

RAO BULLETIN

1 March 2012

PDF Edition

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Attachment - DAV HVAC-SVAC Testimony FEB 2012

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Mobilized Reserve 21 FEB 2012: The Department of Defense announced the current number of reservists on active duty as of 21 FEB 2012. The net collective result is 1,825 more reservists mobilized than last reported in the 15 FEB 2012 RAO Bulletin. At any given time, services may activate some units and individuals while deactivating others, making it possible for these figures to either increase or decrease. The total number currently on active duty from the Army National Guard and Army Reserve is 54,366; Navy Reserve 4,497; Air National Guard and Air Force Reserve 8,913; Marine Corps Reserve 4,991; and the Coast Guard Reserve 761. This brings the total National Guard and Reserve personnel who have been activated to 73,528 including both units and individual augmentees. A cumulative roster of all National Guard and Reserve personnel who are currently activated may be found online at <http://www.defense.gov/news/d20120221ngr.pdf> . Reservists deactivated since 9/11 total 768,539. [Source: DoD News Release No. 126-12 dtd 22 Feb 2012 ++]

Leap Year: How many days are in a year? 365, of course, except when we add a leap day every four years. Well, not anymore. It takes Earth about 365.2422 days to revolve around the sun. So Julius Caesar rounded up to 365.25, or 365¼, says the U.S. Navy Observatory. Then he added one extra day to the 365-day calendar year every four years, because it took four years for that extra quarter of a day to add up to one full day. But by rounding, Caesar added about 11 minutes to the calendar year – which really added up eventually. By the time Pope Gregory XIII came along at the end of the 1500s, the calendar year was 12 days ahead of the solar year, which means the beginning of seasons had shifted forward by 12 days. Ol’ Greg decided to omit the leap year three times every 400 years. So instead of 365 days with a day added every four years, it’s really done only 97 times every 400 years. Got that? And in case you need any extra trivia to make it through your extra day this year...

- The idea of leap days entered Western culture via Egypt. The ancient Egyptians were among the first civilizations to determine the true length of the solar year and adopted a calendar with an extra day every four years, says National Geographic. Julius Caesar was introduced to the system through his lover Cleopatra. Pope Gregory XIII later improved upon the Julian system, giving us the Gregorian calendar that most of the world uses today.
- The Gregorian calendar year is 365.2425 days long. “This agrees to within a half a minute of the length of the [solar] year,” says the U.S. Navy Observatory. “It will take about 3,300 years before the Gregorian calendar is as much as one day out of step with the seasons.”
- The Gregorian calendar omits those three leap years every 400 years on centennial years. For example, 2000 was a leap year, so 2100, 2200, and 2300 will not be. Remember it this way: Centennial years that are not divisible by four are not leap years.
- According to legend, it’s accepted for women to propose to men on Leap Day. And men must accept, according to Western Kentucky University librarian Lynn Niedermeier.
- Leap years give us an extra day to do our taxes. But they don’t affect Lent. While taxes are always due on April 15, Lent always begins 40 days before Easter.
- The leap year could mean an extra paycheck. As the American Payroll Association explained it to the Wall Street Journal: “While most years are 52 weeks long plus one day, leap years have 52 weeks and two extra days. Since December will include an extra Sunday and Monday this year, employees whose paydays fall on either of those days will get an extra check in 2012, even though their pay rate remains the same.”
- The leap year could also mean a pay cut. “To compensate for the extra payday, companies will likely reduce salaried individual paychecks throughout the year to ‘pay’ for the extra paycheck,” says the American Payroll Association. “Most salaried individuals are promised an annual salary, not a specific amount each paycheck.”
- Anthony, Texas, is known as the Leap Year Capital of the World. The town’s chamber of commerce administers the Worldwide Leap Year Birthday Club and sponsors a multi-day Worldwide Leap Year

Festival – which the town claims is the only such festival in the world. Former chamber member Mary Ann Brown, a Leap Day baby, proposed the club and festival in 1988 when she learned that her neighbor was also a Leap Day baby.

- “Leap Year” is the name of a movie. Released in 2010, the romantic comedy is about a woman who travels to Ireland to propose to her boyfriend on Feb. 29.
- The Disney parks will stay open for 24 hours on Feb. 29, 2012. The event, called One More Disney Day, marks the first time ever that both Disneyland in California and the Magic Kingdom in Florida will stay open for 24 hours.

[Source: MoneyTalksNews Karla Bowsher article 28 Feb 2012 ++]



USFSPA & Divorce Update 20: Currently, an extremely heated debate is taking place every day in court rooms nationwide. The argument centers on the misuse of veteran’s disability compensation as ‘income’ in a divorce settlement from which alimony is to be paid. On one side of the battle are civil court judges, family law attorneys, Department of Family and Children Services (DFACS), and state BAR associations nationwide. On the other side of the fight is a little known grassroots veterans advocacy group Operation Firing For Effect (OFFE), and every man and woman ever injured in the line of duty or wounded on the battlefield, past, present, and future. Family law professionals claim disability compensation is ‘income’ and therefore can be used to pay alimony.

When a soldier is critically wounded in combat it can be a devastating life changing experience and can reduce a once vibrant physically-fit individual to a severely disabled person facing a lifetime of pain, medication, disfigurement, and psychological anguish. As a small token of our country’s appreciation for this distinguished service and sacrifice made by our military personnel our country bestows one of our nation’s highest awards upon that military member, the Purple Heart Medal. In addition to this honor, we also award disability ratings and financial compensation to help a disabled veteran overcome the inability to be gainfully employed and to help them achieve their earning potential as if they were not disabled at all. This veteran’s disability compensation award comes directly from American tax payers via the U.S. Congress and the Department of Veterans Affairs, and is intended solely and wholly for use by the individual injured in the line of duty. Both the Purple Heart Medal and disability compensation are paid for with the veteran’s blood, sweat, and tears. Any combat wounded soldier will tell you they hold their disability compensation ‘award’ just as sacred and hallowed as their Purple Heart ‘award’; as they are both one in the same.

According to Las Vegas, Nevada Attorney at Law, Marshal Willick, “Zoo keepers “put their lives on the line,” as do construction workers, cops, fire-fighters, and a host of others... The source of the disability is simply irrelevant to the distribution of benefits and burdens after such a disability. If there is disability income, it is the separate property of the individual receiving it, meant to compensate for future lost wages – but it is income. Sorting out who should

get, and pay, what, among the individual facts of individual cases, is what divorce courts are for.” OFFE National Chairman, Gene D. Simes takes issue with Willick’s statement. Who gets veteran’s disability compensation, when they get it, and how much they receive is the duty and responsibility of the Department of Veterans Affairs, not Marshal Willick or some civil court judge. Simes proposes this question; since the veteran’s disability compensation and Purple Heart Medal are both ‘awarded’ for the same combat incident, does that mean an ex-spouse is entitled to receive half of the veteran’s Purple Heart Medal as well as their disability compensation?

Veteran’s disability compensation is tax exempt and is not defined as ‘income’ by the Department of Veterans Affairs, Internal Revenue Service, Social Security Administration, U.S. Department of Health and Human Services, nor the Uniformed Services Former Spouse Protection Act. Simes says disabled veterans are being forced to give up their disability compensation to pay alimony, or go to jail. Thus far, nine members of OFFE have been incarcerated for refusing to honor court orders which use their disability compensation to pay their ex-spouse support. Four more OFFE members are facing incarceration within the next two weeks. Simes points out the federal laws on the books which prohibit veteran’s disability benefits from attachment, garnishment, seizure, or levy under any legal process whatsoever. OFFE has traced these federal statues back to the founding of this country, and it wasn’t until the mid-1980s that slick attorneys figured out ways to get around these federal laws and misuse veteran’s disability benefits as income to calculate alimony.

OFFE legal analyst, Simon Alvarado says our disabled veterans are being victimized every day in court rooms across the country. In many of these cases the disabled veteran is stripped of not only half of their disability compensation, but they are also being ordered to pay their ex-spouse’s legal fees as well. According to Alvarado, veteran’s disability compensation does not belong to the veteran. That money belongs to the American tax payer, and Alvarado is convinced tax payers don’t want their tax dollars diverted to ineligible non-military able body third parties in civil courts by a few low life attorneys looking to line their own pockets.

Marshal Willick has been credited as being one of the principle architects of the strategies and legal techniques used to strip disabled veterans of their earned disability compensation in a divorce. Although Willick never spent a day in military service, he wrote the very first textbook on the subject, “Military Retirement Benefits in Divorce: A Lawyer’s Guide to Valuation and Distribution” for the American Bar Association in 1998. Additionally, he has written articles and taught continuing legal education (CLE) seminars on the subject for over 20 years. In 2007, Willick authored another handbook titled; “Hitting the Jackpot in Pension Cases: Secrets to getting the Retirement Share your Client Deserves”. Apparently, Mr. Willick considers going after a veteran’s retirement pay and disability compensation as gambling or game of chance. In these two publications Willick divulges what he refers to as “secrets” on how to drain every penny possible from a retired military veteran, including any disability compensation the veteran may be receiving, or will receive in the future.

OFFE is currently monitoring over 155 cases of veteran’s disability compensation abuse across the country. Simes and OFFE volunteers have spent thousands of hours and traveled tens of thousands of miles researching this issue over the past nine years. The OFFE team has made seven trips to Washington, DC lobbying for enforcement of USC, Title 38, section 5301. OFFE members have also conducted lobbying efforts at the state level to create legislation which would enhance the federal protection of veteran’s disability compensation in a divorce. However, to date, the most heard response from Capitol Hill has been; that’s a state issue, and from state representatives; that’s a federal issue, thus leaving any resolution to the problem in limbo at this time. Simes says Willick, and attorneys who prescribe to Willick’s distorted methods and perverted tactics are directly responsible for homelessness, mental anguish, and suicide among our former military personnel. Unfortunately, there are several words our military personnel live by which this self-proclaimed expert on military issues will never know the meaning of; ‘Duty’, ‘Honor’, ‘Integrity’, ‘Pride’, ‘Respect’, and ‘Commitment’. For more information, contact Gene Simes at; (315) 986-7322. [Source: Veterans Today Jere Berry article 26 Feb 2012 ++]

Iraq Star Foundation: Despite powerful life-saving measures on the battlefield and longer-term medical support stateside, many soldiers face long waiting lists for reconstructive surgery. Iraq Star picks up where the military and VA leave off by providing the reconstructive, aesthetic, surgical procedures that can hasten a happier more normal return to his/her existing military or pre-war life. These procedures are performed by Board Certified plastic and reconstructive surgeons who donate their skills. Iraq Star pays for the soldiers transportation, hotel accommodations, food, anesthesia, hospital operating room, medical supplies and sends a loved one with them. Iraq Star is a growing national foundation with 265 surgeons in 44 states providing their skills to remove shrapnel, treat burn scars, revise artillery scars, implant eyebrows, tooth restoration, etc. for soldiers wounded in the Iraq and/or Afghanistan wars. Their mission is to prevent these wars from permanently disfiguring young lives. If you or someone you know can use their services contact the Iraq Star Foundation at (310) 245-6775, (760) 568-403.9 or email. <mailto:iraqstarinfo@aol.com>. For additional info and videos about their life changing surgeries refer to <http://www.iraqstar.org> and/or <https://www.sedgwickcms.com/troops/>. [Source: Military connection Newsletter 25 Feb 2012 ++]

Wisconsin Unclaimed Property: The state of Wisconsin is holding \$411 million in unclaimed property, and there's a good chance some of it belongs to you if you are a veteran residing there. David Coss, a veteran from Wisconsin Rapids, became a thousand dollars richer when contacted by the state treasurer's office, telling him he had unclaimed property. The state found Coss, largely thanks to a new partnership with the Department of Veterans Affairs. "That enabled us to locate 4,500 veterans in the state of Wisconsin who had unclaimed property," said Wisconsin State Treasurer Kurt Schuller. Some claims are just pocket change, but others are life-changing "The most amount that I have handled is three quarters of a million dollars, which I hand-delivered to an 80-year-old couple in Wauwatosa," said Schuller.



David Coss

Anyone can search the unclaimed property database online at <http://statetreasury.wi.gov/>. There are more than two million claims out there, making it very possible that money could be waiting for you. have already given out more than \$8 million in 2012 alone. There are several requirements for claiming your money which are provided at <http://www.statetreasury.wisconsin.gov/docview.asp?docid=14802&locid=155>. The state asks for 90 days to review claims. However, if a claim is under \$2,000, there's a chance it could be fast-tracked. Ron Giordan, spokesman for the state treasurer's office, said claimants could be given an option to enter a social security number. If that number matches what the treasurer's office has, the claim might be fast-tracked. No paperwork would need to be mailed in, and the money would be sent in 10 business days. You can also contact the Unclaimed Property Unit: P.O. Box 2114, Madison, WI 53701-2114 Phone: (608) 267-7977 / (877) 699-9211 Fax: (608) 261-6799 E-mail: <mailto:OSTUnclaimedProperty@wisconsin.gov>. [Source: Associated Press article 24 Feb 2012 ++]

VA Marriage Retreats: For over a quarter century, the nonprofit PAIRS Foundation has served active-duty military and Veteran families through educational programs that deliver practical skills to strengthen marriages and families. PAIRS VA Marriage Retreats for military and Veteran families were recognized in 2009 as a "Best Practice" by the Veterans Administration. PAIRS Retreats for military and Veteran couples are today offered throughout the country by many of the more than 300 VA Chaplains, Behavioral Health Professionals, and Counselors trained by PAIRS Foundation. The Department of Veterans Affairs is trying a new path when it comes to caring for and healing the Nation's wounded Veterans. Now, in addition to repairing their damaged bodies and minds, VA is attempting to go one step further and repair their crumbling marriages.

"Research shows that 70 percent of our combat Veterans are experiencing marital problems," said VA Chaplain Ron Craddock. "Twenty percent of them decide to divorce before they even return from theatre. This is staggering. The toll on the individual Veteran is staggering. The toll on his family is staggering." That's why Craddock and another VA Chaplain, Ed Waldrop, launched VA's very first marriage retreat three years ago at the Charlie Norwood VA Medical Center in Augusta, Ga. The retreats are conducted by VA chaplains, social workers, psychologists, and counselors who have been certified as instructors for teaching better communication skills, relationship skills, and emotional literacy skills to couples. "We started out doing three or four retreats a year," Waldrop said. "We got a lot of positive feedback, so now we're up to about 11 a year. We've done two- or three-day retreats for over 400 couples. We're here in Georgia, but we've had couples come here from as far away as Pennsylvania, Oklahoma, and Florida...all over. The retreat is free, so their only expense is transportation. If they can make it here, we get them into the program." The idea is gradually catching on at other VA sites across the nation.

The VA San Diego Healthcare System now has a marriage retreat program up and running, while about 20 other VA medical centers are in the beginning stages of establishing their own programs. So what exactly goes on at a marriage retreat, anyway? "We spend about 70 percent of our time helping couples with their communication skills," Craddock said. "When these Veterans come back from overseas, they don't have the communication tools to talk to their spouse about their pain, their frustration, their grief. And we're seeing this in both males and females...even the females returning from Iraq and Afghanistan want to seclude themselves. Just like the guys, they don't want to be around crowds...they don't want to go on family vacations or outings..." When VA's marriage retreats first began, only Veterans from the Iraq and Afghanistan conflicts were being accepted into the program. Since then, VA has opened the program to anyone who's ever worn the uniform. For more information on VA's marriage retreat program, call 706-733-0188, extension 6118, 6114, or 6172. For information on PAIRS refer to <http://veterans.pairs.com/> [Source: <http://fatherhoodchannel.com/2012/02/24/va-marriage-retreats-224/> 24 Feb 2012 ++]

DoD Green Initiatives: The U.S. military unveiled its first fleet of hydrogen-powered electric vehicles this week in Hawaii — part of the Defense Department's "green initiatives" aimed at reducing the country's dependence on foreign energy sources. The services are testing 16 General Motors Equinoxes, which run on hydrogen fuel cells that generate electricity by converting hydrogen gas into water. In addition to potentially saving money and securing future energy sources, the initiatives have a more practical application: If the DOD can cut down on the need for fuel, it can reduce the risk of delivering that fuel through the traditionally dangerous supply lines in places like Afghanistan. "Our pursuit of alternative energy is closely tied to our commitment to continually adapt to an ever-changing security environment," George Ka'iliwai, director of Resources and Assessment for U.S. Pacific Command in Hawaii, said in a press release issued after a demonstration of the fleet at Fort Shafter on

Wednesday. “Defense relationships and military approaches alone can’t solve all of our energy challenges, but they underpin the initiatives we’re taking within the Department of Defense to reduce the dependence on foreign sources of energy,” he said.

The hydrogen fuel cell fleet in Hawaii is just a small part of the greener DOD picture. For example, the Navy is sinking \$170 million into a program to help fund private biofuel development, while the Army recently launched a task force to identify large-scale projects aimed at pulling 25 percent of the service’s energy needs from solar, wind and other renewable sources by 2025. The GM hydrogen fuel cell system is twice as efficient as an internal combustion engine, provides a range of up to 200 miles on a single charge and emits nothing but a little steam, according to officials. What’s more, it’s safe, said Charles Freese, GM’s executive director of global fuel cell activities. “There’s always been this folklore about how dangerous hydrogen energy is,” he said. “We spent a lot of time on safety with this vehicle.” The hydrogen gas tanks in the rear of the vehicle are “literally bullet-proof,” he said. One of the vehicles was built to function as a mobile generator capable of powering five homes, Freese said. The vehicles fill up on hydrogen at several bases on Oahu that have been equipped with special pumps, he said. Both U.S. Pacific Command and GM are involved in a public-private initiative in Hawaii to develop hydrogen refueling infrastructure to reduce the island’s reliance on petroleum. Hydrogen can be produced from a variety of energy sources and is also a byproduct of other industrial processes, Freese said. GM has produced more than 100 hydrogen fuel cell vehicles since 2007, most of which have been tested in civilian markets until now. [Source: Stars & Stripes Charles Reed article 24 Feb 2012 ++]

VA Women Vet Programs Update 16: Between 2011 and 2012, The Women's Wilderness Institute (TWWI) has offered six 6-day retreats for women who need support in re-integrating to civilian life after their military service. These retreats are funded by the Women Veterans Health Improvement Act of 2009, and are provided entirely free of charge to participants, including airfare. 144 women will be served over the two year period. The Women Veterans Retreats offer an intensive immersion experience of supportive and challenging activities, in a peaceful natural environment. The retreats allow women to connect with other women veterans and learn tools for dealing with post traumatic stress and other issues that commonly affect women veterans. In addition to outdoor activities and a high and low ropes course, the retreat provides a format for sharing experiences, and education about stress, resilience, and life skills.



To be eligible, women must have been deployed to Iraq or Afghanistan in OEF or OIF and must be currently in counseling at a Vet Center, or have been in counseling at a Vet Center for at least six sessions at the time of application. Go to <http://www.womenswilderness.org/files/2012%20Application%20Wmn%20Vet%20Retreat%20pdf.pdf> for an application. Applicants are asked to choose the location nearest their residence, if possible. Locations and dates for 2012 are:

- **Ghost Ranch** Education and Retreat Center, New Mexico- March 17-22 Ghost Ranch is a beautiful facility located deep in the vast open space of the New Mexico desert. It is located in Abiquiu, about 2.5 hours from Albuquerque, in what is known as “Georgia O’Keefe country”- the area where she created her legendary art. There are high mesas, sandstone slickrock, and unusual rock formations. www.ghost ranch.org
- **100 Elk Outdoor Center**, Colorado- August 18-23. Located near the town of Buena Vista, approximately two and a half hours from Denver, 100 Elk Outdoor Center is a peaceful, quiet location at the foot of the Rocky Mountains. 14,000’ peaks rise behind the camp, and our cabin and meeting area looks out over a grass lawn and small lake. Tall ponderosa pines are scattered across the property, and for those who are up for it, there is a vigorous half-day hike to a high alpine lake. www.100elk.org
- **Camp Jewell** YMCA, Connecticut, September 14-19. Camp Jewell is a private conference facility on the shores of Triangle Lake, in the pastoral forested hills of northwestern Connecticut, just a few miles from the Appalachian Trail. Outdoor activities include canoeing on the lake, hiking, and viewing the beautiful fall colors of New England. www.campjewell.org

For more information or have questions call (303) 938-9191; email <mailto:moreinfo@womenswilderness.org>; or go to <http://www.womenswilderness.org/files/More%20Information%202012%20Wmn%20Vet%20Retreats%20pdf.pdf>. [Source: <http://www.womenswilderness.org/women-veterans-retreats> Feb 2012 ++]

VA Vet Centers Update10: Congress established the Vet Center Program in 1979 out of recognition that a significant number of veterans were still experiencing readjustment problems. Vet Centers are community based and part of the Department of Veterans Affairs. In April 1991, in response to the Persian Gulf War, Congress extended the eligibility to veterans who served during other periods of armed hostilities. These periods include:

- World War II
- Korea
- Vietnam
- Lebanon (25 Aug 82—26 Feb 84)
- Grenada (23 Oct 83—21 Nov 83)
- Panama (20 Dec 89—31 Jan 90)
- Persian Gulf (2 Aug 90—To Date of Presidential Proclamation Ending Operation Desert Storm)
- Somalia (17 Sep 92—To Date of Presidential Proclamation Ending Operation Restore Hope)
- Yugoslavia
- Bosnia
- Iraq
- Global War on Terrorism (GWOT)



FREE Counseling at Your Local Vet Center

To locate the Vet Center nearest to you refer to <http://www.veteranprograms.com/id234.html>. The goal of the Vet Center program is to provide a broad range of counseling, outreach and referral services FREE of charge to eligible veterans in order to help them make a satisfying post-war readjustment to civilian life. The Women Veterans Health Program Act of 1992 {Public Law 103-452} authorizes counseling for women veterans who have experienced acts of sexual violence or harassment while on active duty and the Women's Health Extension Act of 1994 authorizes sexual trauma counseling for all veterans who experienced acts of sexual violence or harassment while serving in the military. In addition, the following are available upon request:

- Individual Counseling
- Group Counseling
- Marriage and Family Counseling
- Alcohol/Drug Counseling & Referral
- Community Education
- Liaison With VA Facilities
- Referral To Community Agencies
- Bereavement Counseling

[Source: <http://www.veteranprograms.com/id234.html> Feb 2011 +]

Veterans in Office Update 04: (Note: Military Times Copyrighted material - Not authorized for reproduction on any publicly accessible website or website accessed newsletter. Forwarding via email in personal communications is authorized.)

At a time when Congress is facing big questions that will affect military careers, the percentage of lawmakers who served in uniform has increased slightly and remains higher than the general population. About 21 percent of House lawmakers and 29 percent of senators previously served in the military, according to a new report from the nonpartisan Congressional Research Service. Veterans make up only 3.3 percent of the adult population of the U.S., the report says. Veteran representation on Capitol Hill had been steadily declining since the early 1970s, largely a result of the World War II generation of lawmakers leaving Congress. In the 92nd Congress, which spanned 1971 and 1972, 72 percent of House lawmakers and 78 percent of senators had military service. In the 111th Congress, which spanned 2009 and 2010, the number of veterans fell to 18 percent in the House and 28 percent in the Senate. According to the nonprofit and nonpartisan Veterans Campaign, almost 200 veterans challenged incumbents or ran for open seats in the 112th Congress.

The armed services and veterans' affairs committees in the House and Senate are headed today by people who never served in the military, although subcommittees responsible for military personnel issues are headed by veterans. Sen. Jim Webb (D-VA), a Naval Academy graduate and Marine veteran of the Vietnam War, is chairman of the Senate Armed Services Committee's personnel panel and is the chief sponsor of the Post-9/11 GI Bill, which dramatically improved veterans' education benefits for those who served in the Iraq and Afghanistan era. Rep. Joe Wilson (R-SC) a retired Army National Guard colonel whose four sons also have served in the military, is chairman of the House Armed Services Committee's military personnel panel. He has been one of the strongest opponents of Pentagon plans to cut military retired pay, and he also opposes efforts to dramatically increase out-of-pocket health care costs for retirees and their families.

Rick Jones of the National Association for Uniformed Services, a group that represents the interests of active-duty members, reservists and retirees, said having veterans in Congress helps in debates about benefits, such as when Webb talks about growing up in a military family that believed lifelong military health care was a promise, or

when Wilson talks about his son's military service. "You don't have to be a veteran, of course. We try to educate folks about the extent of sacrifice of being in the military, but it helps to have someone in Congress who already understands it," Jones said. Seth Lynn, executive director of the Veterans Campaign, said he expects more than 100 veterans to be running for the House of Representatives this fall, but he cautioned that simply being a veteran isn't enough to win. "These days, you need to have done something other than served in the military, some private-sector experience to draw on," Lynn said. "In this election, the big thing veterans are going to have to do is demonstrate their bona fides on the economy. They cannot run and win simply on Iraq or Afghanistan." [Source: ArmyTimes Rick Maze article 22 Feb 2012 ++]

Vet Jobs Update 53: (Note: Military Times Copyrighted material - Not authorized for reproduction on any publicly accessible website or website accessed newsletter. Forwarding via email in personal communications is authorized.)

