

RAO BULLETIN

1 October 2012

PDF Edition

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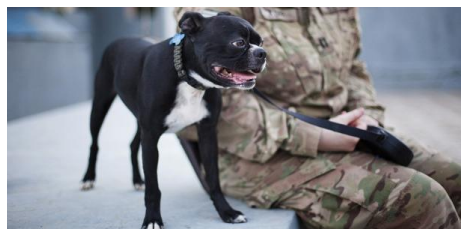
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VA Mental Health Care Update 17: The Department of Veterans Affairs has developed a new online Community Provider Toolkit available at <http://www.mentalhealth.va.gov/communityproviders> aimed at delivering support, therapeutic tools, and resources to community providers treating Veterans for mental health concerns. “Many Veterans seek mental health care at VA, yet many also choose to go to providers in their community,” said Secretary of Veterans Affairs Eric K. Shinseki. “VA is committed to helping Veterans wherever they may seek care. This toolkit will enable those community providers who treat Veterans to better understand the specific issues Veterans face and help them access VA resources.” The goal of the Community Provider Toolkit is to further enhance the delivery of mental health services to Veterans through increased communication and coordination of care between community providers and VA. It not only provides information about accessing, communicating with, and, if needed, making referrals to VA, but also provides effective tools to assist Veterans who are dealing with a variety of mental health challenges. The Community Provider Toolkit also includes sections intended to increase providers’ knowledge about military culture.

On 31 AUG, President Obama issued his historic Executive Order to improve mental health services for Veterans, Servicemembers and military families. As directed in the Executive Order, VA is hiring 1,600 new mental health professionals and 300 support staff. The Executive Order also directed a 50 percent increase in the staff of the Veterans Crisis line. Last year, VA provided quality, specialty mental health services to 1.3 million Veterans. Since 2009, VA has increased the mental health care budget by 39 percent. Since 2007, VA has seen a 35 percent increase in the number of Veterans receiving mental health services, and a 41 percent increase in mental health staff. VA provides a comprehensive continuum of effective treatments and conducts extensive research on the assessment and treatment of PTSD and other mental health problems. Those interested in further information can go to <http://www.mentalhealth.va.gov/> or <http://www.ptsd.va.gov> to find educational materials including courses for providers and best practices in mental health treatment. They can also learn more about the award-winning VA/DoD PTSD Coach Mobile App, which provides education, resources, and symptom monitoring and management strategies. [Source: VA News Release 27 Sep 2012 ++]

Vet Service Dogs Update 01: When it comes to treating veterans with post-traumatic stress disorder, no intervention regularly receives as glowing reviews as service dogs. The use of service dogs to treat PTSD is new, though, and many of the findings at this point are anecdotal. Many veterans had eagerly hoped a pioneering study conducted by the Department of Veterans Affairs would buttress their personal experiences with science that could support implementing widespread therapeutic use. By pairing veterans with a service dog and tracking their condition over three years, the study could demonstrate to service dog providers around the country how to effectively train for PTSD patients, and might provide convincing evidence for the VA system to create a benefit for the treatment. Last week, however, the agency confirmed that it had suspended the study at the James A. Haley Veterans' Hospital in Tampa, FL, for the second time this year after alleging that a vendor violated its contract and endangered the health of its dogs. The latest setback left about 100 veterans on the study's waiting list without any hope that they'd receive a dog in the near future. It also raised the thorny question of how to conduct research in a field that is new, but where the need is urgent.



Traditionally used for blind, deaf, or physically disabled patients, service dogs have only recently been trained to perform tasks that can improve PTSD symptoms, like wake a veteran from a nightmare or create a buffer in large crowds or public places. Patients often experience dramatic improvement, say service dog experts. They feel renewed confidence in social situations, decrease medication use, and are less likely to startle. Some veterans say it's the only treatment that ever worked so well. Congress, which required the study in 2009, permitted the VA to match as many as 200 veterans with service dogs. Mark Ballesteros, a spokesperson for the VA, said in a statement to The Atlantic that the study had so far paired 17 dogs with veterans and that the agency is "developing a new plan to carry out this important research." It also notified the Office of Inspector General about the contract violations for further investigation.

