- Targeted Prevention Trainings
 - Commanders are able to select targeted trainings based on URI results
 - In house Behavioral Health Officers (BHO) & Psychological Health Coordinators (PHC)
 - In house Drug Testing Coordinator (DTC)
 - Chaplain
 - Free Substance Abuse Subtle Screening Inventory (SASSI-4)
 - Counter Drug hosts Narcan/Naloxone trainings with DCCCA
 - Terra bags for available for units
 - Alcohol Drug Control Officer for referrals and case management

Prevention & Efforts Cont.

- Public National Guard Crisis Services website
 - www.ok.ng.mil
- Critical Behavioral Health Incident Report (CBHIR)
 - Accessible on the OK Guard app or www.ok.ng.mil/cbhir
 - OK Guard APP

J Military Crisis Line: 1-800-273-TALK (\$255) (tel:+18002738255) ▲ OKGuard COVID-19 Response Support

(/covid19)

f o y c o 0

(/)Oklahoma National Guard (/Pages/Home.aspx)

CRITICAL BEHAVIORAL HEALTH INCIDENT REPORT (CBHIR)

Learning Tools

- Military Culture Trainings
 - Kognito
 - Psych Armor
- www.alcoholscreening.org
- www.drugscreening.org
- www.militarymentalhealth.org
- https://giveanhour.org/get-help/#providerSearch

Resource Guide-Army Guard

Amber McCoy- Alcohol & Drug Control Officer 405-228-5343 amber.r.mccoy2.ctr@mail.mil	John Dixon- Psychological Health Coordinator 918-5131992 john.d.dixon2.ctr@mail.mil
Michele Burris- Psychological Health Coordinator 405-228-5323 michele.m.burris2.ctr@mail.mil	MAJ Drew Marr-Medical Review Officer 405-228-53324 drew.j.marr.mil@mail.mil
Patricia Mathes-Kerr- Psychological Health Coordinator 405-228-5235 patricia.r.matheskerr.ctr@mail.mil	

Resource Guide-Air Guard

 Jamie Vanbeber-Director of Psychological Health 138th Air Wing

918-833-7875 // jamie.j.vanbeber.civ@mail.mil

Charlene White- Director of Psychological Health 137th Air Wing

405-686-5145 // Charlene.b.white2.civ@mail.mil