Rep. Jeff Miller (R-FL) the House Veterans' Affairs Committee chairman (concerned about jobs for veterans) proposes to strip all veterans' employment and rehabilitation programs from the Labor Department and instead place them in the Veterans Affairs Department, where they might get more attention. That proposal will be discussed at a 8 MAR hearing and is scheduled for a committee vote by the end of March. About 250 federal workers and an annual budget of about \$261 million are involved. Miller's proposal, which he introduced 17 FEB as H.R.4072, would not immediately save any money or result in anyone losing their job. The entire Veterans Employment and Training Service would be transferred from the Labor Department to the Veterans Benefits Administration in VA.

In a statement, Miller said the proposal would consolidate veterans programs in one agency, a move he believes will improve services. "This bill aims to get more of our veterans back to work by placing under one roof all the services that the federal government offers to unemployed veterans," Miller said. "By doing that, we will increase coordination between the various education, rehabilitation and employment programs whose goals are to enable veterans to compete in the workforce. It is also my hope that we will increase our outreach efforts to veterans who are currently unemployed," said Miller, one of the chief sponsors of the Vow to Hire Heroes Act that was signed into law in November. "By streamlining these programs, we ensure veterans use their benefits [in ways] that help them achieve their career goals. These programs are far too important, at both the federal level and state level, and we must put them where we believe they will work best," Miller said in the statement.

VETS, as the current Labor Department organization is known, has a wide portfolio, including leading transition assistance classes and workshops for current service members who are about to separate or retire, providing grants for state specialists in veterans employment, overseeing training programs for homeless veterans, and running a program to enroll disabled veterans in vocational rehabilitation programs. VETS also is the government arm responsible for the Uniformed Services Employment and Re-employment Rights Act (USERRA), with counselors and investigators to help with complaints about employment discrimination. It also advises federal agencies and veteran applicants about federal veterans' hiring preferences. At the moment, there is no similar legislation in the Senate, leaving doubt about whether Miller's bill has any chance of success.

In addition to that bill, the House Veterans' Affairs Committee also is considering less far-reaching legislation to have some transition assistance workshops and classes held at off-base locations so that people without current military ID cards, or who live far from installations, would have a chance to attend. Rep. Marlin Stutzman (R-IN), chairman of the veterans' affairs committee's economic opportunity panel, proposes that transition training be provided off base under a three-year pilot program in states that have higher-than-average unemployment rates for veterans. This would allow transition classes to be held at locations that are convenient for National Guard and reserve members who are not routinely included in on-base transition classes. It would also allow veterans who have

not yet found jobs to take transition classes without having problems getting back onto base if they lack military identification. Stutzman said bill, H.R.4072, “will fill what appears to be a big gap in transitioning from military service to civilian status.” There is no cost associated with the bill. Instructors for classes would be people already providing transition training and the locations for the classes would be government or community facilities. [Source: ArmyTimes Rick Maze article 23 Feb 2012 ++]

VAMC Dayton: The Dayton VA Medical Center is investigating more allegations of improper conduct by an employee, this time in its anesthesia unit. The allegations include an accusation that a doctor drew blood from patients under anesthesia without their knowledge or consent. “Dayton VA Medical Center is aware of the allegations made anonymously to the VA Office of Inspector General regarding the anesthesiologist,” the hospital said in a prepared statement. “As a matter of policy, we don’t comment on open OIG inquiries. Dayton VAMC takes these allegations seriously and is currently conducting a complete review.” According to the complaint, the doctor also kept in his office a supply of a controlled substance, propofol, that he obtained from other VA employees. That propofol was kept in an unauthorized location and was not monitored or managed through the pharmacy even while there was a nationwide shortage of the drug in 2009.

It wasn’t clear how many patients allegedly had blood drawn without their consent, or when the activity took place. If true the allegations raise serious ethical questions, said Richard Whitehouse, executive director of the State Medical Board of Ohio, which does not have jurisdiction over the Dayton VA since it’s a federal hospital. “It’s a question of conducting an unauthorized procedure without the patient’s (knowledge),” Whitehouse said. “It is by its very nature invasive.” The medical center’s director, Glenn Costie, sent an email to some staff members on 16 FEB about the allegations, which whistle-blowers had made to the VA’s Office of Inspector General through a hot line. The allegations pose fresh challenges for the Dayton VA as it tries to restore its image following a scandal over infection control issues in its dental clinic in 2010 and 2011. The Dayton Daily News reported last year that the federal hospital since 2006 has conducted more in-depth investigations of patient abuse and other employee misconduct than any other VA hospital in Ohio,

“I am glad these issues have come up as it will give us a chance to resolve concerns and improve the care we provide our veterans,” Costie wrote in the email to the newspaper’s staff. Costie this week said that the VA hot line had received two calls concerning alleged problems in the anesthesia unit and that the propofol allegation dated back to 2009. U.S. Rep. Mike Turner, R-Centerville, said in a prepared statement., “If true, these allegations are troubling to say the least. Since the dental scandal this past year, I have been concerned about the management and standards at the Dayton VA Medical Center. Our veterans deserve the safe and reliable health care they were promised when they entered military service. The new director, Glenn Costie, has indicated that he will take this matter seriously and provide a full accounting to our community.” U.S. Sen. Sherrod Brown (D-OH) also expressed concern about the alleged misconduct. He has contacted the VA to express his concern and has requested that the VA complete a full, fair and prompt investigation on this matter. [Source: Dayton Daily News Ben Sutherly article 23 Feb 2012 ++]

Manila VARO & OPC Update 04: The Veterans Affairs Manila Regional Office (VARO) and Outpatient Clinic (OPC) provide Philippines veterans numerous ways to obtain information and communicate with them. Depending on your needs the following are germane:

1. **U.S. Department of Veterans Affairs, Manila Regional Office** 1501 Roxas Boulevard 1302 Pasay City, Trunkline (632) 550-3888; Toll Free No: 1-800-1888-5252; Fax No: (632) 550-3944;

2. **Websites:**

- VA: <http://www.va.gov>;
- U.S. Embassy <http://manila.usembassy.gov/>
- Inquiry Routing & Information System (IRIS) <http://iris.va.gov>
- VARO: <http://manila.usembassy.gov/us-agencies2/veterans-affairs.html>

3. **Confidential help for Veterans and their families:**

- When in Metro Manila dial 550-3967
- When using a globe cell phone, please dial 02-550-3967
- When using a smart cell phone, please dial 550-3967
- Toll-Free number using a land line and outside of Metro Manila 1-800-10-273-8255

4. **Facebook:** <http://www.facebook.com> | manila.usembassy

5. **Outpatient Clinic (OPC):** Trunkline (632) 318-8387 Toll Free No: 1-800-1888-8782 Fax No: (632) 310-5957 Pharmacy: (632) 556-8387

6. **AudioCare.**

- Callers (with PLDT line or affiliate) outside Metro Manila TOLL FREE 1-800-1888-8387 (1-800-1888-VETS)
- Callers within the Metro Manila Area (02 area code) should still continue to use 556-8387 (556-VETS).

Note: Benefits of using Audio Care are:

- Using AudioCare for prescription refill is fast and does not require you speak to a pharmacist.
- If a patient cannot be contacted due to a busy signal or no answer, the system re-calls the patient at user-defined intervals and calls next day
- Reminds patients of appointment date and time
- Prompts patients to cancel or re-schedule appointments



[Source:

<http://photos.state.gov/libraries/manila/299618/dellutajc/US%20Department%20of%20Veterans%20Affairs.pdf> Feb 2012 ++]

Manila VARO & OPC Update 05: VSO Leadership Forums (VSOLF) are designed to provide Veteran Service Organization leaders in the Philippines an opportunity to provide necessary feedback to VA Manila on current service levels. These forums also afford the VA Manila Director the opportunity to provide updates and information regarding ongoing and upcoming initiatives to improve service to Veterans in the Philippines. The following represents a recap of the key points presented at the 6-9 Feb 2012 VSOLF:

Paperless Claims & E-Benefits: VA is moving quickly to a paperless claims process through its E-Benefits program. Soon the primary means to file a claim with VA will be online. VA is encouraging all Veterans to enroll in E-Benefits. <https://www.ebenefits.va.gov/ebenefits-portal/ebenefits.portal>. Features include:

- Status of your claim or appeal to BVA anytime anywhere, 24x7.
- Status of your monthly claim payment and payment history.
- Download DOD and VA records such as Official Military Personnel File incl. DD 214.
- VSOs will have access.

It does take a little time to get your password when you sign up for this program, but that should not be a reason not to enroll (a few weeks via mail). A Veteran in DEERS already or a Veteran with a MyHealtheVet account can establish an E-Benefits account faster.

MyHealtheVet is VA's online personal health record. All Veterans receiving healthcare from VA should sign up for a MyHealtheVet account at http://www.va.gov/eauth/My_HealtheVet.asp. MyHealtheVet provides 24x7 online access to users anywhere, anytime to health care information, resources, tools. Some of the best features are:

- Ordering refills to prescriptions on-line
- Communicating with your doctor and primary care team via secure e-mail.
- See all scheduled appointments going back 2 years with the status of each.
- See chemistry & hematology lab results – display 7 days after test results entered.

Simplified Notification Letter for Disability Rating Decisions: Soon Veterans who have filed disability compensation or pension claim with VA Manila will receive notification letters that look and read differently than the lengthy letters they have always sent, along with the lengthy 'legalese' rating decision. Features of the re-designed letters include:

- Easier to understand.
- Eliminates sending two documents – one lengthy letter and a separate lengthy decision.
- Allows VA to make decisions faster = better service to Veterans

*NOTE: This does not change how VA makes decisions – just how VA communicates decisions to Vets.

Clinic Operations. VA Manila continues to experience some growing pains with the new building. While it is a significant upgrade from the previous clinic location, they realize they have more to do. Over the course of the first year in the new building the following enhancements have been added, mostly due to Veterans feedback:

- VA Manila now offers 7 am. access to the outside waiting pavilion. Clinic and Regional Office open for business at 7:30 am.
- Food Service has been provided in the waiting pavilion.
- Free Parking along the entire frontage road of the clinic and US Embassy Seafront compound has been added.
- Same day cash payments for beneficiary travel claims less than P15, 000 at \$0.41 per mile rate. Claims over P15,000 will be paid via direct deposit.

Improvements coming soon:

- New signage throughout the facility to assist traffic flow and help Veterans locate their assigned room.

- Self-Service kiosk / Internet access in lobby for those with E-Benefits and MyHealthVet accounts
- Prescription renewals via Audiocare (refills are already possible via Audiocare). Renewals require a doctor's new prescription and number of indicated refills.
- A redesigned lab draw area to ease traffic in morning
- Better turnaround time on lab results and prescription refills, reducing wait times in the clinic.
- A paging system in the outside waiting pavilion will be installed.
- Stricter enforcement of access policies such as allowing multiple attendants and family members inside clinic. This will free up sub-waiting areas for patients. Stricter no walk-in policies will be enforced, improving service to those with an appointment.

Walk-Ins: VA Manila is the only VA located in a foreign country. For security purposes VA, along with other US Embassy agencies providing public services, must operate on an appointment system. VA Manila has observed a significant increase in the number of Veterans presenting themselves without an appointment. This greatly disrupts VA operations and ultimately results in diminished service to those with appointments. Veterans Service Organization leaders are encouraged to remind their members to p make an appointment first. Those with a need to drop off documentation or to pick up lab results or medication refills are encouraged to call first. VA Manila can usually make arrangements that cause the least disruption. Travel reimbursement for drop offs of pick-ups is not authorized.

Disruptive Visitors: VA Manila has implemented a zero tolerance policy toward any form of abuse from visitor, be it physical, verbal, electronic. Please work with your organization's members to carry out our business in a mutually respectful manner. The Golden Rule applies. VA Manila insists its employees act and treat Veterans with respect. It is one of their core values. The same is expected from the Veterans thry serve.

Fee Basis Care. Disruptive behavior and failure to carry out one's personal financial obligations are also jeopardizing VA Manila's ability to provide fee-for-service care in the community. Veterans receiving a letter of authorization (LOA) from VA can only expect VA to pay for the treatment noted on the LOA. All other treatment obtained is at the Veterans' expense. Veterans displaying disruptive behavior toward staff in fee-basis facilities can ultimately result in limited options for care for all Veterans in the Philippines. More than once fee-basis facilities have called VA Manila to complain about patients referred to them. Several have threatened not to accept VA Manila's business. Veterans Service Organization leaders are encouraged to remind their members that their actions effect more than themselves.

[Source: VSO Leadership Forums 6-9 Feb 2012 ++]

Tricare Overseas Program Update 13: If you are an overseas-based uniformed service retiree, you enjoy much more flexibility in choosing providers than TRICARE Overseas Program (TOP) Prime enrollees, since you don't have a primary care manager and don't need specialty care referrals. That's your advantage when using TOP Standard. Many overseas host nation providers require up-front payment for services, and you usually have to file your own claims when using TOP Standard. Contact your TRICARE Overseas Program Regional Call Center at <http://www.tricare-overseas.com/ContactUs> to get help in finding a host nation network provider or filing a TRICARE claim. You can also find a provider by using the overseas online TRICARE Provider Directory at <http://www.tricare-overseas.com/ProviderSearch>.

If you live in the Philippines, you must get care from a TOP-certified provider. You may find a certified provider from the Philippines Certified Provider Directory at <http://www.tricare.mil/tma/pacific/pacificcertifiedproviders.aspx> or by going to TRICARE.mil and using the profile

on the home page. Referrals are not needed for TOP Standard, but you must get prior authorization for some services. Always contact your TOP Regional Call Center and select option 3 to check on any new prior authorization requirements: Currently, prior authorizations are required for:

- Adjunctive dental services
- Home health services (only available in U.S. Territories)
- Hospice care (only available in U.S. Territories)
- Nonemergency inpatient admissions for substance use disorders or behavioral health care
- Outpatient behavioral health care visits beyond the eighth visit per fiscal year (Oct. 1–Sept. 30)
- Transplants – all organ and stem cell

If you become Medicare-eligible, be aware that TRICARE For Life acts the same as Standard overseas except in U.S. Territories. Although Medicare services are only available in U.S. Territories overseas, you must still enroll in Medicare Part B and pay the monthly Part B premium to be eligible for TRICARE For Life, regardless of location. You may sign up for Medicare at the Federal Benefits Office located at U.S. Embassies. In U.S. territories, go to your local Social Security Administration office. Enroll no later than two months before you turn 65, or if you qualify for Medicare due to end-stage renal disease, disability or Lou Gehrig’s disease, purchase Part B as soon as it is offered. Once you receive your Medicare card, verify that your record in the Defense Enrollment Eligibility Reporting System (DEERS) was updated to reflect your Medicare status. Uniformed services retirees cannot enroll in TOP Prime. At some overseas military treatment facilities, retirees can enroll in TRICARE Plus to obtain no-cost, space-available primary care in the facility. TRICARE Plus enrollees must make their own appointments, file their own claims and pay appropriate deductibles and cost-shares, however, when seeking host-nation care. For more information regarding TOP Standard and TRICARE For Life in overseas areas, visit <http://www.tricare.mil>. [Source: TRICARE Management Activity Chris Hober article 22 Feb 2012 ++]

USERRA Update 11: Every year, more than a thousand National Guard, reserve and active-duty troops coming back from Iraq, Afghanistan or other military duties complain of being denied jobs or otherwise being penalized by employers because of their military obligations. According to the Washington Post the biggest offender is the federal government. Returning military members allege job discrimination by federal government. In fiscal 2011, more than 18 percent of the 1,548 complaints of violations of that law involved federal agencies, according to figures obtained under the Freedom of Information Act. It is against federal law for employers to penalize service members because of their military service. And yet, in some cases, the U.S. government has withdrawn job offers to service members unable to get released from active duty fast enough; in others, service members have been fired after absences. “On the one hand, the government asked me to serve in Iraq,” said retired Army Brig. Gen. Michael Silva, a reservist who commanded a brigade in Iraq and was fired from his job as a U.S. Customs and Border Patrol contractor on his return. “On the other hand, another branch of government was not willing to protect my rights after serving.”

The federal government is the largest employer of citizen-soldiers. About 123,000 of the 855,000 men and women currently serving as Guard members and reservists, or about 14 percent, have civilian jobs with the federal government. Over a fourth of federal employees are veterans. The Uniformed Services Employment and Reemployment Rights Act (USERRA), enacted in 1994 to ensure that members of the military do not face a disadvantage in their civilian careers because of their service, calls on the federal government be “a model employer” for service members. But critics contend that the federal government has been far from perfect, and they fear that with troops back home from Iraq and more on the way from Afghanistan, violations of the law could increase. The problems persist even though the Obama administration has made a priority of cutting the rate of veterans’ unemployment, which is significantly higher among post-9/11 veterans than in the population as a whole.

Advocates for veterans say the system set up for service members to challenge alleged USERRA violations is onerous, with no single agency having oversight. And they note that the federal government doesn't have much incentive to improve. The federal government can be ordered to pay back wages for being in willful violation of the law, but it incurs no other penalties. A private company, by contrast, could be liable for double an employee's lost wages. "There seems to be a feeling that the federal government can get away with what they're doing," said Matthew Estes, a USERRA lawyer with the law firm Tully Rinckey. Some federal employers have forced reservists to leave military service as a condition of their hiring, which is also against the law, according to Samuel Wright, director of the Service Members Law Center at the Reserve Officers Association. "Federal agencies are routinely doing that," Wright said. The Defense Department, including the Army, Navy, Air Force and various defense agencies, had 75 USERRA cases filed with the Labor Department last year, while Veterans Affairs had the second most, with 46 complaints. Other major offenders include the Department of Homeland Security and the U.S. Postal Service. Public-sector jobs, including federal, state and local, accounted for 27 percent of the 2,884 USERRA cases handled in fiscal 2011 by Employer Support of the Guard and Reserve, a Defense Department office that tries to resolve problems through informal mediation and education.

Federal officials acknowledge the violations and say that the chief challenge has been educating supervisors in the field. The VA began in-depth training in November for managers to ensure compliance with "both the spirit and the letter of USERRA," said Mary Santiago, director of the VA's Veteran Employment Services Office. The Defense Department, along with the VA and six other agencies, formed a working group late last year to examine how to improve federal compliance. For service members, high rank has not necessarily proved to be a protection. In fiscal 2010, the Labor Department recommended that Justice officials pursue 43 alleged violations of USERRA. The Justice Department agreed to represent only three, but helped settle nine other cases. The department declined to represent 18 service members, despite Labor's conclusion that their cases had merit. Another dozen cases were still being considered by Justice at the end of the fiscal year. The Justice Department's decisions "are always based on a careful consideration of the case from a litigation and merits standpoint," said spokeswoman Xochitl Hinojosa. [Source: Washington Post Steve Vogel article 19 Feb 2012 ++]

PTSD Update 91: An insurance company that denied benefits to a military veteran faces a federal lawsuit that argues its reasoning was groundless because the U.S. wasn't at war with Iraq in 2008. Jerico McCoy, 29, said Iraq was a sovereign nation when he deployed there in 2008. He was denied benefits for post-traumatic stress disorder by his former employer's insurer, which cited an exception to its health coverage if an injury was caused by an "act of war." McCoy sued Aetna Inc. for using the exclusion to deny his benefits claim, which would have paid him his full salary of \$1,056 a week during an unpaid medical leave granted by his employer, Bank of America, according to the lawsuit. McCoy was sent twice to Iraq, once in 2003 and again in 2008. On his second deployment, he joined a psychological operations team traveling through western and southern Iraq. In the time between the deployments, McCoy took a job with Bank of America in Virginia in 2005, then switched to a bank branch in Oregon. After his second Iraq tour, he suffered from post-traumatic stress that eventually forced him to resign in April 2011, the lawsuit said.

Aetna, which administers Bank of America's benefits program, cited a clause in his benefits coverage that says disability benefits are not paid "for a disability resulting from acts of war, participation in a riot, insurrection, rebellion or civil commotion." McCoy's lawsuit argued that the Iraq war ended by the time he was deployed in October 2008, when Iraq was a sovereign country allied with the United States. Injuries suffered by soldiers who were on bases in allied nations such as those in Korea and Germany would not be considered results from an act of war, he argued. In emails with Aetna, an administrator raised questions about the depth of McCoy's disability and

said at one point that he failed to produce enough medical evidence to support his claim, according to The Oregonian. McCoy claimed that after he returned to the U.S. in 2009, he was unable to concentrate and complete schoolwork at the University of Phoenix because of his condition. He dropped out in August 2010. He returned to work in January 2011, but said his symptoms forced him to resign later. McCoy filed the lawsuit 20 FEB in U.S. District Court in Portland. No hearing dates have been set. [Source: Associated Press article 20 Feb 2012 ++]

Vet Deportation: Brothers Manuel and Valente Valenzuela, both in their 60s, are waging a legal battle against an unexpected foe: the U.S. government. They are trying to stop the country they served from deporting them to Mexico. Manuel, a former Marine, carried out rescue missions. Valente, an Army soldier, was wounded and received a Bronze Star. The brothers' cases are the latest of several that highlight what some believe is a growing trend as U.S. immigration authorities, in casting a wide net to deport illegal immigrants, also snare non-citizen veterans who have committed crimes, including misdemeanors. Immigration authorities said veterans who come under scrutiny, most of them green card holders, are treated differently, and potentially more leniently, than illegal immigrants. Military service is a positive factor that agents weigh in deciding whether to begin deportation proceedings, said Lauren Mack, a spokeswoman for Immigration and Customs Enforcement. But critics said few veterans are being spared because authorities have beefed up their deportation enforcement programs and expanded the category of crimes that make people eligible for deportations. The offenses can range from murder and weapons charges to nonviolent misdemeanor arrests such as drunk driving and shoplifting. The Valenzuelas' criminal records, according to the brothers and their attorney, Dennis Hartley, include only misdemeanors: Manuel for disorderly conduct and resisting arrest; Valente for domestic violence. The offenses were committed more than 10 years ago, they said.



Valente Valenzuela looks through the U.S.-Mexico border fence at San Ysidro during a protest over veteran deportations.

The brothers, who both live in Colorado, argue that they believed citizenship was granted to them when they took their oath of induction before heading off to war. It's unclear how many veterans have been deported or are in deportation proceedings. Immigration authorities said they do not track the information. Estimates from veterans, immigrant rights groups and attorneys range from several hundred to 3,000. Under long-standing immigration laws, all veterans are eligible to become citizens, and a fast-track program introduced in 2009 can turn green card holders into citizens in about two months, according to U.S. Citizenship and Immigration Services. In past years, the process could take significantly longer, and some veterans cite the paperwork hurdles, along with their own negligence, for failing to pursue citizenship. The Valenzuela brothers, both of whom were born in Chihuahua, Mexico, and brought into the country as children by their U.S.-born mother, said they gave little thought to their legal status as the years passed and that nothing prevented them from getting work or receiving their veterans' benefits.

Deportees are eligible for the same medical benefits as other veterans, but can't visit hospitals in the unless they enter the United States illegally – and that would be a felony. U.S. Military service guarantees their eventual return to the U.S. upon death to be buried in a national cemetery. Currently, there is no legislation that would give relief to non-citizen veterans facing deportation. A bill was introduced several years ago by Congressman Bob Filner (D-CA), a ranking member on the House Veterans' Affairs Committee, to protect immigrant veterans from deportation. It didn't go anywhere. [Source: Los Angeles Times Richard Marosi article 18 Feb 2012 ++]

Stolen Valor Update 57: Richard Cruze, 55, who posed as a Army colonel and falsified documents to obtain license plates reserved for wounded Nevada war veterans, has been arrested on fraud charges by police in Leesburg, Va. A news release from the Leesburg Police Department said Cruze had again falsified documents to show he was a highly decorated military veteran with the rank of colonel, as well as a medical doctor. According to Virginia jail records, he is also known as Jake Cruze or Jacob Reginald Cruze, the name he used in Las Vegas. A Leesburg detective arrested Cruze on 2 FEB on three felony counts: forging a public record, uttering or attempting to employ as true a forged record and making a false statement on an application for a title certification issued by the Virginia Department of Motor Vehicles. And he was arrested in connection with one misdemeanor: falsely using the word physician or doctor to advertise for a weight loss clinic. The Leesburg Police Department received a complaint 24 JAN from a business that Cruze might have committed several frauds. Detectives discovered the suspect had falsified documents to DMV and possibly to other state agencies. He appeared before a magistrate and was held without bond at the Loudoun County (Va.) Detention Center where he remained in custody, awaiting a 13 MAR hearing. Cruze had been part owner of a Leesburg weight-loss salon, Madame et Monsieur, a franchise in an international chain with headquarters in Las Vegas.

In 2004 in Las Vegas, Cruze raised suspicions of former Army Rangers when he showed up at the Riviera for their annual conference wearing a dress-blue uniform bearing a colonel insignia and numerous ribbons and medals on his jacket. But when he was asked about his military career by attendees, his comments didn't fit with events, locations and dates of military operations. A month before the conference, he had spoken to fifth-graders gathered for a career day event at Eisenberg Elementary School, where he wore a green Class A Army uniform and display of ribbons. A source familiar with his career day presentation said he gave the students a "drill sergeant" routine and later remarked that he hoped he hadn't been too hard on the students. Cruze had posted a resume with a nursing organization that said he served in Vietnam from June 1969 to September 1970 as a combat medic and had earned the Distinguished Service Cross, Silver Star, Bronze Star, Purple Heart, Cross of Gallantry, Soldiers Medal and the Army Distinguished Service Medal. But records obtained from the National Personnel Records Center in St. Louis under a Freedom of Information Act request by a nonprofit watchdog organization, the POW Network, showed that Cruze never served in combat and received no awards or decorations. Instead, he is listed as an Army reservist from July 21, 1988, to Jan. 3, 1994, who served on inactive status for a hospital unit in Phoenix.