Carol Borden, executive director of the vendor under investigation -- Guardian Angels Medical Service Dogs, Inc., in Williston, FL, -- vehemently denied the VA's allegations. "We were doing this work before and we will continue to do this work because we love our veterans and are passionate about our success and what we are able to give people through our dogs," Borden told me. "We will continue to carry on with anyone who qualifies that wishes to continue with our program." In a document related to the investigation, officials said they expected the study to resume in 10 months after changes have been made to its design. In particular, the VA plans to conduct a nationwide search for the best dogs, expanding the number of providers and contracting instead with trainers to pair veterans with an animal. Doing so, the agency hopes, will eliminate a problematic conflict of interest wherein the service dog provider may perceive a financial incentive to pair dogs regardless of whether or not they have received necessary training or would perform well. Such are the hard lessons of designing a study that is the first of its kind for the VA. But the research has been troubled from the start. It began with three service dog providers, two of which stopped participating earlier this year; it was initially suspended from January to June after a dog bit a young girl. Guardian Angels had no reported incidents when the study resumed.

Brian Jones, a former sergeant major who performed special operations as an Army Ranger and Delta Force soldier, was on the waiting list and said both suspensions were disappointing. He was notified last week by email that VA had canceled its contract with Guardian Angels, advising him to seek the assistance of a mental health provider if the news was upsetting. The email recommended that he not use Guardian Angels, and said that if he received a service dog during the study's suspension, he would be withdrawn from the research. Jones, who has visited the Guardian Angels facility and said the conditions were pristine, plans to proceed with getting a service dog from Borden. He is scheduled to receive Sarge, a one-year-old German Shepherd, in December, and that thought gives him comfort. Jones, 56, served for two decades before retiring in 2006. He says he's struggled with PTSD symptoms for about 10 years and works hard to manage them. Jones hopes that Sarge will help alleviate his unease in crowds and difficulty sleeping. Jones is deeply worried about fellow veterans who have been counting on the VA study to pair them with a dog, fearful that some might feel hopeless. "I will move forward," Jones says. "I have a life to live. If I wait on the VA, I will be waiting forever."

The fact that research in this area is limited primarily to the VA is troubling to both veterans and experts who feel that one government agency cannot be expected to provide all of the answers. The need, however, is seen as pressing: As many as 520,000 service members who were deployed to Iraq or Afghanistan since 2001 have or may develop PTSD. Dr. Elspeth Cameron Ritchie, a psychiatrist and former colonel in the Office of the U.S. Army Surgeon General, told me that more money, research and academic/non-profit partnerships are needed to provide scientific evidence for the anecdotes, and a framework for training and pairing. As an example, Ritchie points to National Education for Assistance Dog Services (NEADS), a Massachusetts-based provider that has quietly researched treating post-traumatic stress. (Ritchie serves on NEADS' advisory council.) The organization spent two years -- and more than \$500,000 -- on a pilot program that matched 16 veterans with trained dogs. Dr. Cynthia Crosson, a psychiatric consultant who led the effort, said the study was designed as exploratory and qualitative

instead of quantitative. She looked at measures of improving wellness, but said those were initially difficult to identify in the context of receiving a service dog as treatment.

Crosson, who has specialized in studying child abuse, said she confronted a similar challenge in studying post-traumatic stress recovery: "Initially, it was how do you quantify people's healing?" Through the pilot, NEADS has developed techniques for training and measuring improvement that Crosson was hesitant to describe before publishing the results in a journal. NEADS has since made the pilot a part of its regular programs. That's one more provider that has done thorough research on PTSD service dogs, but it will take several similar efforts and millions in funding over the next few years before evidence-based best practices can be handed down to every service dog organization that wants to train for PTSD treatment. In the meantime, the VA study remains stalled, and the agency recently ruled that it would not provide service dog benefits to treat mental health issues. For Brian Jones, what matters is getting a highly-trained dog that will likely give him relief after years of searching. Though that day is still a few months away, the idea brightens his outlook: "Tomorrow is going to be better because I'm going to have this dog." [Source: TheAtlantic.com | Rebecca Ruiz | 26 Sep 2012 ++]