Richard Cruze aka Jacob “Jake” Reginald Cruze,

In 2005, Cruze was cited by a Las Vegas police detective on the FBI's Special Task Force for illegally possessing Purple Heart license plates and driving without a license, which had been revoked for nonpayment of child support. In all, three tickets were issued to Cruze stemming from an investigation into public appearances he made in which he wore Army uniforms displaying the rank of colonel and ribbons and medals of valor that he never earned, including the Army's second-highest valor award, the Distinguished Service Cross. Cruze had been investigated then for federal violations of the Stolen Valor Act, which makes it illegal for people to wear any U.S. military rank, award or decorations they did not earn. The FBI took no immediate action against Cruze, but the Las Vegas police detective for the bureau's task force confiscated Cruze's Purple Heart license plates. Instead of facing Stolen Valor charges, he was cited for the traffic violations that carried combined fines of \$1,620. A justice of the peace reduced the fines collectively to \$399.

Asked why he wasn't charged with violations of the Stolen Valor Act, U.S. Attorney for Nevada Daniel Bogden responded to an email from the Review-Journal in 2006, saying, “Considering our limited resources and manning we did not feel that additional misdemeanor charges ... were necessary since the matter had already been addressed by local authorities.” A spokesman for the U.S. attorney's office for the Eastern District of Virginia said 10 FEB that no Stolen Valor charges had been filed against Cruze in relation to his fraud arrest on 2 FEB. The U.S. Supreme Court is expected to decide this year on the issue of free speech in light of the Stolen Valor Act. [Source: Las Vegas Review-Journal Keith Rogers article 10 Feb 2012 ++]

Stolen Valor Update 58: A U.S. law making it a crime to lie about receiving a military medal goes before the Supreme Court 22 FEB, with the Obama administration defending it for protecting the reputation of war heroes and opponents arguing it violated free-speech rights. The justices will hear arguments on whether an appeals court was correct to strike down the "Stolen Valor Act" adopted by Congress in 2006 for infringing on constitutional free-speech rights, a case about how far the government may go to prosecute false claims about military honors. Opponents said the law swept too broadly, suppressed speech and covered innocent bragging, satire, parody and even statements that caused no harm, like those at issue in the case by a serial liar who held local political office in California. The Obama administration argued in a written brief filed with the Supreme Court that the law was necessary to protect the integrity of the nation's system of military honors. It said the lies take away from the honor bestowed on deserving war heroes. Administration attorneys said the First Amendment does not include the right to make "knowingly false factual statements" about military awards and urged the law be upheld as constitutional. The law "does not restrict expression of opinion about military policy, the meaning of military awards, the values they represent or any other topic of public concern," Solicitor General Donald Verrilli wrote. He will argue the case. The law targets individuals who falsely claim, verbally or in writing, that they won a military medal or decoration. Violators can face up to six months in prison, or up to one year for elite awards, including the Medal of Honor.

The case involved Xavier Alvarez, who was elected to a California water board in Pomona. He introduced himself at a board meeting in 2007 and said he was a retired Marine who won the Medal of Honor, the nation's highest military decoration. Alvarez never received the award and never served in the military. The FBI got a recording of the meeting and Alvarez became one of the first defendants prosecuted under the law. He pleaded guilty and was sentenced to pay a \$5,000 fine and perform more than 400 hours of community service at a veterans hospital. He then challenged the law for violating his free-speech rights and a U.S. appeals court ruled in his favor. His attorney Jonathan Libby told the Supreme Court in a written brief there was no evidence that anyone believed Alvarez or that he received any benefit from his lie. "He has told a bunch of whoppers, his claimed receipt of the of

the Medal of Honor being just one of many," said Libby, a deputy federal public defender in Los Angeles who will argue the case before the high court. "But exaggerated anecdotes, barroom braggadocio and cocktail party puffery have always been thought to be beyond the realm of government reach and to pass without fear of criminal prosecution," Libby said. Only 45 cases have been brought in the first five years the medal law has been in effect, Libby said.

The chief judge on the U.S. Court of Appeals for the 9th Circuit which considered the case strongly agreed with Alvarez. Judge Alex Kozinski said it would be "terrifying" and would permit censorship by "the truth police" if people could be prosecuted for "the white lies, exaggerations and deceptions" that are part of normal social interactions. The Supreme Court in recent years has generally supported free-speech challenges to government restrictions. In 2010, it struck down a federal law that banned videos depicting animal cruelty for violating free-speech rights. If the justices strikes down the law, legislation already has been introduced in the U.S. House of Representatives to make such lies a crime only if there was intent to profit. A number of veterans groups and 20 states supported the government while the American Civil Liberties Union, 23 news media organizations and a wide range of free-speech advocacy groups backed Alvarez. The Supreme Court case is United States v. Xavier Alvarez, No. 11-210. [Source: Reuters James Vicini article 17 Feb 2012 ++]



Stolen Valor Update 59: The U.S. Supreme Court heard oral arguments 22 FEB in the case of Xavier Alvarez who was charged with a violation of the Stolen Valor Act for his fraudulent public claim of having received the Medal of Honor. Alvarez has never served a day in the military. However, after being elected to a local water board in California, he made the claim that he was a Medal of Honor recipient. While even his own defense attorney noted that Alvarez was an inveterate liar, Alvarez was nonetheless supported by various free-speech advocates who felt that the statute was too broad. Although it is dangerous to read much into the questions posed by the justices during this hearing, most questions fell into two camps:

- 1) What is the nature of the harm, if any, caused by fraudulent claims of military heroism?
- 2) Would upholding the statute have a chilling effect on other forms of speech, such as claims made in political campaigns.

Justice Stephen Breyer, in particular, seemed unwilling to accept the argument that no harm occurs from these lies. "My theory is that it does hurt the medal, the purpose, the objective, the honor, for people falsely to go around saying that they have this medal when they don't." Justice Antonin Scalia, another First Amendment stalwart, noted that perhaps deference should be made to the Congress. "When Congress passed this legislation, I assume it did so because it thought that the value of the awards that these courageous members of the armed forces were receiving was being demeaned and diminished." On the question of whether upholding the act would chill other protected speech, the public defender for Alvarez, Jonathan Libby, seemed to concede that no such chilling effect would take place. When asked by Justice Elena Kagan what truthful speech would be chilled by upholding the act, Libby said,

"It's not that it may necessarily chill any truthful speech. I mean, it's — we certainly concede that one typically knows whether or not one has won a medal or not. We certainly — we concede that point." Justice Kagan responded with surprise, noting "That's a big concession, Mr. Libby." It may be months before the high court rules on the case. [Source: American Legion News 23 Feb 2012 ++]

Stolen Valor Update 60: A Louisiana State University student was charged with falsely claiming he was awarded the Purple Heart and with wearing military medals without authorization. An indictment handed up 15 FEB by a federal grand jury in Baton Rouge claims 31-year-old Andrew Bryson defrauded the state Office of Motor Vehicles into giving him a military honor license plate for Purple Heart recipients in 2009. The indictment was unsealed following his arrest 16 FEB. Bryson also allegedly wore several military medals and ribbons, including the Purple Heart and Joint Service Commendation medals, at an awards ceremony honoring veterans in 2010. Bryson faces a maximum sentence of 2 years in prison and \$200,000 in fines if convicted of the charges. [Source: Associated Press article 17 Feb 2012 ++]

VA Lawsuit ~ DOMA: The Justice Department will not defend the Defense Department and Department of Veterans Affairs in a lawsuit filed last year intended to extend rights and benefits to married same-sex couples in the military. Attorney General Eric Holder informed House Speaker Rep. John Boehner by letter on 17 FEB that the DoJ would not defend against the suit challenging the Defense of Marriage Act. DOMA, a federal law that explicitly defines marriage as union between one man and one woman, is currently what prevents spouses of gay troops from receiving the same benefits as those of heterosexual soldiers, sailors, Marines and airmen. These include medical and dental care, basic allowance for housing, family separation benefits, military ID cards, and burial benefits. The administration last year said it would stop defending DOMA against lawsuits, but that decision did not extend to the military or the VA.

In his letter, Holder said he determined that DOMA provisions “as applied to same-sex couples who are legally married under state law, violate the equal protection component of the Fifth Amendment [of the Constitution].” “The legislative record of [the DOMA] provisions contains no rationale for providing veterans' benefits to opposite-sex couples of veterans but not to legally married same-sex spouses of veterans,” Holder states in the letter. “Neither the Department of Defense nor the Department of Veterans Affairs identified any justifications for that distinction that would warrant treating these provisions differently from Section 3 of DOMA.” “I will instruct [DoJ] attorneys not to defend those provisions against the equal protection claims” of the lawsuit, he wrote. Aubrey Sarvis, an Army veteran and now executive director for the Servicemembers Legal Defense Network (SLDN), said he was pleased with Holder’s decision. “We are also delighted that, for the first time, he has said that separate definitions that apply to military veterans are also unconstitutional,” Sarvis said.

SLDN filed the lawsuit in Massachusetts in October on behalf of current servicemembers and veterans. A month later the organization sought a summary judgment against the government, arguing that the material facts of the case – that gay married couples were not being treated equally under the law – were not in dispute. Just two days ago U.S. District Court Judge Richard Stearns granted a 60-day delay in the case to give the government time to respond. Even with Holder’s decision today, SLDN spokesman Zeke Stokes said nothing will likely change since the 60 day stay remains in effect. The ball is now in Boehner’s court. Last week a National Guard chief warrant officer from New Hampshire met with an aid to Boehner to make her case against DOMA. In a letter to Boehner, CW2 Charlie Morgan said she is battling breast cancer for the second time. In addition to not receiving the usual medical, travel and transportation allowances, commissary and other benefits that straight military spouses get,

Morgan said DOMA will prevent her wife from receiving survivor benefits in the event she dies. Stokes said he hopes Boehner "heard the plea by CW2 Charlie Morgan on behalf of the many military families affected by these discriminatory laws and will elect not to defend this suit." [Source: Military.com] Bryant Jordan article 18Feb 2012 ++]

Medicare Reimbursement Rates 2012 Update 10: Congress has deferred steep physician payment cuts under the Medicare program until 2013 but has left in place a pay formula that will slash physician rates by an estimated 32% next year. A 27.4% cut was set to hit doctor pay on March 1, but federal lawmakers adopted legislation that continues current Medicare payment rates to physicians and other health professionals under Part B for the remainder of 2012. The legislation had been drafted by a congressional conference committee that was created to craft a longer-term solution after lawmakers agreed only to a two-month delay of the Medicare doctor pay cut in December 2011. The newly passed bill also includes extensions of other health provisions, such as higher pay to physicians practicing in low-cost areas and exceptions to coverage caps on outpatient therapy services. The House approved the measure on Feb. 17 by a vote of 293-132, and the Senate followed suit the same day with a 60-36 vote. President Obama signed the package on 23 FEB, which also extends a payroll tax cut for 160 million working Americans and preserves some extended unemployment insurance to those out of work for long periods.

The conference committee had debated allocating unspent overseas war funds to cover the more than \$300 billion cost to repeal the SGR altogether, but lawmakers could not find enough support for the idea, which some dismissed as a budget gimmick. The temporary payment patch will lead to deeper cuts next year. The Congressional Budget Office has projected that simply freezing Medicare pay rates in 2012 would cause the scheduled reduction to deepen to 32% in 2013. The American Medical Association and other physician organizations opposed the temporary approach because it failed to replace the payment formula. The patch costs nearly \$20 billion but would increase the future cost of a permanent fix by \$25 billion, said AMA President Peter W. Carmel, MD. "We are deeply disappointed that Congress chose to just do another patch -- kicking the can, growing the problem and missing a clear opportunity to protect access to care for patients," Dr. Carmel said in a statement before the congressional votes. "Shortly after the coming elections, access to care for seniors and military [families] will again be threatened by an even larger cut, and members of Congress will need to take swift action to end the broken formula."

The 10-month Medicare pay patch also left many of those voting for the bill displeased with the situation. Rep. Dave Camp (R-MI) who was co-chair of the conference committee, preferred a House bill that included a two-year payment fix that was fully offset by cuts elsewhere in the health system. "If I had my way, the bill passed by the House in December would be law," Camp said. "That was the only bill that extended these programs through the end" of 2013. The temporary doctor pay freeze in the approved package is paid for by a \$5 billion reduction to a federal prevention fund set up under the health system reform bill, reduced payments to hospitals for patients' bad debt and pay cuts to clinical laboratories. House Minority Whip Steny Hoyer (D, Md.) said he would vote against the conference report because it also raised pension contribution requirements for federal workers to help pay for the package's other provisions. But he also criticized his colleagues for not addressing the SGR permanently, calling the 10-month extension a "silly little game." [Source: American Medical News Charles Fiegl article 17 Feb 2012 ++]

Small Claims Court: California resident Heather Peters recently won \$9,867 from Honda because her Civic didn't live up to the 50 MPG Honda had advertised. She was not satisfied with the meager offer from Honda to resolve her complaint and was faced with the decision to join a class action suit or to take them to court. She decided the latter, did her homework, and presented a compelling case without a lawyer (not allowed). If you feel

you have been screwed over by a merchant, business, or acquaintance and are interested in learning more about suing in small claims court check out her website <http://www.dontsettlewithhonda.org/#!small-claims>. It contains a 'Small Claims' section which notes the maximum you can sue for, whether or not attorneys are allowed, and links to information on filing small claims cases in all 50 states. For instance, the California link provides information that will help you:

- Learn about going to small claims court;
- Using instructions and guides to help you with your case;
- Learn about trying to resolve your dispute out of court, and
- Get answers to frequently asked questions.

It covers the following basics:

- General information about small claims court and cases and making the decision if small claims is right for your situation using helpful resources.
- Small Claims Cases: Suing Someone, Being Sued, Mediation, and Going to Court
- Researching Your Case so you can be better prepared when you go to court.
- How to collect the judgment if you win, using tools and instructions on how to work with the other side to get paid.
- Ways to pay your judgment if you lose your small claims case including working out payment arrangements and payment plans.
- How to appeal the small claims judgment.

If you are suing it provides the following checklist and elaborates on each item:

- 1) Talk to the person or business you are thinking about suing. Try to work things out before going to court. You can also write a "demand letter" that asks the person or business in writing what you are asking for. You can get help in preparing a demand letter at <http://www.courts.ca.gov/11145.htm>.
- 2) Try mediation or other alternatives to lawyers and courts. You can try mediation throughout your case, even if it does not work now.
- 3) Consider if going to court can give you what you want. If you win in court, the court cannot collect the money for you. Is the person you are suing able to pay? If you want to sue a neighbor because the neighbor behaves badly, will suing make the neighbor behave better? Courts cannot force good behavior. Will the time and money it takes to go to court be worth the likely outcome? Ask yourself these questions before filing your claim so you do not find yourself worse off after suing than if you did not sue at all.
- 4) Learn about how small claims court works. Go to the courthouse and watch a small claims hearing. That way you will know what to expect. Get help from your court's small claims advisor listed at <http://www.courts.ca.gov/selfhelp-advisors.htm>.
- 5) If you decide to go to court, follow these steps: Figure out how to name the defendant, ask for payment, find the right court to file your claim, fill out your court forms, file your claim, serve your claim, and go to court. Guidance for each step is provided on the website.
- 6) After your hearing, read what to do on the Plaintiff's Post-Hearing Checklist.

[Source: MoneyTalksNews Stacy Johnson article 14 Feb 2012 ++]

POW/MIA Update 14: The following MIA/POW's have been identified. For additional information on the Defense Department's mission to account for missing Americans, visit the Department of Defense POW/Missing Personnel Office (DPMO) web site at <http://www.dtic.mil/dpmo> or call (703) 699-1420 :

Korea. DPMO announced 13 FEB that Army Cpl. William R. Sluss, 21, of Nickelsville, Va., was to be buried Feb. 18, in Gate City, Va. In late November 1950, Sluss and elements of the U.S. 2nd Infantry Division were attacked by Chinese forces near Kunu-ri, North Korea. On Nov. 30, 1950, Sluss, along with many other American soldiers, was listed as missing in action as a result of that heavy fighting. In 1953, returning Americans who had been held as prisoners of war reported that Sluss had been captured by the Chinese, and died in the spring of 1951 as a result of malnutrition while in a prisoner of war camp in North Phyongan Province, North Korea. Between 1991 and 1994, North Korea gave the United States 208 boxes of remains believed to contain the remains of 200-400 U.S. servicemen. North Korean documents, turned over with some of the boxes, indicated that some of the human remains were recovered from North Phyongan Province, where Sluss was believed to have been held in "Camp 5." To identify the remains, scientists from the Joint POW/MIA Accounting Command and the Armed Forces DNA Identification Laboratory used circumstantial evidence, forensic identification tools such as dental records and radiographs, and mitochondrial DNA – which matched Sluss's brother and sister.-

VA Hospice Care Update 02: Hospice is a specialized type of healthcare that is designed to provide supportive care and services to persons in the final phase of a life-limiting illness. The focus is on the patients' comfort and quality of life, and relief for the entire family from the burdens typically associated with this journey. Turning to hospice can be a tough choice, but finding appropriate care can be even more challenging for the families of veterans. "As veterans age, they face a distinct set of needs and challenges, including medical issues related to where they served, memories that might trigger anxiety and stoicism that makes asking for help difficult," said the founder and president of LightBridge Hospice & Palliative Care Jill Mendlen. Their facility was recently certified to take part in the "We Honor Veterans" program headed by the National Hospice and Palliative Care Organization and the Department of Veterans Affairs. One of only 12 hospice facilities in the U.S. to meet the criteria, LightBridge offers specialized training to its staff to help meet the needs of ailing veterans. "After all they've done for us, it's a privilege to thank those who served with the superior end-of-life care that they deserve," Mendlen said. The facility's individualized program of care is tailored to meet the entire family's needs, with a variety of services that provide comfort and support. A patient's Individualized program of care may include:

- Regular visits by each member of the hospice team to place of residence.
- Medications related to the hospice diagnosis.
- Medical supplies and equipment.
- Personal care and grooming.
- Emotional support and guidance.
- Bereavement care and counseling.
- Financial consultation.
- Education and support for caregivers.
- Physical and speech therapies.
- Aromatherapy, Healing Touch or other integrative therapies

Last week, that care was demonstrated as they hosted a ceremony to honor residents at Poway's Solaris Senior Living Community. Led by Ralph Moran, 27, a volunteer and former Marine sergeant, four retired military personnel were presented with a plaque, pin and pillow sewn from uniforms by spouses of active duty military. Hospice patients John Fain, 91, and Wayne Howard, 86, were joined by Flowers Hogan, 83, and Henry Miller, 88 for the event. Serving veterans in Poway and throughout the county is something LightBridge's senior vice president, Pamela Hough, says hits close to home. "This level of expertise is very personal to the staff at LightBridge because many of us have a military background or family in the military," she said. For more information about the veteran program at LightBridge, or to volunteer, contact 858-458-2992/3655F, 6155 Cornerstone Court East, Ste. 220, San Diego, CA 92121 or Email: contact@LightBridgeHospice.com or web

<http://www.lightbridgehospice.com>. For additional info on VA's Hospice and Palliative care programs refer to [http://www.va.gov/GERIATRICS/Hospice Palliative Care2.asp](http://www.va.gov/GERIATRICS/Hospice_Palliative_Care2.asp). [Source: Poway Patch | Town Pulse Annie Lane article 16 Feb 2012 ++]



A salute between Henry Miller 88 and former Marine Sergeant Ralph Moran.

Ensuring Correct Surgery: The VA National Center for Patient Safety offers a free, downloadable brochure designed to educate patients on what will happen before their surgery and how caregivers will ensure safe and correct surgery. The “Ensuring Correct Surgery” pamphlet includes space for patients to write down medication information and answers to various questions, including the name of the surgery that will be performed and what body part will be operated on. The pamphlet also explains the “time out” process surgeons and nurses take to ensure correct surgery and tips for how patients can facilitate this process, such as ensuring “X” or “yes” marks on the site of surgery is not rubbed off. Potential surgery patients can review or download the brochure to take with them to their pre-op appointment at <http://www.patientsafety.gov/SafetyTopics/CorrectSurg/CorrSurgPt.pdf> or in the attachment to this Bulletin titled, **“Ensuring Correct Surgery Brochure”**. [Source: Beckers ASC Review Jaimie Oh article 16 Feb 2012 ++]

Aid & Attendance Update 08: Aid and Attendance (A&A) is financial assistance from the Veterans Administration that helps with daily activities like bathing, dressing and taking medications. As a general rule, a veteran or the spouse of a veteran who is receiving care at home or in a long-term care facility who owns a home, a car and limited cash assets may be eligible for A&A. So-called “advocates” are targeting veterans and their spouses with a scam. They are telling veterans to shelter assets in order to qualify for Aid and Attendance from the Veterans Administration. If it sounds too good to be true, it probably is. The Washington State Attorney General is investigating complaints about people who conduct seminars at senior centers and long-term care facilities telling veterans and their families that they can help with A&A eligibility by putting assets into a trust or giving them to their children, who are then advised to buy an annuity. These “advocates” make large commissions from selling the trusts and annuities. They promise help with applying for A&A, but they usually don’t submit your application until a trust or annuity is bought. There are three major problems with this scheme.

- **First**, even though there is currently no penalty for veterans to give away assets in order to meet the financial criteria to qualify for A&A, there is a five-year look-back period for gifts when applying for Medicaid (a government program that helps people pay for long-term care when they cannot otherwise afford it). This means putting assets into a trust or gifting them to children can result in denial of Medicaid benefits. In that case, a trust and/or gift may have to be undone in order to qualify.

- **Second**, the problem gets even worse because undoing a trust or annuity usually results in less than 100 percent of the initial investment being returned. An attorney may need to assist in destroying the trust and there are large surrender fees paid to get your money back out of the annuity. Also, your children may face a civil fine or need to pay for your care while you are ineligible for Medicaid.
- **Third**, you do not need the assistance of an advocate to apply for A&A. Free help is available. The V.A., the American Legion, the Washington State Department of Veterans Affairs, and the VFW can all be directly contacted for help.

Older adults are often prime targets for dishonest firms which deliberately prey on the goodness, loneliness, greed, or gullibility of people who have reached their golden years. Many of these scams are played out over the telephone, door to door or through various advertisements. An extensive list of such scams and how they are presented is available at <http://www.atg.wa.gov/searchresults.aspx?q=Scams>. In Washington complaints against these and the A&A scams can and should be made to the Washington State Attorney General's Office at:

- Tel: M-F 1000 to 1500 (360) 753-6200; 1-800-551-4636 (in-state only); 1-206-464-6684 (out-of-state callers); 1-800-833-6384 (for the hearing impaired)
- Mail: 1125 Washington Street SE, PO Box 40100, Olympia, WA 98504-0100
- On Line: <https://fortress.wa.gov/atg/formhandler/ago/ContactForm.aspx>

[Source: The Enumclaw Courier-Herald article 17 Feb 2012 ++]

GI Bill Update 110: Lawmakers concerned over schools targeting veterans for their GI Bill education benefits on 16 FEB introduced legislation to limit how much federal funding those institutions can receive. The measure is the second major legislative effort in the last month aimed at schools with high veteran enrollment and low student satisfaction, but neither measure appears likely to pass. Bill H.R.4055 sponsor Rep. Jackie Speier (D-CA), said that while she's hopeful the issue can become a bipartisan rallying point, she has talked to colleagues leery of angering for-profit education lobbyists in an election year. "Their influence is huge," she said. "But this shouldn't be a political issue. We want to make sure that veterans go to colleges that are accountable, provide a quality education and give them a good shot at getting a decent job." The legislation takes aim at federal law prohibiting schools from getting more than 90 percent of their overall revenue from federal dollars. Currently, that includes grants and loans from the Department of Education, but not GI Bill money, which comes from the Department of Veterans Affairs. Speier's bill and mirror legislation S.2020 introduced by Sen. Tom Carper (D-DE) would fix that, counting veterans education benefits like other federal monies. Legislation introduced last month by Sen. Tom Harkin (D-IA) would do the same but cap the allowable federal dollars at 85 percent.

Carper said the current system provides incentives for unscrupulous school administrators to recruit veterans to take advantage of the guaranteed payouts. "They're rewarded for enrolling those students but given little incentive to make sure that they graduate." Supporters from the Military Officers Association of America and Iraq and Afghanistan Veterans of America said they hope the legislation prompts schools — and in particular, for-profit colleges — to clean up their recruiting practices and education priorities. For-profit colleges have long opposed counting GI Bill funds toward the 90 percent cap, saying it could unfairly limit veterans' choices and force some students into transferring schools. In a statement, Association of Private Sector Colleges and Universities president Steve Gunderson said that his group is committed to finding "positive and constructive solutions that both protect our veterans and their access to educational opportunities" without the need for new legislation. APSCU officials said nearly 200,000 students use GI Bill benefits to attend non-traditional colleges. Carper said that more than \$11 billion has been distributed through the post-Sept. 11 GI Bill program, making the issue not just about honoring

veterans but providing accountability for taxpayer funds. [Source: Stars & Stripes Leo Shane article 16 Feb 2012 ++]

VA Homeless Vets Update 29: The Department of Veterans Affairs is hoping to move some of America's homeless veterans off the streets in part by giving them jobs at the country's national cemeteries. Veterans in the program will be trained as cemetery caretakers and representatives, VA Secretary Eric Shinseki told members of the House Veterans Affairs in testimony 15 FEB. "Veterans who successfully complete the program at national cemeteries will be guaranteed full-time permanent employment at a national cemetery or may choose to pursue employment in the private sector," he said. The VA's National Cemetery Administration oversees 131 cemeteries currently, with plans underway to develop five more, officials said during the 2012 budget rollout earlier this week. The apprenticeship program comes even as the union representing federal employees slammed the VA for cutting back on its federal workforce by hiring private contractors for caretaker jobs.

John Gage, president of the American Federation of Government Employees, said in a statement last week that the outsourcing began during the Bush administration but has continued. Gage said the outsourcing violates the "Vow to Hire Heroes Act" intended to boost veteran employment. "The outsourced jobs include many entry level jobs that disabled veterans rely on to get back on their feet after returning from the battlefield," he said. The cemetery administration's budget for next year only supports four additional jobs, so additional trainees will have to wait until current employees leave or retire. The VA currently has about 1,700 full-time employees, according to officials. The apprenticeship program is part of the "employment" category, one of the "Six Pillars" of the VA's plan to end veteran homelessness. The others are outreach, treatment, prevention, housing and support services, and community partnerships.

DoD Lawsuit ~ DD 214: Louie Castro is a 28-year-old religion major at Florida State University who should have started the final semester of his senior year last month. Instead, he spent 12 days in jail after being arrested at Miami International Airport because of an administrative error the Army apparently made when he left the service more than nine years ago. The Army considered him absent without leave. Upon release he was told he must fly to Fort Carson, Colo. — a base where his old Fort Hood unit, the 4th Infantry Division, relocated in 2009 — to resume his old life as an Army private long enough for military personnel officers to fix his paperwork. In the meantime, he missed the start of classes and was forced to withdraw, costing him his financial aid. He will not graduate on schedule. A civilian lawyer representing Castro believes the veteran has a strong legal case against the government. He said conversations with Fort Carson officials indicate that many others have been arrested on similar warrants and that potentially hundreds of other former soldiers once based at Fort Hood could be unaware that warrants are out on them, ticking time bombs in their official government files because of clerical mistakes by military personnel officers. "We believe there are many more former soldiers that are either wrongfully in military custody or were in custody or released," said Castro's civilian attorney, Jonathan Crisp, adding that he had "information from the AWOL apprehension officer, civilian liaison officer and the unit clerk that this has been an issue for some time."

Castro enlisted in the Army in FB 01, when he was 17, and there is no dispute that his military career ended ignobly. He went AWOL in JUL 01, returning home to Florida. He was apprehended there more than a year later during a routine traffic stop, and sent to Fort Hood in shackles. There, he recalled this week, he served without further incident until then-Maj. Gen. Raymond T. Odierno, the division commander, approved Castro's request for a discharge in lieu of court-martial. The paperwork Odierno signed on 4 DEC 02, directed that Castro receive an

other-than-honorable discharge and “be separated from the Army within five working days.” A sergeant from his unit took him around post, where he turned in his military equipment and clothing, listened as he was briefed on what transition assistance and benefits remained available to him, and was checked out at the medical and dental facilities. He gathered signatures as he went and brought the paperwork to his company commander, Capt. Hector Hernandez. “The last thing I needed according to him was to sign my unit clearance paperwork,” Castro said. “He signed it, and I said, ‘Is that the last thing I needed to do?’ and he said yes.” Castro packed his things and caught a Greyhound bus to Florida.

It never occurred to him, he said, that the thick file containing Odierno’s order and all of his out-processing paperwork did not include a Form DD-214, “Certificate of Release or Discharge From Active Duty.” “Maybe I’d get it in the mail,” Castro said. “I knew I wasn’t going to have to prove I was in the military to anyone because I had been stripped of all my [significant] benefits.” In DEC 2011, Castro flew to Europe to visit his girlfriend, Lane Turtle, an American who teaches English in France. When Castro returned to the United States on 2 JAN, customs officers found an Army warrant for his arrest. He then spent time in three jails en route to Pinellas County, Fla. Besides the Army warrant, Castro also had an unpaid fine for loitering from 2005, he said. But after he was brought to court and paid that, he said, he was returned to jail and “put in solitary confinement for four days for the Army hold.” He was allowed to leave his cell just twice a day, to make a phone call or take a shower. His mother contacted Capt. Larry Kersey at Fort Stewart, Ga., who arranged for Castro to be released from jail on the condition that he go to the airport in Tampa, where there would be a plane ticket waiting for him to fly immediately to Fort Carson. But when he arrived at the airport, U.S. Airways employees couldn’t find any record of a reservation or ticket for him. Unable to afford a ticket on his own, and worried about getting arrested again, Castro left a phone message for Kersey, tracked down the trial defense service office at Fort Carson, and ultimately retained Crisp, a former judge advocate general officer who now practices in Pennsylvania.

According to internal Army emails obtained by Stars and Stripes, there is little doubt that back in 2002, Castro’s unit simply didn’t take him to the office at Fort Hood where he should have been given his final orders and DD-214. Michael Redwine, a civilian human resources supervisor at Fort Hood wrote on Jan. 30 that there is no way to finalize Castro’s paperwork even these many years later without forcing him to travel to Fort Carson. Short term, Crisp’s goal is to convince Army officials simply to rescind the warrant, correct Castro’s records and issue a DD-214 without requiring him to travel to Colorado. But longer term, Crisp said Castro deserves a significant damages payment from the government for its error, as do any other soldiers who may have had incorrect warrants. While the Feres doctrine, prevents soldiers from suing the Army, Crisp pointed out that Castro isn’t a soldier. The Army’s personnel office only thinks he is. [Source: Stars & Stripes Bill Murphy article 1 Feb 2012 ++]

DoD Sexual Abuse Update 02: “Vietnam Veterans of America is enraged by the comments of FOX Network’s Liz Trotta, who, in a 12 FEB edition of America’s News HQ, challenged the Pentagon for its increased spending on programs for victims of sexual assault,” John Rowan, VVA National President said. In response to a DoD report showing a 64 percent increase in violent sexual assaults since 2006, Trotta remarked, “Well, what did they expect? These people are in close contact.”

“What did they expect?” said Marsha Four, chair of VVA’s Women Veterans Committee. “I can tell you what we, as women, expected when we volunteered to serve our country during the Vietnam War. We expected to be treated equitably and with respect. Those of us who worked through the turmoil of the sixties and seventies fought hard for equal rights, and we are appalled that, decades later, those who serve our nation in the armed forces are still fighting for equal rights.

“Clearly Trotta is not in touch with the reality of sexual assault in the military, as she appears to be unaware that men also have had to endure this shocking assault,” noted Four. “Further we do not believe that all the thousands upon thousands of men and women who serve this great nation engage in behaviour that is less than honourable when placed in situations where they must coexist. Trotta's comments are insulting to men and women alike.”

Said Rowan, “Ms. Trotta's despicable commentary has sent a shock wave through the ranks of our membership and beyond. No institution in America condones the disgrace of sexual assault. It is not accepted in corporate America, nor is it on the streets of our towns and communities. Why should sexual assault in the military be anything less than criminal? As the Department of Defense grapples with the problem, it must take responsibility at all levels of command, and leadership must be held accountable.”

“As veterans who fought to uphold our Constitution, we hold sacred all the rights it insures, said Rowan. “As such, we are appalled that Ms. Trotta would use the Fourth Estate as a vehicle to condone the criminal acts of some by contending that sexual assault in the military is 'expected' behavior. It is a disgrace that FOX would stand behind this type of commentary. Ms. Trotta owes the men and women of our military and those in the veterans' ranks an apology, and VVA believes FOX should demand it of her.”

[Source: Vietnam Veterans of America Press Release 16 FEB 2012 ++]

DoD 2013 Budget Update 10: The Pentagon’s new defense budget sets up a politically charged competition within the US military – one that pits active-duty troops against military retirees who have served in previous wars. In other words, the Pentagon can either cut the amount it spends per service member, or it can increase the fees that retirees pay for health care and other benefits. Personnel costs in the Pentagon’s base budget have grown enormously over the past decade – up 90 percent since 2001. These costs now represent one-third of the Pentagon's budget. If the Pentagon continues at this rate and the overall defense budget stays flat, by 2039, “personnel costs would consume the entire defense budget,” says Todd Harrison, an analyst at the Center for Strategic and Budgetary Assessments in Washington. “We obviously can’t let that happen,” he adds. “That won’t happen.”

The increase in the cost per person has been driven in no small part by new and expanded benefits for retirees, including a health-care program that did not exist before 9/11. This health-care benefit, a Medicare supplement called TRICARE for Life, costs some \$11 billion a year. “That’s not a small amount of money,” Mr. Harrison says, adding that it amounts to the price of an aircraft carrier every year. At the same time, overall personnel costs continue to grow. For every dollar in basic pay that the Pentagon currently spends, it must now set aside roughly 33 cents to pay the expected retirement benefits of US troops who are serving today. This means that personnel costs are consuming an increasingly large share of the military budget, affecting the amount of money that the Pentagon spends on “research and development, readiness, training, and other priorities,” Harrison says. “It’s an intergenerational competition that’s going on in the budget whether we like it or not,” he says. “This is one that people don’t like to talk about – and you don’t hear the military framing it this way.” Perhaps the hardest problem is that the United States currently has more military retirees drawing pay than active-duty troops: Some 2 million retirees draw pay, versus 1.5 million in the active-duty force.

Under the 2013 defense budget, the Pentagon is planning to cut the active-duty Army and Marine Corps by 72,000 and 20,000, respectively, over the next several years. That would bring the forces roughly back to the levels they were in 2005. The Pentagon has already announced plans to slow the growth in basic pay, raise the fees that retirees pay for health care, and form a commission to study retirement benefits. Now, the new Pentagon budget quadruples the premiums that the highest-earning retirees must pay in the years to come for TRICARE for Life. This

is likely to prompt backlash, but it was either raise the premiums or “make much larger cuts in force structure, and we don't want to do that,” Robert Hale, the Pentagon's chief financial officer, said in a briefing Monday. Also, pay raises for troops will be lower – probably decreasing from 1.7 percent annually in 2013 and 2014 to 0.5 percent in 2015 and then back up to 1 percent in 2016 (assuming some sort of economic recovery), according to Mr. Hale.

The question remains whether the Pentagon can slow the growth in personnel costs per person in a way that it can avoid deeper cuts in the size of US forces, or end strength, Harrison says. “I think that’s what’ll end up happening,” he says. “If they can’t slow the growth in the costs per person, we’re going to see deeper reductions in end strength than are already planned.” That is a possibility the Pentagon is already exploring. Retention rates are high in the military given the weak economy, Hale says. As a result, the Pentagon will tighten reenlistment standards, and it's also looking into incentives to encourage troops to leave the military. Even so, “I don't think we can stand here and say there won't be any involuntary separations. We're just going to see how the economy recovers,” he adds. “We'll try to do this in as humane a way as we can.” [Source: The Christian Science Monitor Anna Mulrine article 13 Feb 2012 ++]

DoD 2013 Budget Update 11: Refer to the Bulletin attachment titled, “**DOD FY2013 Budget MHS**” for an overview of the President’s Military Health system (MHS) budget proposal for fiscal year 2013. The proposal includes shifting about \$13 billion in health care costs from the Pentagon to retirees over the next five years. If approved by Congress **ALL** military retirees and active duty service members will see increases in their health care costs under the proposed Department of Defense (DOD) FY 2013 budget. Current fees and copays will drastically increase in every area over the next five years. Fees and copays will nearly double for lower retirement pay earners; however, because the budget proposals include tiers which tie future increases based on retired pay, many will pay more than four times the current amount within five years.

In addition to increasing existing fees and copays (starting Oct 1, 2012), the budget proposal would also institute entirely new and costly enrollment fees for TRICARE Standard and TRICARE for Life (TFL). For example, a TFL beneficiary making less than \$22,589 would pay \$150 per individual by FY 2016, and the fee would be indexed to civilian medical inflation thereafter. Active-duty service members and their families would also feel the pinch as copays for brand name drugs would double in 2013 for all pharmacy beneficiaries and would continue to rise each year. The military community should not stand by and allow the Defense budget to harm the military and its personnel. VFW, USDR, NAUS, FRA, and MOAA have put out ‘Action Alerts’ for their members to use to oppose any increases in healthcare costs for all military retirees and our service members. Congress must support a budget that does not include fee increases which passes budget savings on to our service members and retirees.

Action is Needed: Contact your Legislators today and urge them to block DOD's authority to increase any TRICARE fees as part of the Defense Authorization bill. Those who have fought for our country deserve no less. Congress should insist that DOD find efficiencies in other areas and leave those who have fought and continue to fight for our country out of any budget savings. Let them know we expect any fee increases to be dead on arrival! One means to do this is to utilize one of the following Action Alerts editable messages which allow you to direct your concerns to your legislator:

- **VFW:** <http://capwiz.com/vfw/issues/alert/?alertid=61005316&queueid=7927416891>
- **USDR:** <http://capwiz.com/usdr/home/>
- **MOAA:** <http://capwiz.com/moaa/issues/alert/?alertid=60997821&PROCESS=Take+Action>

- NAUS: <http://capwiz.com/naus/home/>
- FRA: <http://capwiz.com/fra/home/>

[Source: Various Feb 2012 ++]

DoD 2013 Budget Update 12: The Veterans of Foreign Wars warns that the Defense Department’s reduced budget growth in the coming years could mean the end of the all-volunteer force and the return of the draft. “A secure America needs a strong military ... messing with military pay and benefits is a clear signal to the troops and their families that the budget is more important than people,” VFW national commander Richard DeNoyer said in a statement 23 FEB. “That is going to seriously hurt recruiting and retention, and potentially end the all-volunteer force, because nobody wants to work for an ungrateful employer in a vocation as inherently dangerous as ours.” The 2 million-member VFW issued a “legislative alert” <http://capwiz.com/vfw/issues/alert/?alertid=61030611> and also published a message on Facebook to get its message out. The organization is asking its members and other supporters to let Congress know it needs to prevent budget changes that hurt quality of life for troops, their families, and future retirees. “There is no military personnel issue more sacrosanct than pay and benefits,” DeNoyer said in his statement. “Any proposal that negatively impacts any quality of life program must be defeated, and that’s why the VFW is asking everyone to join the fight and send a united voice to Congress.” DeNoyer called the proposed savings measures “penny-pinching servicemembers to the point of dismantling the all-volunteer force.”

“At least in the past, the government waited for the wars to end before it downsized the military,” VFW spokesman Joe Davis told Military.com. “No longer.” Davis said it’s possible the U.S. could be forced to return to selective service if the government strips away too much in troops’ pay and benefits. “In a volunteer military, the troops get a vote ... to get in and get out,” he said. “The last thing anyone wants to do is stick around where not wanted. It is entirely possible, especially when the economy turns -- and it will turn.” Only seven years ago, Davis observed, the military had to offer huge enlistment and re-enlistment bonuses to get and retain a high-quality force. Those efforts came as the war in Iraq grew increasingly bloodier. At the same time, the Army also began issuing more waivers, including to some recruits with some criminal convictions. Davis said tomorrow’s best-quality recruits would balk at enlisting unless they could expect the pay and benefits that today’s force gets. “The 25 percent of America’s 18- to 24-year-old youth aren’t stupid, and if the military and industry are both offering 401(k)s, who you think is going to win?” he asked. “The return of the draft is a last resort, but it gets leadership and Congress to think.” [Source: Military.com Bryant Jordan article 24 Jan 2012 ++]

Tricare User Fees Update 76: In the President’s DOD 2013 Budget proposal he called for higher TRICARE co-pays and fees including some new ones. Annual enrollment premiums will increase for TRICARE Prime users and the new rates will be tied to their military retirement income. Following a four-year “ramp-up” period, future increases will be tied to a medical inflation index, like the National Health Expenditures (NHE) formula. Under this plan, TRICARE Prime annual enrollment fees for some retirees would rise as high as \$820 beginning October 1 of this year and climb to as much as \$2,048 within five years. Beginning this fall, TRICARE Standard and Extra users would begin paying a flat rate of \$140 for families and be subjected to higher deductibles (Individuals will pay half the family rate). Enrollment fees and deductibles for families would rise to \$250 and \$580, respectively within 5 years but these amounts will not be tied to retirement income. Like TRICARE Prime, future increase in FY 2018 and beyond would be tied to the NHE or another health related inflation index.

The Administration is also proposing to implement an annual enrollment fee for TRICARE for Life (TFL) coverage ranging from \$35 to \$115 using the same tiering and indexing as TRICARE Prime. This is in addition to the current requirement to be enrolled in Medicare Part B for TFL eligibility. The new fee applies to each individual in the program and may climb to \$475 per year per person within 5 years for some individuals. Pharmacy copays for brand-name medications obtained through retail and mail-order would more than double under the President's plan—from \$12 to \$26 beginning October 1. Copays for non-formulary medications that currently cost \$25 would more than double, to \$51, and their availability would be mostly restricted to Home Delivery. Provisions for limited retail access will however be made for medications deemed “medically necessary.” Copays for brand name and non-formulary medications will increase to \$34 and \$66, respectively, within 5 years. Last, but not least, the annual Catastrophic Cap of \$3,000 will be indexed to the NHE though it is unclear if this change will occur in FY 2013 or sometime thereafter. Additionally, annual enrollment fees would no longer apply to the catastrophic cap raising out-of-pocket costs to retirees even higher. Tricare Prime and pharmacy copays are summarized in the below table. To see the proposed TRICARE Standard and Extra deductibles and enrollment fees plus the TFL proposed enrollment fees by year for the next five years refer to <http://www.hqafsa.org/aoc/overview13.pdf>:

Pharmacy Co-Pays						
	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017
Retail – 1 month fill						
Generic	\$5	\$5	\$6	\$7	\$8	\$9
Brand	\$12	\$26	\$28	\$30	\$32	\$34
Non-Formulary*	\$25	N/A	N/A	N/A	N/A	N/A
Mail-Order – 3 month fill						
Generic	\$0	\$0	\$0	\$0	\$0	\$9
Brand	\$9	\$26	\$28	\$30	\$32	\$34
Non-Formulary	\$25	\$51	\$54	\$58	\$62	\$66
Military Treatment Facilities	No Change – Still \$0 Co-Pay					
* Non-Formulary pharmaceuticals will have limited availability in retail pharmacies						
TRICARE Prime Annual Family Enrollment Fees (Individual Fees = 50%)						
Retired Pay	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016*	FY 2017
Tier 1: \$0 – \$22,589	\$460/\$520	\$600	\$680	\$760	\$850	\$893
Tier 2: \$22,590 – \$45,178	\$460/\$520	\$720	\$920	\$1,185	\$1,450	\$1,523
Tier 3: \$45,179 & above	\$460/\$520	\$820	\$1,120	\$1,535	\$1,950	\$2,048
* Indexed to medical inflation (National Health Expenditures) after FY 2016						

[Source: AFSA On Call 16 Feb 2012 ++]

Military Retirement System Update 15: The President did not propose any changes to the military retirement system in his budget for FY 2013 but did ask Congress to establish a Commission to review military retirement in the context of overall military compensation. The Commission would be charged with determining whether there are cost effective changes that should be made to the current system. The President and the Secretary of Defense strongly recommend that any recommended changes be fully grandfathered – that is, they would only apply to new recruits. The special Military Retirement Modernization Commission would operate under the following procedures which are similar to those that govern actions by a BRAC Commission:

- The Department would make a formal recommendation to the Commission regarding changes in military retirement;
- After considering the Department’s recommendation and other inputs, the Commission would make a recommendation to the President;

- The President could request that the Commission make changes in its recommendations but could not require changes;
- The President would decide whether to forward the Commission’s recommendation to Congress; and
- If forwarded, Congress would have to vote up or down on the recommendation without amendment and under expedited procedures.

[Source: AFSA On Call 16 Feb 2012 ++]

VA Fraud Waste & Abuse Update 44:

- **Fayetteville NC** - Ronnie Glenn Eddings, 41, pleaded guilty 14 FEB in New Bern federal court to scamming nearly \$900,000 in military benefits by falsely claiming to have been injured while serving the country. Eddings received benefits between 1994 and 2010 after being declared 100 percent disabled. He claimed he was confined to a wheelchair after being injured while serving in Saudi Arabia. But the Department of Veterans Affairs eventually learned that during the time he was receiving disability benefits, Eddings worked as a security guard, social worker and transportation officer in a sheriff’s department. Eddings is scheduled to be sentenced during the term of court beginning in May. He faces up to 10 years in prison. [Source: The Associated Press | WNCT article 14 Feb 2012 ++]
- **St. Louis MO** - Joseph Madlinger, 71, a retired local civil engineer pleaded guilty to a federal conspiracy charge 15 FEB and admitted bribing a Veterans Affairs official with cash, Cardinals tickets and strip club lunches to steer business to a shell company with a disabled veteran as figurehead. He admitted helping to set up a company called CJMS Contracting LLC, with a service-disabled veteran named James Browdy at its helm. Browdy was simply acting as a “rent-a-vet.” He had no experience running a construction company and did not have the assets or experience to start a company or win jobs. He had no role other than acting as the owner of CJMS, which was established so that another company could win work that was supposed to go to companies run by service-disabled veterans through a government program, prosecutors say. The bulk of the work was done by a St. Louis County company called Gateway Contractors, run by Michael Woodling. The bulk of the money that CJMS made went to Gateway. The men then bribed an employee of the U.S. Department of Veterans Affairs, Russell Todd, with cash, good seats for the St. Louis Cardinals and lunches at a St. Louis tavern and a “gentlemen’s club” in Sauget to steer business to the company, prosecutors say. Between 2007 and 2010, the alleged conspirators won about \$3.4 million worth of contracts for work through the V.A., resulting in roughly \$500,000 in profit for Gateway. Madlinger and Browdy received roughly \$300,000 from CJMS and Madlinger got about \$750,000 from Gateway, prosecutors said. Madlinger now faces up to four years in prison under federal sentencing guidelines and will be ordered to repay the roughly \$1.6 million in “gain” from the conspiracy. [Source: St. Louis Post-Dispatch Robert article 16 Feb Patrick 2012 ++]
- **Florence SC** - A South Carolina woman could get up to 10 years in prison and a \$250,000 fine after her conviction for using her husband’s name to collect veteran’s benefits. Federal prosecutors say 26-year-old Megan Mosteller of Pickens was convicted by a federal jury trial in Florence of stealing more than \$37,000 from the Department of Veterans Affairs. Mosteller married Jeremy Mosteller but separated from him after a few months in 2007. The Marine died in March 2008. Megan Mosteller filed for survivor benefits days later, claiming to have continuously lived with her husband until his death. She remarried five months later, but kept using the Mosteller name to continue collecting government benefits. U.S. District Judge Terry Wooten will impose sentence after reviewing a presentencing report on the case.

VA Budget 2013: On 13 FEB, VA Secretary Eric Shinseki joined join senior leaders in the announcement of VA's proposed VA budget for 2013. The President's vision for the Department of Veterans Affairs (VA) is to transform VA into a 21st Century organization that is Veteran-centric, results-driven, and forward-looking. VA has established management systems that ensure accountability, maximize efficiency and effectiveness, and eliminate waste while improving the delivery of high quality and timely benefits and services to Veterans. VA's budget request for 2013 provides the resources critical to achieving the President's vision and will help ensure that Veterans-our clients-receive timely access to the highest quality benefits and services we can provide and which they earned through their sacrifice and service to our Nation. The Department's resource request for 2013 is \$140.3 billion. This includes almost \$64 billion in discretionary resources and nearly \$16.4 billion in mandatory funding. VA's discretionary budget request represents an increase of \$2.7 billion, or nearly 4.5 percent, over the 2012 enacted level. Major Appropriation Issues addressed in the proposal include:

1. Stewardship of Resources - Supports management systems that ensure accountability, maximize efficiency and effectiveness, and eliminate waste while improving the delivery of high quality and timely benefits and services to Veterans.
2. Medical Care:
 - Secures timely, predictable funding for health care through 2014 with advance appropriations.
 - \$1.352 billion (up \$333 million) to further VA's integrated plan to end Veteran homelessness, including \$235 million for the Homeless Grants and Per Diem program to aid community organizations.
 - \$6.2 billion (up \$312 million) to expand inpatient, residential, and outpatient mental health programs.
 - \$7.2 billion (up \$550 million) to expand institutional and noninstitutional long-term care services.
 - \$335 million (up \$9 million) is for tele-home health to improve access to care.
 - \$403 million (up \$60 million) for the needs of women Veterans.
 - \$3.3 billion (up \$510 million) to meet the needs of over 610,000 Veterans returning from U.S. operations in Iraq and Afghanistan
3. Veterans Job Corps: A Presidential initiative of \$1 billion over the next five years to establish a conservation program impacting up to 20,000 veterans to protect and rebuild America's land and resources.
4. Benefits Claims Processing:
 - \$2.164 billion (up \$145 million over 2012) to support improved benefits processing through increased staff, improved business processes, and information technology enhancements.
 - Supports the completion of 1.4 million disability compensation and pension claims, a 36% increase over 2011.
 - Provides funding to complete 4 million education claims, a 19% increase over 2011.
5. National Cemetery Administration:
 - \$258 million for operations and maintenance to ensure VA's cemeteries are maintained as national shrines.
 - The budget provides funding to expand access to burial options for rural Veterans.
6. Information Technology:
 - 80% of 2013 IT Budget supports direct delivery of medical care and benefits to Veterans.
 - Over \$3.3 billion for a reliable and accessible IT infrastructure, a high-performing workforce, and modernized information systems for Veteran services and benefits.

- \$53 million for development and implementation of the Virtual Lifetime Electronic Record (VLER) initiative.
- \$169 million for integrated Electronic Healthcare Record (iEHR), a joint effort with DoD to share health information.
- \$128 million for paperless claims processing system VBMS Construction
- Supports four major medical facility projects already underway.

7. Entitlement Benefits - \$76.3 billion for mandatory benefits, including compensation for Agent Orange presumptive conditions and Post-9/11 GI Bill education benefits

Discretionary Funding by Appropriation (\$ in millions)

- Medical Care \$55,672
- Medical and Prosthetic Research 583
- Veterans Benefits Administration 2,164
- National Cemetery Administration 258
- General Administration 417
- Information Technology 3,327
- Construction/Grants 1,271
- Office of Inspector General 113
- Loan Administration Funds 159

Total \$63,964

[Source: <http://www.va.gov/budget/products.asp> Feb 2012 ++]

VA Budget 2013 Update 01: Despite a proposed budget that would boost spending for veterans, the House Veterans Affairs Committee chairman Rep. Jeff Miller (R-FL) accused the White House 15 FEB of leaving veterans “twisting in the wind” by refusing to declare the Department of Veterans Affairs exempt from automatic cuts to reduce the deficit. At a committee hearing on the budget Miller said the White House silence on the issue is meant to pressure Congress to accept a deficit reduction agreement that would avoid the cuts otherwise required under the Budget Control Act of 2011. Miller said the Congressional Research Service and the Government Accountability Office have given the committee legal opinions that under current law, VA should be ruled exempt. But the White House’s Office of Management and Budget has not yet given a legal opinion. “I believe we’re seeing here a cynical attempt to keep veterans twisting in the wind,” Miller said.



Rep. Jeff Miller, R-Fla

Democrats on the committee pointed to the VA’s proposed \$140.3 billion budget released 13 FEB, a 10.5 percent overall increase that includes a 4.5 percent more in discretionary spending and a 16.2 percent jump in mandatory

spending. “The proof is in the pudding,” said Rep. Bob Filner (D-CA) the ranking minority member of the committee. “There is no twisting in the wind here.” Miller acknowledged that given the “extraordinarily tight fiscal climate, a 4.3 percent increase in discretionary spending is certainly positive.” But he added that “veterans don’t care about numbers, they want their claims decided faster, their health care taken care of, and their aging facilities upgraded.” In his testimony before the committee, VA Secretary Eric K. Shinseki said the budget request “continues the momentum in our three priorities” increasing access to care and benefits, eliminating claims backlog and ending veterans homelessness. [Source: Washington Post Steve Vogel 15 Feb 2011 ++]

VA Budget 2013 Update 02: In testimony before the House Committee on Veterans Affairs (HCVA) on 15 FEB, The American Legion used the analogy of a house for sale to describe the Department of Veterans Affairs’ budget request for fiscal 2013. Tim Tetz, the American Legion’s legislative director, told the committee that the “curb appeal” of VA’s budget request was impressive, including the expansion of programs for homeless, rural, women, and student veterans. New VA medical facilities would be opened, and funding for minor construction would see a 25 percent increase. But on closer examination, Tetz said the budget request is “not the gem it’s made out to be. Yes, certainly there are some things to celebrate, but there are many more things to be worried about.” One such worry the Legion has is the proposed level of funding for VA construction: only \$532 million for major construction and \$608 million for minor construction. These figures are much lower than what The American Legion has recommended for fiscal 2013: \$5.3 billion and \$1.2 billion, respectively. Tetz reminded the committee that VA has identified the need for more than \$50 billion in construction projects over the next decade. “At this pace, the 10-year plan will be done in 50 years. Today’s 30-year-old sergeant who just returned from Djibouti will be a nursing-home resident – if the facility is ever built.” VA construction budgets must be increased, Tetz said, to meet the real needs identified by the Strategic Capital Investment Planning (SCIP) process.



American Legion’s legislative director Tim Tetz

Another sticking point in VA’s budget request is a proposed 7 percent increase in its Medical Care Collection Fund (MCCF). The purpose of this fund is to recover costs of VA medical care for veterans with private health insurance (third-party insurance). The Balanced Budget Act of 1997 authorized VA to collect third-party insurance for deposit into the MCCF, which could then be used to supplement its federal funding. Under this program, VA bills third-party health insurers for nonservice-connected health care. VA has been basing its insurance billing rates on amounts that insurers would pay to health-care providers in the private sector (in the same geographic area for the same services). To pay for the MCCF increase of 7 percent, Tetz said to the committee, “VA points to increased collections and the ability to bill private insurers increased rates, rather than the Medicare rate. “What happens when VA falls short in MCCF collections?” Tetz asked. “Does Congress have an overdraft protection to make sure the shortfall is covered? Not exactly. VA must scrimp and save elsewhere. Maybe they don’t hire their full staff. Maybe they put off purchasing their upgraded equipment. Perhaps they put off training or other programs.”

Tetz went on to break down the proposed 10.5 percent increase in VA’s overall budget. “We’re talking about \$13.3 billion. Take away the 9.6 billion of mandatory spending for educational, disability and pension claims. That was earned with the blood, sweat and tears of our military when they served our nation. Now you’re left with a \$3.7

billion increase.” Taking budget roll-over authority into account, and pointing out that the \$1 billion in funding may never materialize for the newly proposed Veterans Job Corps, Tetz figured the actual real-dollar increase in the VA budget request was about \$2 billion. “Two billion dollars is not quite 2 percent – 1.6, to be exact,” Tetz told the committee. “And if the Office of Management and Budget comes in later this year and asks for 2 percent from VA, to meet the sequestration rules, it’s game over.” [Source: The American Legion Legislative Center article 15 Feb 2012 ++]

Dementia Update 02: A two-minute memory test can uncover many cases of dementia that otherwise go unnoticed by doctors, according to Minneapolis VA researchers who concluded that the screening “should be considered in all older adults.” The test, known as the “mini-cog,” was given to more than 8,000 older veterans to see if it could work as an early warning sign for Alzheimer's and other memory disorders. Nearly 11 percent of the patients aged 70 or older were diagnosed with some form of cognitive impairment, compared to 4 percent in clinics that didn't use the test, according to the study by the Minneapolis Veterans Affairs Medical Center. The results are part of a growing movement to identify cognitive problems early. “I think there's increasing data in the last few years that unrecognized cognitive impairment leads to worse health outcomes,” said Dr. Riley McCarten, a neurologist at the Minneapolis VA who led the study.

People with memory problems may have trouble following medical advice or taking their blood pressure pills, he said, and yet their doctors may be in the dark. “Most people with dementia, particularly in the early and even moderate stages, look completely normal,” he said. “If you don't test them, you don't know they're impaired.” The mini-cog is one of a number of memory tests that have started to pop up in routine checkups for older patients around the country, including at Allina clinics in Minnesota. In this case, the test involves memorizing three words and drawing the face of a clock. The idea of routine testing for memory problems has been gaining acceptance, said Maria Carrillo, a senior medical director at the Alzheimer's Association in Chicago. “The field in general has started to move toward the idea of trying to identify Alzheimer's earlier.” She said her organization is part of a national working group trying to identify which tests are most effective. The mini-cog is probably one of the quickest and most popular, but she said there's no consensus on which test is best.

Several years ago, the Minneapolis VA started offering the mini-cog during routine checkups of veterans 70 or older with no known history of memory problems. Nearly everyone (97 percent) agreed to take the test; of those, 26 percent failed, according to the report. Anyone who failed was offered a more thorough evaluation. Of those who agreed to a follow-up, 75 percent turned out to have dementia, the study found. In fact, even a few people who passed the mini-cog asked for further evaluation and turned out to have dementia as well, McCarten said. In those cases, “people tend to come forward and say, 'You know what, I think I do have a problem.’” At the same time, McCarten said nearly three-fourths of those who failed the mini-cog refused follow-up. Sometimes it takes several visits -- and several failed tests -- before they're ready for an answer. “We think of it as a process,” he said. “This is foreign to most people. They don't usually get a quiz when they go to the doctor.” When it's part of their routine checkups, he said, “they may be more accepting of having further evaluation.”

Carrillo, of the Alzheimer's Association, noted that some memory problems are caused by medications or depression and might be reversible. But even if they're not, she said, patients and families can benefit by finding out about the dementia sooner rather than later. McCarten agrees. “Just because somebody doesn't have a diagnosis doesn't mean you're not dealing with their problems,” he said. Often, it takes a crisis to realize someone is impaired and unable to care for himself. “You make a big impact if you can diagnose this and avert some of those crises,” he said. The study is published in 13 FEB Journal of the American Geriatrics Society. [Source: Star Tribune Maura Lerner article 13 Feb 2012 ++]

Vitamin Supplements Update 04: The best way to get crucial vitamins and minerals is by eating the right balance of healthy foods. But for people over age 50, even the best diet may not provide enough of some important nutrients. Not many seniors can claim to be getting the full complement of what they need from their diet each day. The following addresses vitamins, minerals and supplements that are most important for older adults so you can be sure to consume them regularly. (Note: If you have certain diseases, such as cancer or diabetes, your body may have special nutritional needs. Also, certain medications can have adverse interactions with vitamins and other dietary supplements. Be sure to speak with your doctor or pharmacist about the vitamins, minerals and supplements you take.) Abbreviations: IU=international units, MG=milligrams, MCG=micrograms

Vitamin A

How much do you need? Men: 900 mcg. Women: 700 mcg

Why you need it: Promotes good vision; helps keep immune system healthy.

Good to know: In supplements, look for vitamin A as beta carotene, not as retinol or retinoic acid, which increases the risk of bone fracture.

Food sources: Dairy products, fish, darkly colored fruits and vegetables.

Vitamin B1 (thiamine)

How much do you need? Men: 1.2 mg. Women: 1.1 mg

Why you need it: Thiamine is necessary for healthy nerve and brain cells; helps convert food to energy.

Good to know: Antacids and some diuretics may lower thiamin levels by decreasing absorption and increasing urinary secretion.

Food sources: Liver, whole grains, enriched breads and cereals.

Vitamin B2 (riboflavin)

How much do you need? Men: 1.3 mg. Women: 1.1 mg

Why you need it: Riboflavin is important for red blood cell production; helps convert food to energy.

Good to know: Older men and women may be especially susceptible to riboflavin deficiency, which can cause cracking or sores at the corners of the mouth, skin irritation or weakness.

Food sources: milk, eggs, fortified bread products and cereals.

Vitamin B3 (niacin)

How much do you need? Men: 16 mg. Women: 14 mg

Why you need it: Niacin is necessary for the proper functioning of the digestive system, skin and nerves; helps convert food to energy.

Good to know: Can cause skin flushing; may be prescribed to treat high cholesterol but should be used only under a doctor's care because of potentially severe side effects.

Food sources: Meat, fish, poultry, eggs.

Vitamin B6 (pyridoxine)

How much do you need? Men: 1.7 mg. Women: 1.5 mg

Why you need it: Vitamin B6 aids in the formation of red blood cells; strengthens the immune system.

Good to know: Too high doses of supplements may cause nerve damage, numbness and trouble walking.

Food sources: Beans, nuts, eggs, whole grains.

Vitamin B12

How much do you need? Men and women: 2.4 mcg

Why you need it: B12 is essential for keeping nerves and red blood cells healthy.

Good to know: As many as a third of people over 50 do not absorb enough B12 from diet alone; inadequate absorption may lead to neurological and balance problems.

Food sources: Fish, shellfish, meat, dairy products.

Vitamin C

How much do you need? Men: 90 mg. Women: 75 mg. (Smokers should add an extra 35 mg.)

Why you need it: Important for wound healing; boosts immune system; required for growth and repair of tissues in all parts of body.

Good to know: No studies confirm that vitamin C prevents colds, although it may shorten the length of a cold; excessive amounts can lead to upset stomach and diarrhea.

Food sources: Citrus fruits, tomatoes, kiwi, strawberries.

Vitamin D

How much do you need? Ages 51-70: 600 IU. Age 71+: 800 IU

Why you need it: Vitamin D helps the body absorb calcium; may protect against heart disease, cancer, diabetes and several autoimmune diseases

Good to know: Very high levels of vitamin D (above 10,000 IU a day) may cause kidney and tissue damage. Some blood test results for vitamin D may lead to an inaccurate diagnosis of vitamin D deficiency.

Food sources: Sun exposure provides the body's main supply of vitamin D; fatty fish, fortified milk and juices also contribute.

Vitamin E

How much do you need? Men and women: 15 mg

Why you need it: Vitamin E helps protect cells from damage; may reduce the risk of developing cancer, heart disease and other chronic diseases, but further research is needed.

Good to know: If you take a blood thinner, talk to your doctor before taking supplements; vitamin E increases bleeding risk.

Food sources: Vegetable oils, nuts, fruits, vegetables.

Folic Acid

How much do you need? Men and women: 400 mcg

Why you need it: A B vitamin, folic acid helps form red blood cells and produce DNA.

Good to know: High levels may mask vitamin B12 deficiency, especially in older adults. Recent research, suggests that for women, folic acid along with vitamins B6 and B12 may reduce the risk of developing age-related macular degeneration.

Food sources: Enriched cereals, whole-grain breads, dark, leafy vegetables.

Vitamin K

How much do you need? Men: 120 mcg. Women: 90 mcg

Why you need it: Vitamin K helps blood clot properly and helps maintain strong bones in older men and women.

Good to know: Can dilute the effect of blood thinners, so talk to your doctor if you take Coumadin (warfarin) or other blood thinners.

Food sources: Plant oils, green vegetables, cabbage, cauliflower.

[Source: AARP Nissa Simon article Jan 2012 ++]

VA Caregiver Program Update 14: Caring for an ill, injured or disabled Veteran can be rewarding and exhausting. For Family Caregivers who juggle many priorities, it can take a lot out of you. Sometimes you may be left feeling run down or sick. Here are five tips for avoiding burnout:

1. **Learn about the condition or illness affecting the Veteran you care for.** Learn as much as possible about the condition and how it could change over time. Be prepared to expect and face the worst together.

- Having an idea of what to expect can lower your stress level.
- It will help you plan for future medical needs. It might also give you time to learn skills you will need later.
- Some health problems may cause your loved one to act out, say harmful things, or not even remember who they are. Staying educated about the illness can help you understand when this is a symptom and not act negatively toward it. Remember, sometimes your loved one isn't sure how to deal with it either.

2. **Don't be afraid to ask for help.** Think positively about the hard work you do, but remember that it's OK to ask for help.

- Make a list of tasks you would like help with and people you can call for help.
- Ask a neighbor to pick up some items for you from the store.
- Ask family members to help with household chores, paperwork or research. You might be surprised at how willing they are to help.
- Contact your local area agencies or volunteer groups for assistance. Many groups offer meal delivery, transportation and respite care.

3. **Take breaks.** Find some time each day when you can safely step away from the Veteran you care for – for example, when he or she has a friend or another family member visiting. During your break:

- Go outside for a walk or go for a bike ride.
- Read a book or listen to music.
- Chat with a friend.
- Schedule respite or adult day health care weekly or monthly to give yourself breaks.

Even if you only have a few minutes free – give yourself a much-needed break. Check out our resource on Making the Most of Your Limited Time for ideas.

4. **Take care of your health, too!** To give the best care to the Veteran you care for, you need to stay in good health. Your health is essential to your ability to keep providing for the Veteran you care for.

- Get regular health and dental checkups, and any health screenings you may need annually.
- Make sure you get your annual flu shots.
- Try to maintain regular sleeping patterns as much as possible.
- Eat healthy meals and snacks.
- Daily physical activity can help lower stress, increase your energy, and help keep your heart healthy.
- Your mental health is important, too. Connect with other Caregivers who may be going through the same thing. Or reach out to professionals for support. VA's Caregiver Support Line (1-855-260-3274) can be a great place to start.

5. **Stay Positive!** Be realistic about what you can and can't do. It will help you keep a positive attitude.

- There are many things you can't control, but you can control your actions. Learn to recognize the things you can't control, and don't lose time worrying about how you can't change them.
- A positive attitude may help you give the Veteran you care for the best care possible.
- You may not be able to make the Veteran you care for better, but you can protect his or her dignity and do your best to help them feel safe and loved.

- Even if the Veteran you care for is not able to show happiness or appreciation, you can feel good about the care you are giving and the love he or she is receiving.

Being a Family Caregiver is tough – there is no doubt about it. You’re there to support your Veteran, and the VA Caregiver support team is available to support you. If you need additional assistance, call VA’s Caregiver Support Line (1-855-260-3274) or visit them online at <http://www.caregiver.va.gov>. [Source: http://www.caregiver.va.gov/pdfs/Tips_for_Avoiding_Caregiver_Burnout.pdf Feb 2012 ++]

Second Opinions: Evidence is mounting that second opinions—particularly on radiology images and pathology slides from biopsies—can lead to significant changes in a patient's diagnosis or in recommendations for treating a disease. Some malignancies, including lymphomas and rare cancers of the thyroid and salivary glands, are notoriously tricky to diagnose correctly; test results can be inconclusive or return false results. After a decade of annual mammograms, more than half of women will receive at least one false positive recall on a breast-cancer screening, a recent study found. And nearly half of malpractice claims at Harvard University's medical institutions that resulted in serious patient harm or death in the past five years were diagnostic errors, according to its liability company Crico/RMF. Thomas Feeley, vice president of medical operations at MD Anderson, says as many as 25% of patients who arrive at the center with diagnoses for certain cancers such as lymphoma may receive a different diagnosis. Overall, 3% of MD Anderson patients each year end up with a significant change that affects what treatment they receive. “When you get cancer, the first thing you may want to do is jump to get treatment with the first person you talk to,” Dr. Feeley says. “But taking the time to get a second opinion about the diagnosis you have and a careful evaluation of what treatments there are can be lifesaving.” Primary-care doctors can misdiagnose common symptoms. In a study, 202 patients most commonly complained about abdominal pain, fever, fatigue, shortness of breath and rash. Incorrect diagnoses included:

- Benign viral infection 17%
- Musculoskeletal pain 10%
- Asthma/Chronic obstructive pulmonary disease 6%
- Benign skin lesion 4%
- Pneumonia 4%

Final correct diagnoses for patients misdiagnosed initially included:

- Cancer 16%
- Pulmonary embolism 6%
- Coronary artery disease 5%
- Aneurysm 8%
- Appendicitis 6%

Second opinions are important for other diseases, as well. National Jewish Health, a Denver medical center, found in a study that more than half of patients it diagnosed with chronic obstructive pulmonary disease had previously been misdiagnosed with asthma, leading to inappropriate treatments. A form of dementia is often incorrectly diagnosed as Alzheimer's, and studies show that doctors may misdiagnose coronary artery disease as other conditions. Not everyone should have a second opinion, of course. Health-care costs would soar if they did, says Robert Wachter, chief of the division of hospital medicine at the University of California, San Francisco. “There is also a risk you can get overwhelmed by conflicting opinions when you are in a terribly vulnerable position.” In the end, he says, patients must pick a doctor they trust and go with his or her recommendation.



Many health insurers require a second opinion before approving major surgery or expensive treatments. Patients shouldn't hesitate to tell a doctor they want a second opinion, and they are entitled to their slides, pathology reports and other information to take elsewhere. Major medical centers, including Johns Hopkins Medicine and MD Anderson, have second-opinion services that doctors can refer patients to, or patients can contact directly, to get an independent assessment. Hardeep Singh, chief of the health policy and quality program at Michael E. DeBakey VA Medical Center in Houston, says a growing number of centers are requiring an internal second review of pathology reports to prevent misdiagnosis. If the second opinion differs markedly, a third opinion may be necessary to get a consensus on what course of treatment is best. Pathologists changed the diagnosis of 9% of 742 cancer cases in a recent study. Some original diagnoses—and the percentage of them that were changed on second opinion.

- 16% of thyroid cancers
- 10% of neck cancers
- 11% of salivary-gland cancers
- 9% of liver cancers
- 8% of pancreatic cancers
- 6% of lung cancers

Misdiagnoses can come about for various reasons. Pathologists and radiologists may misread slides and scans or fail to use the latest tests or technology. Sometimes doctors may simply get stuck on the idea of one diagnosis and ignore or overlook evidence it might be something else. This month, the president of Argentina had her thyroid removed after being diagnosed with cancer from a biopsy, but the doctors announced after the surgery that she in fact had a benign condition. Jonathan Lewin, chief radiologist at Johns Hopkins Hospital, says that on an annual basis, his group sees a significant discrepancy in diagnosis in about 8% of cases, such as a brain tumor mistakenly thought to be an infection or a stroke or multiple sclerosis that initially is diagnosed as a brain tumor. “The last thing a surgeon wants to do is take out a piece of brain and find out this isn't what we thought it was,” Dr. Lewin says. When seeking a second opinion the questions to ask are:

- Have you reviewed all the materials related to my case?
- Was the lab test/image/biopsy specimen adequate to make a firm diagnosis? Would a repeat test give us more information?
- Are we certain that this is the disease that I have? Could there be another explanation for these symptoms or results?
- If you agree with the initial diagnosis, can you confirm or suggest modifications to the first doctor's proposed treatment plan?
- Can you reassure me that we have explored all the options?

[Source: Wall Street Journal Laura Landro article 17 Jan 2012 ++]

VA Vet Centers Update 09: Early this year, the Department of Veterans Affairs deployed 20 additional Mobile Vet Centers. The mobile Vet centers will increase access to readjustment counseling services for Veterans and their families in rural and underserved communities across the country. The 20 new vehicles will be used in destinations across the continental United States, Hawaii and Puerto Rico. “In fiscal year 2011, Mobile Vet Centers participated in more than 3,600 federal, state and locally sponsored Veteran-related events.” These customized vehicles – which are equipped with confidential counseling space and a state of the art communication package—travel to communities to extend VA’s reach to Veterans, servicemembers and their families, especially those living in rural or remote communities. The vehicles also serve as part of the VA emergency response program. The 20 new, American-made vehicles will expand the existing fleet of 50 Mobile Vet Centers already in service providing outreach and counseling services.



Mobile Vet units are equipped as “offices on wheels,” with the capacity to provide emergency support for natural disasters. Each motor coach houses a satellite dish that connects to communications and audio-visual equipment, six phone lines, a fax line, notebook computers, four encrypted computer lines and a wireless network. In fiscal year 2011, Mobile Vet Centers participated in more than 3,600 federal, state and locally sponsored Veteran-related events. The 20 new mobile Vet Centers will be based at: Birmingham, Ala.; San Diego, Calif.; Atlanta, Ga. ; Western Oahu, Hawaii; Cedar Rapids, Iowa; Evanston, Ill. ; Indianapolis, Ind. ; Baltimore, Md. ; Pontiac, Mich. ; Kansas City, Mo.; Jackson, Miss.; Greensboro, N.C.; Lakewood, N.J.; Reno, Nev.; Stark County, Ohio; Lawton, Okla.; Ponce, Puerto Rico; Nashville, Tenn.; Washington County, Utah; and Green Bay, Wis.

VA has 300 permanent Vet Centers serving communities across the country. To locate one in your area refer to http://www2.va.gov/directory/guide/vetcenter_flash.asp for its address and telephone number. To speak confidentially with a Vet Center Counselor at any time around the clock call:877-WAR-VETS(927-8387). Each Vet Center offers:

- Individual and group counseling for Veterans and their families
- Family counseling for military related issues
- Bereavement counseling for families who experience an active duty death
- Military sexual trauma counseling and referral
- Outreach and education
- Substance abuse assessment and referral
- Employment assessment and referral
- VA benefits explanation and referral
- Screening and referral for medical issues including traumatic brain injury and depression.

VA will also add 230 emergency shuttle vehicles over the next five years. The shuttles will provide routine transportation for Veteran patients in and around various metropolitan areas during normal operations. During disasters and emergencies, these shuttles can double as mobile clinics to evacuate patients and their care teams. More than 190,000 Veterans and families made over 1.3 million visits to VA Vet Centers in fiscal year 2011. To find out more about Vet Center services or find a Vet Center in your area, go to the Vet Centers web site <http://www.vetcenter.va.gov/> [Source: <http://w11.zetaboards.com/CFLNewsChat/topic/7631002/1/> Feb 2011 ++]

SBA Vet Issues Update 20: The Department of Veterans Affairs has until 2 MAR to provide detailed information about its process for verifying veteran-owned small businesses as eligible to win set-aside contracts to a Senate committee, which is investigating claims of widespread program failures. Sen. Olympia Snowe (R-ME), ranking member of the Senate Committee on Small Business and Entrepreneurship, sent a letter to VA Secretary Erik Shinseki 9 FEB, asking for an update of the verification process that requires veteran-owned small businesses to be vetted and approved as legitimate by the VA before they can bid on set-aside contracts. Specifically, the VA is to provide the number of applications processed, the amount of applications in the current backlog, the average time to process applications, and the number of applicants that have appealed initial certification decisions. The VA also must explain the steps taken to streamline the current process, the forms of communication and outreach provided to applicants during the review process, and the degree of collaboration happening between the VA and other agencies that oversee small business contract programs, including the Small Business Administration.

“Unfortunately, I continue to hear from numerous veteran-owned small businesses about the struggles legitimate veterans face when applying for certification,” including long delays, repeat requests for documentation, complaints of a subjective process, and no recourse to file a grievance, Sen. Snowe wrote in the letter, which was obtained by Washington Business Journal. “Just as I am outraged whenever fraud and abuse occur in federal government programs, I am dismayed when innocent business owners are deprived the opportunity to compete for contracts after they have sacrificed so much to protect our freedom.” Veterans have voiced loud objection to implementation of the VA's verification program, which kicked in during fiscal 2011 and might be extended throughout the government. The program was meant to weed out fraud and ensure set-aside dollars land in the hands of rightful recipients, but critics say the system's unintended victims are legitimate small businesses frozen out of opportunities and in some cases branded as shams. The Senate Small Business and Entrepreneurship Committee is just the latest to question the VA about the program. Two subcommittees within the House Veterans Affairs Committee jointly questioned the VA officials about the verification program during a November hearing. [Source: Washington Business Journal Jill R. Aitoro article 13 Feb 2012 ++]

Military Force Reduction Update 02: The Marine Corps will lose about 5,000 troops, and the Navy will cut 2,500 civilian personnel under the Pentagon's fiscal 2013 budget plan. The Navy will also significantly slow down major equipment purchases in coming years, getting only 10 new ships and fewer than 200 aircraft next year, as part of an effort to save more than \$13 billion by 2018. Officials also announced 13 FEB that, due to cost concerns, they'll drop plans to relocate an aircraft carrier from Naval Station Norfolk in Virginia to Naval Station Mayport in Florida. Navy officials said they expect end strength to drop to 322,700 by the end of fiscal 2013, down about 3,000 from the previous year, but it will remain steady through 2013. Another 3,000 are expected to be cut in subsequent years. The two services will see a \$1.4 billion base budget cut in fiscal 2013 — down less than 1 percent, to \$155.9 billion — and an overall cut of about \$3 billion when overseas contingency funds are factored in.

The new ships on order for fiscal 2013 include two Virginia-class submarines, two DDG-51 class Aegis Destroyers, and four Littoral Combat Ships. Eleven others will be retired, leaving the service with a fleet of 284 ships, far below what many defense advocates on Capitol Hill have pushed for in recent years. Military officials also announced plans to kill off the Medium-Range Maritime Unmanned Aerial System program, saving about \$1.5 billion in the next five years, and reduce purchases of the MV-22 Osprey aircraft, the Joint High Speed Vessels program and the P-8A Maritime Aircraft program. Officials said the Marine end-strength cuts, the first step in plans to trim that force by 20,000 over the next five years, will still allow the Corps to be a “versatile middleweight force” and remain engaged in Afghanistan in coming years. Plans calls for most of those cuts to come among Marines with fewer than six years’ service. Those personnel reductions account for most of the Marine Corps’ budget hit next year, but the force will also see reductions in new construction projects by more than \$450 million and reductions in ground vehicle purchases by roughly \$100 million. Navy officials said the short-term cuts will help create about \$58 billion in savings for the department over the next five years. Nearly \$18 billion of that comes from the planned personnel cuts. [Source: Stars & Stripes Leo Shane article 13 Feb 2012 ++]

WWII Vets Update 14: Victor Lee Mackool’s life has swung a wide arc from the World War II European Theater — where he survived savage fighting and witnessed the horrors of a Nazi concentration camp — to big band singing and a successful career in business. The 87-year-old veteran was recently thanked for his military service with a Beaumont City Council proclamation presented in a room packed with friends and admirers. The Brooklyn, N.Y., native and Florida transplant of Lebanese descent still had three months of high school left and a football scholarship to the University of Florida waiting when he got a letter from Uncle Sam. His high school principal managed to get him deferred long enough to complete his senior year and graduate, but after that, it was off to Army basic training. Mackool admitted his military career hit a snag early on when he decked an officer who cursed him for obeying an order from his superior officer. He was thrown in the brig and the officer demanded a court-martial, but all was smoothed over, Mackool said.



Victor Mackool, top row at far right

Mackool soon became a sergeant in the motor pool, but would later sign up with the 101st Airborne Division — mainly because the pay was better by \$100 per month. Big money in those days. “What the hell is the matter with you, are you crazy?” he remembers thinking later of his decision to take on the hazardous business of parachuting. Mackool said he was 19 when he was dropped into Normandy. The 101st Airborne’s job was to go behind enemy lines and clear the way for the Allied troops. They were successful, eventually. But first, they endured several days of hard fighting against the German forces. “From there on, after we took out those machine gun nests, our troops just walked on in,” Mackool said. The smallest of his “band of brothers,” Mackool said he carried the heaviest machine gun. He said he later shattered sections of his leg and ruptured a spinal disc in a jump burdened by the .50-

caliber weapon. The Screaming Eagles went on after Normandy to fight on the frozen battlefields of the Battle of the Bulge. Mackool and his unit were subsequently surrounded by German troops in Bastogne, Belgium, where they refused to surrender and held out until the 4th Armored Division, headed by Army Gen. George Patton, came to their aid. “If it wasn’t for Patton, I wouldn’t be here,” he said.

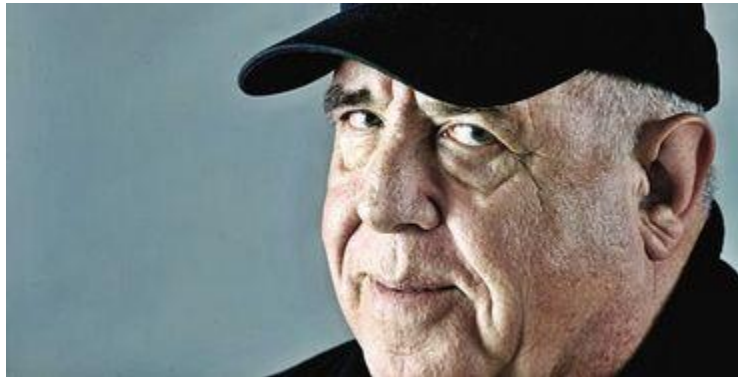
His unit also was involved in the liberation of Kaufering IV concentration camp, part of the Dachau complex in the Landsberg region of Germany. The soldiers had no idea what was in store for them, but they got a whiff it was bad a good way off. The stench of rotting human flesh could be smelled from 50 miles away, according to Mackool. None of his war experience marked him as much as seeing firsthand the horrors of Nazi atrocities. “I wanted to get the hell out of there,” he said of his feelings upon entering the camp. “It was so, so pathetic. Even the war wasn’t that bad. That’s how bad it was.” What he saw there scarred him for many years. “I just went crazy after that,” he said. “I took no prisoners — I blew away every German [soldier] I saw.” In the final days of the war in Europe, the 101st Airborne was occupied with chasing down Nazi war criminals amid Adolf Hitler’s retreat in Berchtesgaden. Mackool recalled senior Nazi official Hermann Goring’s capture with glee. Berchtesgaden and the Eagle’s Nest retreat were beautiful, in stark contrast to what he had seen at the camps. Mackool’s unit was headed to train for service in the Pacific when the A-bomb was dropped and the war all but ended, sending him home. For his military service, Mackool was awarded the Bronze Star and other honors and medals.



Victor Mackool shows off one of his war wounds to his left leg

After coming home, Mackool underwent therapy to come to terms with his war experiences — particularly what he saw at the concentration camp. “It took a good two years to straighten myself out,” he said. Even now, nightmares sometimes haunt him. His wife, Nancy, said he never spoke about the war until after he saw “Saving Private Ryan.” He said that movie and the television show “Band of Brothers” gave accurate depictions of World War II. One of the lasting effects of what he saw in Germany was an abiding sympathy and friendship for Jewish people that wasn’t exactly natural to his Lebanese background. “I was Arabic,” he shrugged. “Jews and Lebanese didn’t get along.” He settled in Miami, married and had a son, Charles, who died in 2008 at age 47. Mackool became successful in dry cleaning and carpet sales and moonlighted as a singer. Mackool and his second wife, Nancy, moved to Beaumont 14 years ago to care for Nancy’s father in his declining years. They share their home with seven cats. He tells her she was lucky to have met him and she just smiles. She teases him about his age: “He’s older than dirt!” But she swoops in and changes the subject when she sees — in subtle ways — that the memories of what he saw at Kaufering are becoming too much for him. “I had quite a history,” Mackool said. “I don’t think I could do it again.” [Source: The Beaumont (Texas) Enterprise article 30 Jan 2012 ++]

Vietnam Vets Update 02: When the Chinese New Year comes around, Medford resident William Hosea Hunter can't help but think about buddies he lost in Vietnam. "I don't have flashbacks anymore, but I think of the guys that didn't make it," said Hunter, 64, a retired letter carrier in Medford. "This is always one of the hardest times of the year for me." He is a combat veteran of the Tet Offensive that was launched on Jan. 30, 1968, in the Vietnam War. The three phases of the Tet campaign lasted until September. At the time, the 6-foot-4-inch Spc. Hunter was getting "short," meaning his year's tour was about up with Charlie Company of the Army's 4th Battalion, 9th Infantry, 25th Division. Nicknamed the "Manchus," the unit had been deployed to Tay Ninh, an area northeast of Saigon, now Ho Chi Minh City, near the Cambodia border. "Before Tet, they'd send us out on patrols, mainly trying to find where mortars were coming from at the time," he recalled. "We had some skirmishes but it was fairly calm up until Tet. That's when we started having guys killed on a daily basis."



William H Hunter

Hunter was drafted into the Army in the spring of 1966. At the time he was 18 and clerking in a Medford grocery store. After basic and infantry training, he arrived in what was then South Vietnam on March 1, 1967. He quickly was deployed to Tay Ninh and a forward base nearly within rifle shot of the Cambodia border. What he describes as "fairly calm" before Tet depends on your perspective. "They overran our base one night and got inside," he said of an attack that began with mortars and ended with a firefight. "It was complete chaos. You didn't know if you were going to make it or not. "Me and another guy got in this foxhole that was only 6 feet long and 2 feet deep — we hadn't had time to dig it any bigger," added Hunter, who noted he was lankier back in the day. "But we survived." By the end of January, the region was eerily quiet, he said. "It was really dead out there — nothing was going on," he said. "But you just knew something was coming up. We hadn't run into anybody. It was almost ghostly."

In fact, the leaders of the Viet Cong in North Vietnam and the Republic of South Vietnam had signed a cease-fire for the annual lunar new year celebration. But early on the morning of Jan. 30, the Viet Cong launched a nationwide attack that would be the biggest offensive yet conducted in the war. More than 80,000 troops attacked everything from the major cities of Hue and Saigon to small bases. During nearly a year with the unit, most of his time was spent in the jungle, he said. "When they (Viet Cong) started to pull away from the big cities, that's when we started having big-time problems," he said. "We really started getting into it." As he looked at photographs taken in Vietnam of fellow Spc. Nicholas J. Cutinha of Florida and Mike Frost of Seattle, he talked about the fellow soldiers who were his buddies. "We called Catinha 'Porky' — he was great with a machine gun," he said. "They called me 'Fang' because I had a silver tooth in the front of my mouth. They always told me I'd be an easy target. I made a point of never smiling when we were attacked. "We were a close-knit family," he added.



William H. Hunter Vietnam, on the left



Helmets of killed American soldiers after the Tet Offensive

The family of soldiers that made up Charlie Company would survive the firefights in the jungle, but soon found themselves in a more deadly battle. “Just before I left (for stateside) on Feb. 29, they moved the whole company down near Saigon,” he recalled of the move on the 25th. “They were being mortared down at the Tan Son Nhut air base, and they wanted us to go find where it was coming from.” On March 2, two days after Hunter, after enduring a bit of good-natured ribbing from his buddies, left for home, the unit was caught in an ambush while on patrol. Charlie Company suffered 49 killed and 24 wounded. His friend Cutinha would be awarded the Medal of Honor — posthumously. “I’m very proud of him, “ the big man said softly. “They got caught in a 'horse shoe' ambush. My squad went over this bridge first. He saved a lot of lives.” His friend Mike Frost also was killed that day. “I’ve felt a lot of guilt about not being there, thinking if I had been there I could have helped them out,” he added. “But I know I would be dead today if I had been there. I know it.”

In May of that year, he volunteered for body escort duty at his base in California. One assignment sent him to Seattle, where he called the family of Mike Frost and met with them. “I wanted to do what I could to help, to let them know somebody cared,” he said. Discharged in September of 1968, Hunter returned to Medford, where he became a letter carrier, a job he held until retiring 34 years later. He married and raised two children. But he could not get away from memories of Vietnam and what would later be diagnosed as post traumatic stress disorder. “I used alcohol and work to hide everything,” he said. “About 12 years ago, I started drinking heavier. My wife told me to get some help or get the hell out.” He got help. He credits Dian, his wife of 42 years, the U.S. Department of Veterans Affairs and Alcoholics Anonymous with saving his life. He still goes to AA meetings and PTSD counseling at the VA's counseling center in Grants Pass. He also has attended reunions with fellow Manchus. “I’ve got a lot to be thankful for,” Hunter concluded. “I know I’m lucky to be here today.” [Source: Oregon’s Mail Tribune Paul Fattig [pfattig@mailtribune.com] article 30 Jan 2012 ++]

Vet License Plates MS: The Mississippi Department of Motor Vehicles (DMV) offers a wide variety of veteran license plates whose images can be seen at <http://www.dor.ms.gov/mvl/availabletags.html> or in the attachment to this Bulletin titled, “**Veteran License Plates Mississippi**”. For some specialty tags, there is an additional fee imposed when you purchase and/or renew the plate. If there is an additional fee, that amount is noted by the tag image. Refer to <http://www.dor.ms.gov/mvl/SpecialtyTagFeeDistribution.html> for information

concerning how the additional fee collected is distributed. [Source: <http://www.dmv.org/ms-mississippi/registration-renewal.php> Feb 2012 ++]



Veteran Support Organizations : The American Legion is helping to make the transition from active duty to veteran easier through its **Heroes to Hometowns** program. In this effort, the organization identifies service members going through rehabilitation and asks them what their needs will be when they return home. Peter Gaytan, executive director of The American Legion, explains that the outreach assists veterans with issues such as navigating VA documents and processes or improving accessibility to and in their homes. This eases the transition as people realize their lives are going in new directions, he explains. Veterans who want assistance can reach out to the Legion, but local posts also keep an eye out for returning veterans and offer help or refer them to the national level, whether veterans are disabled or not. Gaytan says anyone who served in the military during wartime and was honorably discharged can join the organization or seek out its services such as help paying a mortgage, fixing a vehicle, getting to an appointment or understanding benefits. Gaytan explains that The American Legion saves agencies like the VA millions of dollars through the organization’s volunteer hours, not to mention monetary donations.

Veterans who want to reach out can visit The American Legion’s website or find a local post. By pursuing the latter and visiting a Legion facility, former troops can meet each other, share stories and develop camaraderie and a sense of community that Gaytan says a lot of combat veterans miss when they take off the uniform. “It’s great for veterans struggling with their transition,” he explains. The ranks of veterans are growing as wars in the Middle East continue, and Gaytan says older and younger generations benefit by participating in American Legion activities. Vietnam veterans assist the ones who served more recently, promising that what happened to them when they returned years ago will not occur to those serving today. Gaytan explains that VSOs and the VA all are working toward the same purpose: to meet the national obligation to those who wore the uniform. “The American Legion works hand in hand with others to make sure the earned benefits of America’s veterans are indeed secure,” he says. Gaytan encourages veterans to become involved not only to guarantee their rights but also “because it benefits...those who will wear the uniform after that.” Involvement demonstrates to younger generations that there is honor in wearing the uniform of this country. Standing together, various veterans’ communities can ensure that when troops come home, they are cared for by their nation, he adds.

To engage new veterans, The American Legion is embracing electronic media. The national website is updated every few hours with information about what the organization is doing at the local and national levels. “We understand speaking the language of our younger generation,” Gaytan says. The Legion has blogs, national and local Facebook pages and Twitter accounts. But the organization is not abandoning its roots. “People might have stereotypes of old buildings or old folks in funny hats waving flags,” Gaytan states. “Well, we’re proud of our history,” which includes being instrumental in the passing of the GI Bill. He also emphasizes the importance of the Legion in areas where there are no VA or military facilities. This especially impacts citizen soldiers. “One thing we as a nation need to realize—we now are relying more and more on our Guard and Reserve troops,” Gaytan explains. They can always turn to The American Legion for support and help, he adds. For additional information on the

American Legion refer to <http://www.legion.org> or call Customer service: (800) 433-3318 or Veterans Affairs and Rehabilitation: (202) 861-2700. [Source: AFCRA Veterans Focus Rita Boland article Nov 2011 ++]

Veteran Hearing/Mark-up Schedule: Following is the current schedule of Congressional hearings and markups pertaining to the veteran community. Congressional hearings are the principal formal method by which committees collect and analyze information in the early stages of legislative policymaking. Hearings usually include oral testimony from witnesses, and questioning of the witnesses by members of Congress. When a U.S. congressional committee meets to put a legislative bill into final form it is referred to as a mark-up. Veterans are encouraged to contact members of these committees prior to the event listed and provide input on what they want their legislator to do at the event. Membership of each committee and their contact info can be found at <http://www.congress.org/congressorg/directory/committees.tt?commid=svete>:

March 7, 2012. House Committee on Veterans' Affairs and Senate Committee on Veterans' Affairs will hold a series of joint hearings to receive the legislative presentations of Veterans' Organizations. 10:00 A.M.; G-50 Dirksen

March 14, 2012. Senate Committee on Veterans' Affairs will hold a hearing entitled "Ending Homelessness Among Veterans: VA's Progress on its Five Year Plan." 10:00 A.M.; 418 Russell

March 15, 2012. The Senate Appropriations Subcommittee on Military Construction, Veterans Affairs, and Related Agencies will hold a FY13 VA Budget hearing. 10 A.M.; 124 Dirksen

March 21, 2012. Joint Hearing: House Committee on Veterans' Affairs and Senate Committee on Veterans' Affairs will hold a joint hearing to receive the Legislative Presentations of the Military Order of the Purple Heart; Iraq and Afghanistan Veterans of America; Non Commissioned Officers Association; American Ex-Prisoners of War; Vietnam Veterans of America; Wounded Warrior Project; National Association of State Directors of Veterans Affairs and Retired Enlisted Association. 10:00 A.M.; G-50 Dirksen

March 22, 2012. House Committee on Veterans' Affairs and Senate Committee on Veterans' Affairs will hold a series of joint hearings to receive the legislative presentations of Veterans' Organizations. 10:00 A.M.; 345 Cannon

March 28, 2012 (Formerly December 14th). SVAC will hold a hearing on the nomination of Margaret Bartley, and Coral Wong Pietsch to be Judges of United States Court of Veterans Appeals for Veterans Claims. 10:00 A.M.; 418 Russell

Saving Money: If you're one of the 50 million Americans without health insurance, you may think your only healthcare option is the emergency room. Not true. If you're going without insurance check out the following:

1. **Federally Qualified Health Centers.** CareSource, is a Federally Qualified Health Center, one of hundreds nationwide. According to the Health Resources and Services Administration's website http://findahealthcenter.hrsa.gov/Search_HCC.aspx, here's what they can do:

- Checkups when you're well
- Treatment when you're sick
- Complete care when you're pregnant
- Immunizations and checkups for your children
- Dental care and prescription drugs for your family
- Mental health and substance abuse care if you need it

These places price their services based on your ability to pay. To find one near you, go to the HRSA search page at [https://www.hrsa.gov/](#) and type in your address. And if you're imagining these places look like some squalid clinic resembling the DMV, think again. Remember, these aren't government clinics: They're private clinics that receive part of their funding from the government.

2. **Medicaid.** Another option for the low-income uninsured is Medicaid, state-run programs providing health coverage for families. As with Medicare, those who qualify receive all kinds of health services. While programs differ by state, most cover services ranging from eye doctor visits to hospice services. To learn more about Medicaid, visit <https://www.cms.gov/medicaideligibility/>. To find out if you qualify, you'll want to visit your state's Medicaid information site. A list of links can be found in the attachment to this Bulletin entitled, "**Medicaid Program State Websites**".

3. **Children's Health Insurance Program.** If you don't qualify for Medicaid, your kids may still qualify for a state-run Children's Health Insurance Program. In some states, this program is combined with Medicaid. The eligibility cutoff varies, but "children up to age 19 in families with incomes up to \$45,000 per year (for a family of four) are likely to be eligible," says the U.S. Department of Health and Human Services (HHS). To learn more about these programs, check out <http://www.insurekidsnow.gov/state/index.html>.

4. **High-Risk Insurance Pools.** You might also qualify for insurance through state-run high-risk insurance pools, designed for people who could normally afford insurance but have pre-existing conditions ranging from cancer to asthma that led to insurance denials. That practice will be fully banned in 2014 because of the Affordable Care Act. Until then, HealthInsurance.org can tell you more about each state's high-risk pool program. If you've looked at this option before, look again: HHS made it easier and cheaper to acquire coverage last July.

5. **Affordable Prescriptions.** Those with low incomes can often get prescription drug assistance, including free drugs. There are dozens of private and public programs available:

- **Needy Meds** (<http://www.needymeds.org>) – Offers help getting more than 4,100 medicines, plus links to discount drug card and coupon programs, thousands of free or low-cost clinics around the country, programs offering medical equipment and supplies for specific diseases. Also has a glossary of insurance and related terms, and a tool to see if you're eligible.
- **Partnership for Prescription Assistance** (<http://www.pparx.org>) – Entry point for more than 475 different programs sponsored by pharmaceutical companies, government programs, health plans and charities.
- **Patient Advocate Foundation** (<http://www.patientadvocate.org>) – The most comprehensive patient assistance program, with far more than help getting free or discount prescriptions. Provides help paying for surgery or large copayments for medical care, child care while patients are getting treatments, even transportation to treatments. Has specialized case managers who can help with a multitude of financial health care issues.
- **PatientAssistance.com** (<http://www.patientassistance.com>) – Has links to more than 1,000 prescription-assistance programs, free clinics and programs that help with copayments for treatment for cancer and rare and chronic diseases.

- **Rx Assist** (<http://www.rxassist.org>) – Links to state-run assistance programs and programs to help with drug copayments, a search by drug name for available help, online patient education.
- **Rx Hope** (<http://www.rxhope.com>) – Offers online assistance applications, links to medical group, patient advocate and drug company sites.
- **State Pharmaceutical Assistance Programs** (<http://www.ncsl.org/programs/health/drugaid.htm>) – This is a report from the National Conference of State Legislatures detailing programs offered by each state.
- **Heart Support of America** (<http://www.heartsupportofamerica.org>) – Provides financial assistance to those in need of heart surgery.
- **AIDS Treatment Data Network** (<http://www.atdn.org>) – If you’re having trouble paying for AIDS medications, these people can help.
- **American Kidney Fund** (<http://www.kidneyfund.org/patient-grants/>) - The American Kidney Fund’s Patient Grant Program is already helping more than 75,000 patients across the country with their health insurance premiums, Medicare expenses, and other related expenses that insurance will not cover.
- **Caring Voice Coalition** (<http://www.caringvoice.org/program-fa.htm>) – Offers a Financial Assistance Program that “may pay a portion or all of a patient’s share of cost under the patient’s health insurance plan”.
- **National Organization for Rare Disorders** (<http://www.rarediseases.org/programs/medication>) – List of all programs currently offered by NORD which help pay for patient medication, focused on those suffering from a rare disease or disorder.
- **Together Rx Access** (<http://www.togetherrxaccess.com>) – Just one of many prescription payment cards. It’s not full health insurance, but they can help you cover much of your prescription costs.

In addition, some states have discount programs. To locate them refer to <http://www.ncsl.org/IssuesResearch/Health/StatePharmaceuticalAssistanceProgramsNCSL200/tabid/14334/Default.aspx#Discount>. Also keep in mind that some pharmacies and grocery stores, including Walmart, Kroger, Target, Publix, and others now offer some antibiotics and common medications free or at rates as low as \$4 for a month’s supply.

6. Free help finding help. There are organizations charging little or nothing to help people find insurance and health care they can afford.

- Patient Advocate Foundation is a national nonprofit that offers advice, case management assistance, a program that helps those who already have insurance and certain diseases get lower co-pays, and a database of financial resources sorted by state.
- Healthcare.gov, originally designed to explain the changes made through the health care reform law enacted last year, is also a great resource for those seeking care. It offers an insurance plan finder, tools for comparing the quality of care across providers, advice on enrolling in free or low-cost programs, and plenty of other information.
- The Access Project helps people enroll in many programs, find a doctor, or get cheaper care. They specialize in helping HIV and hepatitis patients, but offer many other resources for everyone.

5. Other solutions.

- **Catastrophic coverage:** If you find that typical insurance is too expensive, do what I did: Get a high-deductible policy. These policies are much less expensive because you pay the first \$2,000 – \$10,000 of expenses yourself – hence the name “catastrophic coverage.” While you’ll be out-of-pocket for things like doctor visits, at least if the worst happens, you’ll be able to avoid going bankrupt. Plus, just being associated with an insurance company will often result in significant discounts. To find a high-deductible policy, try our insurance search tool.

- Part-time work: Benefits packages usually come only with full-time employment, but not always. A number of companies, including Starbucks and Lowe's, offer insurance for part-time employees.
- Non-insurance options: To see some ingenious ways some people have found to bypass the traditional health insurance system, check out Health Care Without Insurance – \$50/Month? and Medi-Share: Health Care Without Insurance.

[Source: MoneyTalksNews Stacy Johnson article 30 Sep 2011 ++]

Notes of Interest:

- **Obit.** Colonel Bill Dabney, USMC, Ret. passed away in FEB. He was a Navy Cross recipient for his heroism as a company commander at Khe Sanh. Of the 180 men in his company, 163 of the men were either killed or wounded during that battle. America has lost a real hero. Captain William Dabney tells the story of the defense of Hill 881 South during the siege of Khe Sanh in an excellent video clip of the operation at http://www.youtube.com/watch?v=GiOl6in_CA&feature=share
- **Automated traffic ticketing .** U.S. PIRG researchers put together the first national study focused on a growing trend: automated traffic ticketing using privately run red-light cameras. It found that public safety did not appear to be the driving concern. For example, some vendors shorten yellow lights in order to collect more per-ticket fees. And if cities want to get out of a deal, it can come at a high cost. After the city of Baytown, Texas, rejected aggressive ticketing, American Traffic Solutions filed a lawsuit, and taxpayers ended up settling for a \$1 million early termination fee.
- **Drinking water.** In the United States, 49 million Americans get their drinking water from sources within 50 miles of an active nuclear power plant. Using newly available data, U.S. PIRG found that drinking water for major metropolitan areas, including Philadelphia, San Diego and New York City would be at risk in the event of a disaster or leak.
- **Presidents.** 24 of the 44 men who have been President of the United States have served in some branch of the military. Until World War II, a majority of our Presidents had served in the Army; since then, most served in the Navy.
- **Voter ID.** In Wisconsin your VA issued ID card is not considered an acceptable form of identification under the state's new voter ID law.



- **GOP.** The traditional name for the Republican Party of the United States. The origins of GOP goes all the way to 1850s and is the short form for 'Gallant Old Party'. It was later modified to Grand Old Party, which was an ironic statement as the Democratic Party had been formed in 1832, about 22 years before the formation of Republican party. The first convention of the GOP was held in 1854 and the abbreviation was formed by the 1870s. The symbol of the party, the elephant was born out of cartoons that appeared in Harper's Weekly in 1872 & 1874 and before that in an 1860 issue of Railsplitter. All related the elephant to the Republican party.



- **Veterans Crisis Line.** The Veterans Crisis Line has fielded 500,000 calls from Veterans since 2007, which has led to 20,000 rescues of Veterans in a mental health crisis. Veterans can call 24/7 at 1-800-273-8255, chat online, and now text 838255 for help.
- **DAV HVAC/SVAC Testimony.** The full written testimony of DAV National Commander Donald L. Samuels before the Joint Session of the House and Senate Veterans' Affairs Committees is available in this Bulletin's attachment titled, "**DAV HVAC-SVAC Testimony Feb 2012**".

[Source: Various 15-29 Feb 2012 ++]

Medicare Fraud Update 86: Calling the 2010 health care reform law “the most significant anti-health fraud law in American history,” Health and Human Services Secretary Kathleen Sebelius on 14 FEB joined with Attorney General Eric Holder to announce that a record of almost \$4.1 billion in taxpayer dollars were recovered in fiscal 2011 from individuals and companies that had defrauded the Medicare program. In releasing an annual report of the joint Justice-HHS Health Care Fraud and Abuse Control Program, the two Cabinet members said at a press conference that investigations and convictions both criminal and civil had risen in large part because of the fraud prevention and enforcement action team the Obama administration set up in 2009, and because of the extra \$350 million in funding provided under the Affordable Care Act.



Secretary Kathleen Sebelius and Attorney General Eric Holder

In fiscal 2011, Justice strike force operations charged a record number of 323 defendants, who allegedly billed the Medicare program collectively for more than \$1 billion, the report said. The department secured 172 guilty pleas, convicted 26 defendants at trial and sentenced 175 defendants to prison. Another \$2.4 billion was recovered through civil cases brought under the False Claims Act. “These are stunning numbers,” Holder said, “and they wouldn’t be possible without the two agencies working collaboratively.” Much of the fraud is committed by sellers of durable medical equipment and home health providers, the officials said, as well as pharmaceutical products marketed for uses not approved by the Food and Drug Administration. Holder said he expanded his strike forces to nine new locations that Medicare data show to be hot spots of heavy billing.

Sebelius credited improved technological screening of submitted bills that appear suspicious, comparing the process to credit card companies’ computer programs that automatically kick out a bulge in purchases of, for example, multiple flat-screen televisions. “We’re getting away from the old pay-and-chase model by making it harder to commit the fraud in the first place,” she said. Companies that are terminated from one Medicare program due to fraud are now terminated from all programs, she added, as are those who lie on applications. “It sends a

message to criminals that the days of easy money through stealing from Medicare have come to an end,” Sebelius said. “We’re gaining the upper hand. It’s one of the best investments we can make for the taxpayer.”

In the interim Illinois Governor Pat Quinn's administration will start combing records for Medicaid fraud without the federal government's approval. State officials told aides to President Barack Obama that they are moving forward after waiting nearly a year for the go-ahead. “We have to reduce expenditures there,” Quinn, who has pledged to cut \$2 billion from the program that provides health care to 2.7 million poor and disabled Illinois residents, said. Healthcare and Family Services Director Julie Hamos wrote in a letter to the U.S. Department of Health and Human Services that her agency will start checking the addresses of Medicaid recipients against driver's license records to ensure they live in Illinois. Another plan to verify income eligibility is forthcoming. Federal officials have expressed concern that the plan is at odds with Obama's health care access law that forbids states from making it harder for low-income residents to get Medicaid coverage. But Democrats in the Quinn administration, under pressure from Republicans to enact reforms to save money, say they can't wait any longer. Lawmakers approved changes -- including a crackdown on fraud -- in January 2011, and Hamos said Washington continues to stall state efforts.

The letter said that verifying residency is crucial to the state's program. It said that of medical information cards returned as undeliverable in November alone, 6 percent -- or as many as 6,000 -- came back indicating the intended recipient has an out-of-state address. Illinois Republicans pointed to the figure as evidence the state's Medicaid program could have hundreds of millions of dollars of fraudulent spending. Sen. Dale Righter, R-Mattoon, criticized Quinn for dragging his feet on the reforms and Obama for making Medicaid too easy to get. “It's the very provisions of the Affordable Care Act that the president is saying is going to help get rid of fraud and abuse that are standing in the way of trying to root out fraud and abuse here in Illinois,” Righter told the Chicago Tribune, which first reported the Quinn administration's move. Hamos said she was not responding to GOP criticism and her agency released a chronology of events, beginning with the state's late-April request for guidance from the federal government on implementing its reforms. She said the state complied with a federal request to set up an electronic system to ensure Medicaid recipients do not earn more than they're allowed, but that U.S. officials still balked. The agency is working with the Revenue Department to be able to review income tax returns and use other electronic databases to check wages. [Source: Fox News 10 Feb & GovExec.com Charles S. Clark article 14 Feb 2012 ++]

Medicare Fraud Update 87: Software designed to help Medicare managers zero in on fraudulent claims is showing disappointing results, according to three senators who evaluated a program that the Health and Human Services Department praises as an effective new anti-fraud tool. The Fraud Prevention system, a \$77 million predictive analytics software program that the Centers for Medicare and Medicaid Services has been using since summer 2011, scans multiple Medicare claim invoices and kicks out suspicious patterns, such as high-volume wheelchair purchases in one location.



HHS Chief Kathleen Sebelius

HHS Secretary Kathleen Sebelius on Feb. 14 praised the program as a key component in joint HHS-Justice Department successes in prosecuting Medicare fraud. But recently summarized results reported only \$7,591 in suspended payments, among other indicators, a total called “disappointing” by Sen. Tom Carper (D-DE), the chairman of the Senate Homeland Security and Governmental Affairs Federal Financial Management Subcommittee. Carper has been monitoring Obama administration efforts to reduce improper payments from government. In DEC 2011, Carper joined with Sens. Tom Coburn (R-OK) and Scott Brown (R-MA) to send a letter to CMS expressing concern that “CMS may not have sufficient metrics and processes in place to ensure the success of predictive analytics technology” in the anti-fraud program. The senators posed 10 detailed questions on the agency’s progress in applying the technology that was required under the 2010 Small Business Operations Act and contracted out to Northrop Grumman Corp. and IBM. In a Jan. 27 reply, Peter Budetti, CMS deputy administrator and director for program integrity, wrote that his agency has metrics in place and the software is “significantly changing” the way it pursues fraud and has brought successes. “Predictive analytics are now being used to review all Medicare Part A, Part B and durable medical equipment claims prior to payment. For the first time, CMS has a real-time view of fee-for-service claims across claim types and the geographic zones of its claims processing contractors,” he said.

Leads from the program had resulted in nine overpayment determinations, valued at \$2,196,369, and had prompted 437 new investigations and aided 351 existing investigations with real-time information, Budetti added. He said CMS also has revoked Medicare billing privileges and has initiated 26 revocation actions against providers and suppliers based on leads generated by the system, affecting providers who were paid \$7,366,974. The Fraud Protection System “has greatly increased collaboration among our fraud contractors,” such as Office of Inspector General and FBI investigators and Justice prosecutors, Budetti wrote. Ted Doolittle, deputy director of Medicare’s anti-fraud program, responded to the senators’ complaints in an interview with the Associated Press, saying, “Suspending payments is only one way of stopping the money. There’s lots of ways of stopping the money, and we are using them all. Looking at payment suspensions only -- that’s an unsophisticated view that doesn’t give you a full picture of our activities.” Carper, according to his staff, has urged CMS to present a comprehensive plan to address the program’s failings and will continue to monitor its progress through his subcommittee oversight and future hearings. Earlier this month Carper praised CMS’ Medicare Recovery Audit Contractors program for recouping \$797 million in 2011 and for being “on track to double the amount of recovered overpayments this year compared to last year.” [Source: GovExec.com Charles S. Clark article 27 Feb 2012 ++]

Medicare Fraud Update 88:



- **Miami FL** - A drug dealer who switched to Medicare fraud because it was easy money got a big break 16 FEB from a federal judge, who slashed his nearly 20-year prison sentence for healthcare fraud and money-

laundering conspiracies by about half because he helped authorities make a slew of other criminal cases. Angel Castillo Jr. will serve a 10-year sentence after prosecutors gave him credit for helping make seven Medicare fraud cases involving a dozen defendants who plotted to steal \$120 million from the taxpayer-funded program. Imprisoned since 2008, Castillo collected his reward for playing an “important role” by providing inside information on local healthcare operators and bank officials who scammed the Medicare program. In 2008, Castillo was convicted of billing \$48 million in false Medicare claims through eight of his medical equipment companies in 2005 and 2006. But he also admitted he owned three additional supply businesses using Cuban migrants as “straw” owners. His eight healthcare companies raked in about \$8 million from the government entitlement program. He personally pocketed more than \$2 million. To fool Medicare, Castillo bought elderly-patient lists and misappropriated physicians’ ID numbers to bill the health insurance program for mattresses, knee braces and artificial limbs, among other items. For a few years, Medicare made Castillo a millionaire. He rented an upscale South Beach apartment, met his future wife and ate all his meals at expensive restaurants.. He bought \$50,000 diamond necklaces, a Rolex and other expensive jewelry off shopping networks on cable television. He put down \$200,000 in cash to buy a four-bedroom, three-bath home for \$570,000 in Cutler Bay. But Castillo’s mini-Medicare empire collapsed in 2007 when other associates snitched on him.



Angel Castillo Jr.

- **Wheeling IL** - Gary Winner, 50, was sentenced 10 FEB to more than three years in prison for shipping unwanted penis enlargers to diabetes patients as part of a larger fraud scheme that bilked \$2.2 million from Medicare over four years. He must also forfeit more than \$2.2 million that prosecutors say Medicare lost because of the plot. Winner pleaded guilty in November to two counts of health care fraud, the introduction of an adulterated and misbranded medical device into interstate commerce and money laundering. He faced up to 33 years in prison. Winner purchased penis enlargers for an average of \$26 each from online sex shops and then repackaged and shipped them to patients with information claiming the so-called “erectile pumps” helped “bladder control, urinary flow and prostate comfort.” The online stores peddling adult sexual products sold the devices under a variety of names. Winner targeted Medicare beneficiaries through his medical equipment company, Planned Eldercare, based in Buffalo Grove, Ill., and persuaded patients to provide their Medicare information by offering free medical equipment and supplies. The plot targeted arthritis and diabetes patients through telemarketing, prosecutors said. Diabetes patients received the penis enlargers repackaged in clear plastic bags with an information sheet claiming “regular use” increases blood flow in the urinary tract and prostate. Winner then charged Medicare an average of \$284 each for a total of \$370,305, authorities said. In charging Medicare, Winner claimed the devices treated erectile dysfunction. Medicare reimburses for products treating organic impotence and erectile dysfunction and requires the devices be “medically necessary” and prescribed by a physician. The erectile pumps shipped by Winner served no medical purpose. Winner also waived copayments for Medicare patients, which the program prohibits.



Gary Winner

- **Orlando FL** - Butler Moultrie, 46, the operator of a Broward halfway house was sentenced 21 FEB to nearly three years in prison for his role in a Medicare fraud kickback scheme. Moultrie pleaded guilty in December to sending patients to a fraudulent mental health provider, American Therapeutic Corporation. He also was sentenced to three years probation and was ordered to pay \$801,000 in restitution. Most of the residents at Moultrie's halfway house were recovering from drug and alcohol addictions. Moultrie referred Medicare beneficiaries to ATC to receive intensive mental health treatment in exchange for illegal health care payments. He admitted to knowing the kickbacks were illegal and that ATC fraudulently billed Medicare for the services. The ineligible beneficiaries attended treatment programs that were not legitimate so that ATC could bill Medicare more than \$200 million in medically unnecessary services. Moultrie benefited from approximately \$1.9 million in fraudulent billing to the Medicare program, according to the plea agreement.
- **Houston TX** - Lodrick Eneh, 44, has been sentenced to federal prison for his role in a patient information trafficking scheme in the Eastern District of Texas. Eneh pleaded guilty on June 20, 2011, to illegal remunerations charges and was sentenced to 24 months in federal prison on 21 FEB. From September 2006 until November 2008, Eneh conspired to pay and receive kickbacks for the referral of Medicare patients. Eneh entered into arrangements with Anthony Nnadi, Chima Imoh, and John Nasky Okonkwo, owners of medical supply businesses, in which he agreed to provide them with patient information that would be used to submit claims to Medicare. After the business owners submitted claims to Medicare and were reimbursed, they would split a percentage of the proceeds with Eneh. Nnadi, Imoh, and Nasky have all pleaded guilty to health care fraud offenses. Nnadi was sentenced to five years probation and ordered to pay \$576,000.00 in restitution to the Medicare program and to forfeiture of \$100,000. Nasky was sentenced to 45 months in federal prison and ordered to pay restitution of \$4.9 million to the Medicare and Medicaid programs and forfeiture of \$4.8 million. Imoh was sentenced to a five year term of probation and ordered to pay \$56,000 in restitution to Medicare for his role in the scheme.
- **Hollywood FL** - Michael Schoenwald pleaded guilty Cincinnati to one count of conspiracy to commit mail and wire fraud in connection with a drug diversion scheme in which he was involved. Dr. Schoenwald purchased prescription Lupron, an injectable drug used to treat prostate cancer, at discount rates due to his status as a health care provider. Governing law prohibited Schoenwald from re-selling the drugs, and his agreement with the manufacturer provided that he would not do so. Nevertheless, Schoenwald sold the Lupron to Gregory Pfizenmayer, who, in turn, sold the drugs to legitimate wholesalers in Ohio and elsewhere. Pfizenmayer sold the drugs accompanied by documents, required by law, that contained false information about the source of the drugs. A co-conspirator arranged the transactions between Schoenwald and Pfizenmayer. Pfizenmayer pleaded guilty to one charge of conspiracy to commit mail and wire fraud in February 2011 and awaits sentencing. Schoenwald received compensation from Pfizenmayer for the prescription drugs through wire transfers, and in turn paid his co-conspirator a share of the profits. All told, Schoenwald, Pfizenmayer and their co-conspirator sold over \$1 million dollars worth of prescription drugs through this scheme.

- **Houston TX** - Mohammad Khan, 62, pleaded guilty 22 FEB for his role in a \$116 million Medicare fraud scheme involving false claims for mental health treatment. Khan was arrested on Feb. 8, 2012. In his plea, Khan admitted that, from JAN 08 until the time of his arrest, he caused the submission of \$116 million worth of fraudulent claims to Medicare for partial hospitalization program (PHP) services purportedly provided by the hospital. A PHP is a form of intensive outpatient treatment for severe mental illness. Khan was the assistant administrator of Riverside General Hospital and controlled the day-to-day operations of Riverside's PHPs. Riverside maintained a valid Medicare provider number that was used to submit claims to Medicare for PHP services that were not medically necessary, and in some cases, never provided. Many of the beneficiaries for whom Riverside submitted claims to Medicare for PHP services did not have severe mental illness and did not need the treatment provided in a PHP. In his plea, Khan admitted that he paid and caused the payment of kickbacks to patient recruiters and owners of assisted living facilities and group care homes in exchange for the recruiters and owners sending Medicare beneficiaries to Riverside's PHPs. Khan also paid Medicare beneficiaries in the form of cigarettes, food and coupons redeemable for items available at Riverside's "country stores," in exchange for those beneficiaries attending Riverside's PHPs. Khan is scheduled to be sentenced on May 25, 2012. Khan faces a maximum sentence of 10 years in prison for the conspiracy to commit health care fraud count, five years in prison for the conspiracy to defraud the United States count and five years in prison for each of the 5 health care kickback counts.

- **Houston TX** - Michelle Turner, 44, a patient recruiter for Family Healthcare, a Houston durable medical equipment (DME) company, was convicted 24 FEB by a federal jury of health care fraud related to an "arthritis kit" fraud scheme. Evidence at trial showed that Turner operated a "boiler room" and hired teenagers to make unsolicited telephone calls to elderly Medicare beneficiaries asking them if they wanted a free arthritis kit. The arthritis kit was billed to Medicare at more than \$3,000. In total, Family Healthcare submitted approximately \$1.1 million in fraudulent claims to Medicare. Under Medicare rules, unsolicited telephone calls are prohibited. Additionally, a Medicare beneficiary is responsible for paying a 20 percent co-pay for all DME. Beneficiaries' doctors further testified at trial that the beneficiaries did not need the arthritis kit. At sentencing, Turner faces maximum penalties of 10 years in prison for the health care fraud conspiracy count; five years in prison for conspiring to receive illegal kickbacks for referring Medicare beneficiaries; and five years in prison for each count of receiving an illegal kickback for referring a Medicare beneficiary.

- **Los Angeles** - The former pastor of a now-defunct South Los Angeles church was sentenced 27 FEB to three years behind bars for a power wheelchair fraud scheme that bilked Medicare out of about \$6.7 million. Connie Ikpoh, 49, was found guilty last August, along with her husband, of conspiracy to commit health care fraud and multiple counts of health care fraud stemming from the scam that involved more than \$14 million in illegitimate Medicare claims. Although prosecutors had recommended that U.S. District Judge Terry J. Hatter Jr. sentence Ikpoh to more than a dozen years in prison, the judge said he imposed a far more lenient penalty out of consideration for the defendant's pre-teen daughter and the fact that Ikpoh had lost her nursing career. Last month, Hatter sentenced Ikpoh's husband, Christopher Iruke, to 15 years behind bars and ordered him to pay a share of \$6.7 million in restitution and serve three years under supervised release after he gets out of custody. The judge ordered Ikpoh to pay a share of the restitution and also serve three years under supervised release after she is released from prison. Ikpoh and Iruke, 60, were pastors at Arms of Grace Christian Center on Crenshaw Boulevard, where the couple also ran Pascon Medical Supply. The pair hired employees to help run the operation. Beginning in 2002, Ikpoh, Iruke and associates billed Medicare nearly \$6,000 apiece for high-end power wheelchairs that cost about \$900 wholesale. Iruke's company, as well as another medical equipment business registered solely to Ikpoh, filed for \$14.2 million in claims and collected about \$6.7 million in reimbursements, prosecutors said. The money was used to bankroll a lifestyle of luxury cars, international travel and nearly half a million dollars of remodeling on the couple's Baldwin Hills home.

[Source: Fraud News Daily 15-29 Feb 2012++]

Medicaid Fraud Update 58:

- **Los Angeles CA** - Dr. Eric Chan have accused of defrauding a California health care program of more than \$3 million has was arrested 12 FEB by Philippine government agents. National Bureau of Investigation official Claro de Castro Jr. said he was apprehended inside a military camp in metropolitan Manila. Chan is a medical corp reservist of the Armed Forces of the Philippines. Chan fled the U.S. to evade arrest and prosecution for cases including grand theft before the Los Angeles Superior Court. Clinics he owned allegedly collected payments from California's Medi-Cal program by presenting false medical claims. Chan, alias Eric Uy Garchitorena, was arrested based on a warrant issued by a Manila court. He is a subject of an extradition case.

[Source: Fraud News Daily 15-29 Feb 2012 ++]

State Veteran's Benefits: The state of Vermont provides several benefits to veterans. To obtain information on these refer to the “**Veteran State Benefits VT**” attachment to this Bulletin for an overview of those benefits. Benefits are available to veterans who are residents of the state in the following areas:

- Veteran Housing Benefits
- Employment Benefits
- Education Benefits
- Other State Veteran Benefits

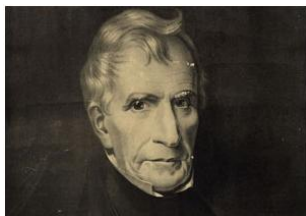
[Source: <http://www.military.com/benefits/content/veteran-state-benefits/vermont-state-veterans-benefits.html> Feb 2012 ++]

Military History: In total 24 of the 44 men who have been President have had some military service. Some including Washington, Grant, Eisenhower, had renowned and distinguished careers while others served for much shorter periods of time.

Military Roots: Presidents who were Veterans



George Washington marshaled an out-numbered, ill-trained army to victory over the British by learning the importance of simply keeping his army intact and winning an occasional victory to rally public support.



William Henry Harrison was a soldier, farmer, and outdoorsman; but his term as President would end prematurely. He caught a cold after giving a two hour inaugural address without a coat or hat and would die in office just three weeks later.



Ulysses S. Grant attended West Point against his will and graduated in the middle of his class with no intention of pursuing a military career; he wanted to become a professor of mathematics.



On D-Day, 1944, Dwight Eisenhower was Supreme Commander of the troops invading France.

Presidents who Served in the Military

- George Washington: Revolutionary War (Continental Army)
- James Monroe: Revolutionary War (Continental Army)
- Andrew Jackson: War of 1812 (Army)
- William Henry Harrison: Indian campaigns (Army)
- John Tyler: War of 1812 (Army)
- Franklin Pierce: Mexican War (Army)
- Abraham Lincoln: Black Hawk War (Indian Wars) (Army)
- Ulysses S. Grant: Mexican War and Civil War (Army)
- Rutherford B. Hayes: Civil War (Army)
- James A. Garfield: Civil War (Army)
- Chester A. Arthur: Civil War (Army)
- Benjamin Harrison: Civil War (Army)
- William McKinley: Civil War (Army)
- Theodore Roosevelt: Spanish American War (Army)
- Harry Truman: World War I (Army)
- Dwight Eisenhower: World War I and World War II (Army)
- John F. Kennedy: World War II (Navy)
- Lyndon B. Johnson: World War II (Navy)
- Richard Nixon: World War II (Navy)
- Gerald Ford: World War II (Navy)
- Jimmy Carter: Cold War era (Navy)
- Ronald Reagan: World War II (Air Force)
- George H.W. Bush: World War II (Navy)
- George W. Bush: Vietnam War era (Air Force Reserve)

For some Presidents of the United States, the title “Commander-in-Chief” was their first association with the military, but a majority of our country’s leaders came to office as Veterans. The first President of the United States, George Washington, set an important precedent by entering the Presidency as a civilian, rather than as a commanding general with military forces at his disposal. Washington voluntarily resigned his commission as commander of the Continental Army in December 1783 before re-entering public service four years later. He presided over the Constitutional Convention in 1787 and became the only President in American history to receive a vote from every elector.

Partisanship soon became the norm in American politics, but the value of military service remained an important quality that citizens sought in their President. The prevalence of Presidential Veterans often corresponded with America's military engagements and generals' success on the battlefield. Until World War II, a majority of our Presidents had served in the Army; since then, most served in the Navy.

- Post-Revolutionary War America marked an era of constant conflict – skirmishes with Native Americans, land disputes with the Spanish and French, another war with Great Britain – and the military offered an opportunity for a bright, aspiring man to make a name for himself. Our ninth President, William Henry Harrison, embarked on his military career at age 18, enlisting 80 men off the streets of Philadelphia to serve in the Northwest Territory. Harrison quickly rose through the ranks and distinguished himself in battle during the Indian campaigns in what is now the Midwest. The strategies and outcomes of Harrison's battles were mixed, but relentless force won out and he became the talk of the nation.
- Civil War Veteran Ulysses S. Grant also gained national acclaim for his military service. Grant was a West Point graduate who fought in the Mexican War, but it was his calm, steely command of Union troops during the Civil War that earned Lincoln's confidence. As President, Grant presided over the government much as he had run the Army. The Civil War produced six Veteran Presidents in the post-war period, all of them having served in the Union Army.
- Past Presidents did not use military experience solely as a catalyst to power. Spanish-American War Veteran Theodore Roosevelt was a man of action both in war and in peace. In 1902, he was the first to call upon the services of the international Court of Arbitration at The Hague to resolve the differences between the United States and Mexico. He also served as mediator between Japan and Russia, leading them to a 1905 peace treaty.
- The First and Second World Wars ushered in another series of Veteran Presidents, starting with Harry Truman and West Point graduate General Dwight Eisenhower. Both men exemplified the strengths of military training by proving themselves to be diplomatic, dynamic leaders in an unstable world. The Truman Doctrine, pledging American support for "free peoples" around the world, followed by Eisenhower's enforcement of desegregation in U.S. schools, after Brown vs. Board of Education, by sending troops to Little Rock, Ark. shaped America's foreign and domestic policies ever since.
- The nation's most recent Veteran President was George W. Bush, who served with the Texas Air National Guard. Bush presided over the most dramatic reorganization of the federal government since the beginning of the Cold War, reforming the intelligence community and establishing new institutions like the Department of Homeland Security in response to the September 11, 2001 terrorist attacks. Internationally, Bush commanded the U.S. military in a new type of battle: the 'War on Terror.'

The evolution of warfare has introduced many new tactical and technical dynamics to the U.S. military, but the core qualities of decision-making and inspiring leadership remain. In spite of, or perhaps because of, the hardships they have endured, OEF/OIF/OND Veterans will most likely be among the next generation of Veteran Presidents to serve in America's highest military office: Commander-in-Chief. [Source: TREA News for the Enlisted 24 Feb 2012 ++]

Military History Anniversaries: Significant March events in U.S. Military History are:

- Mar 01 1916 - WWI: Germany begins attacking ships in the Atlantic
- Mar 01 1941 - WWII: German troops invade Bulgaria
- Mar 01 1942 - WWII: 3 day Battle of Java Sea ends. US suffers a major naval defeat
- Mar 01 1945 - WWII: U.S. infantry regiment captures Mönchengladbach, Germany

- Mar 01 1950 - Cold War: Klaus Fuchs is convicted of spying for the Soviet Union by disclosing top secret atomic bomb data.
- Mar 01 1954 - Cold War: U.S. explodes 15 megaton hydrogen bomb at Bikini Atoll.
- Mar 02 1941 - WWII: First German military units enter Bulgaria after it joined the Axis Pact.
- Mar 02 1943 - WWII: Battle of the Bismarck Sea - U.S. and Australian forces sink Japanese convoy ships.
- Mar 02 1991 - Gulf War: Battle at Rumaila Oil Field brings end to the 1991 Gulf War.
- Mar 02 2002 - Iraq War: U.S. invasion of Afghanistan: Operation Anaconda begins (ending on March 19 after killing 500 Taliban and al Qaeda fighters, with 11 Western troop fatalities).
- Mar 02 2004 - Iraq War: Al Qaeda carries out the Ashoura Massacre killing 170 and wounding over 500.
- Mar 03 1776 - Revolutionary War: The first amphibious landing of the United States Marine Corps begins the Battle of Nassau.
- Mar 03 1942 - WWII: Ten Japanese warplanes raid the town of Broome Western Australia killing more than 100 people.
- Mar 03 1945 - WWII: The American and Filipino troops liberate Manila, Philippines after 30 days of fighting.
- Mar 04 1776 - Revolutionary War: The Americans capture "Dorchester Heights" dominating the port of Boston Massachusetts.
- Mar 04 1944 - WWII: 1st US bombing of Berlin Germany.
- Mar 05 1770 - Boston Massacre. British troops kill 5 in crowd. Crispus Attacker becomes 1st black to die for American freedom.
- Mar 05 1912 - Italian forces are the first to use airships for military purposes using them for reconnaissance behind Turkish lines.
- Mar 05 1915 - WWI: The LZ 33 a zeppelin is damaged by enemy fire and stranded south of Ostend.
- Mar 05 1927 – 1,000 US marines land in China to protect American property
- Mar 05 1942 - WWII: Japanese troop march into Batavia
- Mar 05 1942 - WWII: US Navy's Mobile Construction Battalions "SEABEES" officially formed and placed in action in New Caledonia an island in the southwest Pacific as they landed and began construction of base facilities.
- Mar 05 1943 - WWII: In desperation due to war losses, fifteen and sixteen year olds are called up for military service in the German army.
- Mar 05 1943 - WWII: RAF bombs Essen, Germany
- Mar 05 1945 - WWII: Allies bombs The Hague, Netherlands
- Mar 05 1945 - WWII: The "Battle of the Ruhr" begins.
- Mar 05 1945 - WWII: US 7th Army Corps captures Cologne, Germany.
- Mar 05 1946 - Ho Chi Minh signs an agreement with France which recognizes Vietnam as an autonomous state in the Indochinese Federation and the French Union.
- Mar 06 1862 - Civil War: Battle of Pea Ridge, AR (Elkhorn Tavern)
- Mar 06 1865 - Civil War: Battle of Natural Bridge, Florida
- Mar 06 1943 - WWII: Battle at Medenine North-Africa: Rommel's assault attack.
- Mar 06 1944 - WWII: U.S. heavy bombers staged the first full-scale American raid on Berlin.
- Mar 06 1991 - Following Iraq's capitulation in the Persian Gulf conflict Pres Bush told Congress that "aggression is defeated. The war is over"
- Mar 07 1942 - Japanese troops land on New Guinea.
- Mar 07 1951 - Korean War: U.N. forces in Korea under General Matthew Ridgeway launch Operation Ripper an offensive to straighten out the U.N. front lines against the Chinese.
- Mar 07 1968 - Vietnam War: The Battle of Saigon begun on the day of the Tet Offensive ends.
- Mar 07 1971 - Vietnam War: A thousand U.S. planes bomb Cambodia and Laos.

- Mar 08 1862 - Civil War: On the second day of the Battle of Pea Ridge Confederate force including some Indian troops under General Earl Van Dorn surprise Union troop but the Union troops win the battle
- Mar 08 1942 - WWII: Japanese troops capture Rangoon Burma
- Mar 08 1943 - WWII: Japanese forces attack American troops on Hill 700 in Bougainville. The battle will last five days.
- Mar 08 1965 - Vietnam War: More than 4,000 Marines land at Da Nang in South Vietnam and become the first U.S. combat troops in Vietnam
- Mar 09 1847 - Mexican-American War: The first large-scale amphibious assault in U.S. history is launched in the Siege of Veracruz
- Mar 09 1862 - Civil War: The USS Monitor and CSS Virginia fight to a draw in the Battle of Hampton Roads the first fight between two ironclad warships.
- Mar 09 1862 - Civil War: The USS Monitor and CSS Virginia fight to a draw in the Battle of Hampton Roads the first fight between two ironclad warships.
- Mar 09 1944 - WWII: Japanese troops counter-attack American forces on Hill 700 in Bougainville in a battle that would last five days.
- Mar 09 1945 - WWII: U.S. B-29 bombers launched incendiary bomb attacks against Japan resulting in an estimated 100,000 deaths.
- Mar 09 1966 - Vietnam War: The North Vietnamese capture a Green Beret camp at Ashau Valley.
- Mar 09 1968 - Vietnam War: General William Westmoreland asks for 206,000 more troops in Vietnam.
- Mar 10 1942 - WWII: General Douglas MacArthur abandons Corregidor.
- Mar 10 1945 - WWII: The Imperial Japanese Navy attempts a large-scale kamikaze attack on the U.S. Pacific fleet anchored at Ulithi atoll in Operation Tan No. 2
- Mar 10 1953 - Korean War: North Korean gunners at Wonsan fire on the USS Missouri. The ship responds by firing 998 rounds at the enemy position.
- Mar 10 1975 - Vietnam War: The North Vietnamese Army attacks the South Vietnamese town of Ban Me Thout the offensive will end with total victory in Vietnam.
- Mar 11 1863 - Civil War: Union troops under General Ulysess S. Grant give up their preparations to take Vicksburg after failing to pass Fort Pemberton north of Vicksburg.
- Mar 11 1865 - Civil War: Union General William Sherman and his forces occupy Fayetteville N.C.
- Mar 11 1942 - WWI: General Douglas MacArthur leaves Bataan for Australia.
- Mar 14 1947 The United States signs a 99-year lease on naval bases in the Philippines.
- Mar 14 1951 - Korean War: U.N. forces recapture Seoul for the second time during the Korean War.
- Mar 14 1954 - The Viet Minh launch an assault against the French Colonial Forces at Dien Bien Phu.
- Mar 14 1943 - WWII: The Kraków Ghetto is 'liquidated'.
- Mar 14 1864 - Civil War: Union troops occupy Fort de Russy, Louisiana.
- Mar 14 1915 - WWI: German cruiser Dresden blows itself up near coast of Chile.
- Mar 14 1916 - WWI: Battle of Verdun - German attack on Mort-Homme ridge West of Verdun.
- Mar 15 1781 - Revolutionary War: Battle of Guilford Court House, SC 1,900 British troops under General Charles Cornwallis defeat an American force numbering 4,400.
- Mar 15 1939 - World War II: German troops occupy the remaining part of Bohemia and Moravia; Czechoslovakia ceases to exist.
- Mar 15 1943 - World War II: Third Battle of Kharkov - the Germans retake the city of Kharkov from the Soviet armies in bitter street fighting.
- Mar 15 1944 WWII: Battle of Monte Cassino. Cassino, Italy is destroyed by Allied bombing.
- Mar 15 1916 - President Woodrow Wilson sends 12,000 United States troops over the U.S.-Mexico border to pursue Pancho Villa.
- Mar 15 1989 - VA elevated to a Cabinet-level agency under Public Law 100-527.

- Mar 03 1942 - WWII: USS Perch (SS-176) scuttled after severe damage from Japanese destroyers Ushio and Sazanami. 60 POWs, 6 later died
- Mar 12 1920 - USS H-1 (SS-28) foundered and sunk off Santa Margarita Island, California. 4 died
- Mar 15 1943 - WWII: USS Triton (SS-201) sunk either by Japanese destroyer Satsuki or submarine chaser Ch 24 north of Admiralty Islands. 74 killed

[Source: Various Feb 2012 ++]

Military Trivia 46: Today, the portable Meals Ready to Eat (MRE) consumed by American ground troops come in packages that are easy to open. In times past, the rations carried by a soldier or Marine were enclosed inside steel cans. The P-38 pocket can opener of the early World War II era was the solution to opening a can of food and chowing down. Some soldiers and Marines rate the P-38 as one of the handiest inventions ever issued to troops. While the U.S. armed forces have not issued any P-38s since the mid-1980s, some troops still carry them today. Some have been passed from one generation to the next. Many are part of collections of memorabilia belonging to veterans of past wars.



In 1942, the Subsistence Research Laboratory of Chicago was charged with developing a can opener. The Army's K-ration came with a key opening system, but soldiers disliked it, and their complaints caused the Quartermaster Corps to seek an alternative. The idea was to design a device that was cheaper to make and faster to use than a standard can opener; yet was small and easily carried. The result was a small, folding can opener, the P-38. It was hinged and was just one and one-half inches long with a hole in one end. The hole was to be intended for wire or string to pass through to enable a soldier to drop the can opener into boiling water for cleaning in the field. However, it also worked perfectly for hanging the P-38 on a dog tag chain. The P-38 was first issued in 1943 as part of a ration item known as the Hospital Five-in-One. It became the standard issue item with the G-ration in June 1944. Subsequently, it was issued along with the more widely used C-Ration, which remained in inventory in the postwar era. Finally, the opener was issued in all Army field rations. The Marines picked it up and dubbed it the "John Wayne," apparently because of its toughness or because the actor demonstrated it in a training film. Soldiers and Marines didn't really need to watch the film, though, because written instructions and a drawing printed on the can opener's paper pack showed how easy it was to use.

Although "Opener, Can, Hand, Folding" is its official Army nomenclature, it soon acquired the popular name P-38. Historians disagree as to which of three theories explains the moniker. One is that soldiers called it the P-38 because it could open a can faster than the P-38 Lightning fighter plane could fly. A more likely explanation is that the "38" comes from the length of the can opener, which is 38 millimeters (or 1 1/2 inches). It also is possible that

“38” was the number of punches (a “P” word) it took to open a ration can. All experts agree that P-38 did not derive its name from the Walther P-38 pistol used by the German military in World War II.



U.S. Army C-Rations. Note the P-38 can opener in the bottom left-hand corner. The P-38 was originally included in every individual ration accessory pack

The P-38 was designed to be disposable. The Army assumed soldiers would throw them away after opening their ration cans and began putting one P-38 in every individual ration accessory pack. But no smart soldier ever discarded his P-38. There might always arise a situation in which he might be unable to eat because he did not have a can opener. Once the Army realized that most soldiers were saving the device, it started placing fewer of them in each case of C “rats.” Although soldiers kept the P-38 to open their rations, they also retained it because it was an invaluable field tool. According to an article by Maj. Renita Foster in the Pentagon's newspaper in 1986, the P-38 could clean muddy boots, screw screws, open letters, strip wires, trim threads on uniforms, and sharpen pencils. The P-38 can be used to open cardboard boxes, including the cartons containing Meals Ready to Eat. Some claim that the P-38 could be used to set the points on a car engine, because the thickness of the steel was just right for the point gap. Many a soldier hung his P-38 with his dog tags around his neck. The P-38 disappeared as an issue item in the Army, but some still carry them today, often on a key ring after acquiring it from a family member or friend or purchasing it.

The Army also developed the P-51 can opener (again, with an airplane namesake, the P-51 Mustang fighter). This was a big brother of the original, so to speak, about twice the size of a P-38 and easier to use. Mess hall cooks used it to open field ration metal pre-cooled meal trays. The P-51 can opener is fully two inches long, and the increased length provides greater leverage when opening cans. Several companies are producing versions of the P-38 and P-51 can openers for civilian purchasers today. [Source: Defense Media Activity, Social Media Management 9 JAN 2012 ++]

Tax Burden for Maryland Retirees: Many people planning to retire use the presence or absence of a state income tax as a litmus test for a retirement destination. This is a serious miscalculation since higher sales and property taxes can more than offset the lack of a state income tax. The lack of a state income tax doesn't necessarily ensure a low total tax burden. Following are the taxes you can expect to pay if you retire in Maryland:

Sales Taxes

State Sales Tax: 6.0% (food, prescription and non-prescription drugs exempt)

Gasoline Tax: 23.5 cents/gallon

Diesel Fuel Tax: 24.3 cents/gallon

Cigarette Tax: \$2.00/pack of 20

Personal Income Taxes

Tax Rate Range: Low – 2%; High – 5.5%; Maryland’s 23 counties and Baltimore City may levy an income tax ranging from 1.25% to 3.15% of taxable income. Click here for local rates.

Income Brackets: 8. Lowest – \$1,000; Highest – \$1,000,000

Personal Exemptions: Single – \$3,200; Married – \$6,400; Dependents – \$3,200

Additional Exemptions: If you or your spouse is 65 or older or blind, you are entitled to an extra \$1,000 personal exemption, in addition to the regular personal exemption that you may be entitled to. If you have a federal adjusted gross income of up to \$100,000 (up to \$150,000 if filing jointly) you are entitled to a \$3,200 exemption on the Maryland return for each exemption you are qualified to claim on the federal return.

Standard Deduction: \$1,500 or 15% of Maryland adjusted gross income to maximum of \$2,000 for single returns; \$3,000 up to \$4,000 for married filing jointly.

Medical/Dental Deduction: Federal amount. If you purchase a long-term care insurance contract for yourself or certain members of your family, you may be eligible for a credit of up to \$500 for each insured. To qualify for the credit, the insured must be all of the following: A spouse, parent, stepparent, child or stepchild; A Maryland resident; Not covered by long-term care insurance before July 1, 2000. For tax year 2011, you can claim a credit equal to the premiums paid, up to a maximum of \$330 for each insured person 40 years of age or younger, and up to a maximum of \$500 for each insured person 41 or older.

Federal Income Tax Deduction: None

Retirement Income Taxes: Social Security and Railroad Retirement income are not taxed. If you are 65 or older or totally disabled (or your spouse is totally disabled), you may qualify for Maryland’s maximum pension exclusion of \$26,100 under certain conditions. If you’re eligible, you may be able to subtract some of your taxable pension and retirement annuity income from your federal adjusted gross income. Out-of-state government pensions do not qualify for the exemption. Refer to <http://individuals.marylandtaxes.com/seniors/default.asp> for details.

Retired Military Pay: If you are a retired member of the military, you may be able to subtract up to \$5,000 of your military retirement income from your federal adjusted gross income before determining your Maryland tax. This benefit is now applied to qualifying individuals who retired before July 1, 1991. To qualify, you must have been a member of an active or reserve component of the U.S. armed forces, a member of the Maryland National guard, or you must have retired from active duty with the commissioned corps of the Public Health Service, the National Oceanic and Atmospheric Administration, or the Coast and Geodetic Survey. Refer to <http://individuals.marylandtaxes.com/incometax/military/retirement.asp> for details.

Military Disability Retired Pay: Retirees who entered the military before Sept. 24, 1975, and members receiving disability retirements based on combat injuries or who could receive disability payments from the VA are covered by laws giving disability broad exemption from federal income tax. Most military retired pay based on service-related disabilities also is free from federal income tax, but there is no guarantee of total protection.

VA Disability Dependency and Indemnity Compensation: VA benefits are not taxable because they generally are for disabilities and are not subject to federal or state taxes.

Military SBP/SSBP/RCSBP/RSFPP: Generally subject to state taxes for those states with income tax. Check with state department of revenue office.

Property Taxes

Real property is valued at its full cash value. Property tax rates [<http://www.dat.state.md.us/sdatweb/taxrate.html>] vary widely. No restrictions or limitations on property taxes are imposed by the state, meaning cities and counties

can set tax rates at the level they deem necessary to fund governmental services. These rates can increase, decrease or remain the same from year to year.

Homeowners' Property Tax Credit Program [<http://www.dat.state.md.us/sdatweb/htc.html>] allows credits against the homeowner's property tax bill if the property taxes exceed a fixed percentage of the person's gross income. In other words, it sets a limit on the amount of property taxes any homeowner must pay based upon his or her income.

This plan has been in existence since 1975 when it was known as the "circuit breaker" plan for elderly homeowners. The plan was called circuit breaker because it shut off the property tax bill at a certain point just like an electric circuit breaker shuts off the current when the circuit becomes overloaded. The Maryland General Assembly has improved the plan through the years so that now this program is available to all homeowners regardless of their age, and the credits are given where needed based upon the person's income.

A property tax deferral program allows property owners 65 or over to defer the increase in their property tax bill. Local governments must approve the program. The deferred taxes become a lien on the property and must be repaid when the property is transferred. A Renters' Tax Credit program provides up to \$750 a year for those age 60 and over or 100% disabled if they qualify on the basis of income.

For details on property taxes, refer to <http://individuals.marylandtaxes.com/property/default.asp> or call 410-767-1184.

Inheritance and Estate Taxes

Maryland collects an inheritance tax. Property passing to a spouse, child or other lineal descendant, spouse of a child or other lineal descendant, parent, grandparent or sibling, is exempt from taxation. Property passing to other individuals is subject to a 10% tax rate. Currently, a Maryland estate tax return must be filed if the decedent's federal gross estate, plus adjusted taxable gifts, is \$1,000,000 or greater, and the decedent was either a resident of Maryland at the time of death or a nonresident who owned real or tangible personal property in Maryland. The tax rate is limited to 16 percent of the amount that the estate value exceeds \$1,000,000. Law changes enacted in 2006 affected the estate tax calculation, filing requirements, extension requests and interest and penalties. The estate tax is limited to federal estate tax collection.

For more information on inheritance taxes click here <http://individuals.marylandtaxes.com/estatetax/inherit.asp> . .

For estate tax information refer to <http://individuals.marylandtaxes.com/estatetax/default.asp>.

For further information on Maryland taxes in general, visit the Maryland Comptroller of the Treasury site <http://www.comp.state.md.us/>. You can also call 410-260-7980. [Source: www.retirementliving.com Feb 2012 ++]

Veteran Legislation Status 27 FEB 2012: For a listing of Congressional bills of interest to the veteran community introduced in the 112th Congress refer to the Bulletin's "**House & Senate Veteran Legislation**" attachment. Support of these bills through cosponsorship by other legislators is critical if they are ever going to move through the legislative process for a floor vote to become law. A good indication on that likelihood is the number of cosponsors who have signed onto the bill. Any number of members may cosponsor a bill in the House or Senate. At <http://thomas.loc.gov> you can review a copy of each bill's content, determine its current status, the committee it has been assigned to, and if your legislator is a sponsor or cosponsor of it. To determine what bills, amendments your representative has sponsored, cosponsored, or dropped sponsorship on refer to <http://thomas.loc.gov/bss/d111/sponlst.html>.

Grassroots lobbying is perhaps the most effective way to let your Representative and Senators know your opinion. Whether you are calling into a local or Washington, D.C. office; sending a letter or e-mail; signing a petition; or making a personal visit, Members of Congress are the most receptive and open to suggestions from their constituents. The key to increasing cosponsorship on veteran related bills and subsequent passage into law is letting legislators know of veteran's feelings on issues. You can reach their Washington office via the Capital Operator direct at (866) 272-6622, (800) 828-0498, or (866) 340-9281 to express your views. Otherwise, you can locate on <http://thomas.loc.gov> your legislator's phone number, mailing address, or email/website to communicate with a message or letter of your own making. Refer to http://www.thecapitol.net/FAQ/cong_schedule.html for dates that you can access your legislators on their home turf.

Have You Heard? Questions

1. How Do You Catch a Unique Rabbit?
Unique Up On It.

2. How Do You Catch a Tame Rabbit?
Tame Way.

3. How Do Crazy People Go Through The Forest?
They Take The Psychopath

4. How Do You Get Holy Water?
You Boil The Hell Out Of It

5. What Do Fish Say When They Hit a Concrete Wall?
Dam!

6. What Do Eskimos Get From Sitting On The Ice too Long?
Polaroids

7. What Do You Call a Boomerang That Doesn't work?
A Stick

8. What Do You Call Cheese That Isn't Yours?
Nacho Cheese.

9. What Do You Call Santa's Helpers?
Subordinate Clauses.

10. What Do You Call Four Bullfighters In Quicksand?
Quatro Cinco.

11. What Do You Get From a Pampered Cow?
Spoiled Milk.

12. What Do You Get When You Cross a Snowman With a Vampire?
Frostbite.

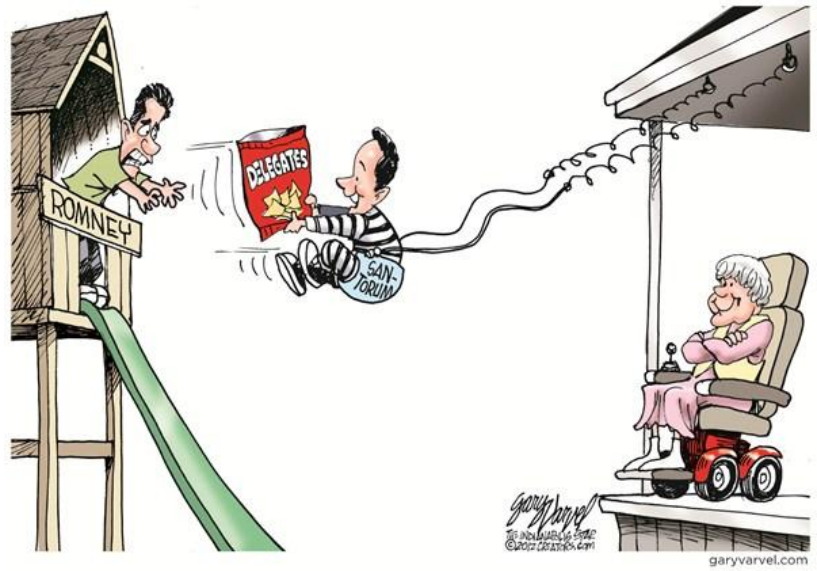
13. What Lies At The Bottom Of The Ocean And Twitches?
A Nervous Wreck.

14. What's The Difference Between Roast Beef And Pea Soup?
Anyone Can Roast Beef.

"We have women in the military, but they don't put us in the front lines. They don't know if we can fight, if we can kill. I think we can. All the general has to do is walk over to the women and say, 'You see the enemy over there? They say you look fat in those uniforms.'"

— **Elayne Boosler** (American comedian and advocate for animal rescue)





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Lt. James "EMO" Tichacek, USN (Ret)

Associate Director, Retiree Assistance Office, U.S. Embassy Warden & IRS VITA Baguio City RP
PSC 517 Box RCB, FPO AP 96517

Tel: (951) 238-1246 in U.S. or Cell: 0915-361-3503 in the Philippines.

Email: raoemo@sbcglobal.net Web: http://post_119_gulfport_ms.tripod.com/rao1.html

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