Military Deserters: Kimberly Rivera, who lived in Canada for five years with her husband and four children, was issued a deportation order last month and given until 20 SEP to leave the country. The War Resisters Support Campaign said in a statement that Rivera presented herself at the U.S. border on that date and was arrested and transferred to military custody. They said her family crossed separately so her kids wouldn't see her arrested. Rivera, a 30-year-old Army private, served in Iraq in 2006. She said she became disillusioned with the mission. She crossed the border into Canada while on leave in February 2007, after she was ordered to serve another tour there. After arriving in Canada on leave, she applied for refugee status. Canadian Immigration Minister Jason Kenney's spokeswoman, Alexis Pavlich, said they don't believe that President Obama's administration will subject American Military deserters from the United States are not genuine refugees under the internationally accepted meaning of the term. These unfounded claims clog up our system for genuine refugees who are actually fleeing persecution," Pavlich said.



Kimberly Rivera at Toronto news conference.

Alyssa Manning, Rivera's lawyer, has said Rivera could face a jail sentence of between two to five years. Ken Marciniac, a spokesman for the War Resisters Support Campaign, said Canadians were told by Kenney's representatives in court that she wouldn't be arrested at the border. "It doesn't get any clearer than this. The risk that we've pointed out, of Iraq War resisters being punished as prisoners of conscience isn't just risk, it's fact," Marciniac said. Rivera had applied for permanent residency in Canada based on humanitarian and compassionate grounds, which she hoped would take into account the fact that she has four children, ages 10, 8, 3, and 18 months, the youngest of which were born in Canada. She did not receive a decision on that application, which was submitted three years ago. In January of 2009, Canada's Immigration and Refugee Board ordered her and her family to leave the country or face deportation. Rivera appealed that decision and lost. Rivera told reporters last month that her

biggest fear about being deported was being separated from her young children and having to sit in a prison for politically being against the Iraqi conflict.

Roughly 19,000 people signed an online petition protesting her deportation order and rallies were held in a number of Canadian 19 SEP calling on the government to let Rivera stay in the country. Nobel Peace Prize winner Archbishop Desmond Tutu and the American veterans organization Veterans for Peace have also spoken out against the deportation. The War Resisters Support Campaign, which notes that there are approximately 200 Iraq war resisters in Canada, said two other Iraq war resisters who were deported, Robin Long and Clifford Cornell, faced year-long jail sentences upon their return. Long was given a dishonorable discharge in 2008 and sentenced to 15 months in a military prison after pleading guilty to charges of desertion. The lower house of Canada's Parliament passed a nonbinding motion in 2009 urging that U.S. military deserters be allowed to stay in Canada, but the Conservative government ignored the vote. During the Vietnam War, up to 90,000 Americans won refuge in Canada, most of them to avoid the military draft. Many were given permanent residence status that led to Canadian citizenship, but the majority went home after President Jimmy Carter granted amnesty in the late 1970s. [Source: Associated Press | Rob Gillies | 20 Sep 2012 ++]

WWI Memorial Peace Cross: The forty-foot-tall Memorial Peace Cross, which well-known landmark that has served as a gateway to Bladensburg and Hyattsville, Maryland for over 85 years, is in jeopardy. The monument, which sits on state property, honors 49 men from Prince George's County, Maryland who lost their lives during World War I. The cross was dedicated on July 13, 1925, by the American Legion. A bronze tablet at the base of the monument contains the unforgettable words of Woodrow Wilson: The right is more precious than the peace; we shall fight for the things we have always carried nearest our hearts; to such a task we dedicate ourselves. At the base of the monument are the words, Valor, Endurance, Courage, Devotion. At its heart, the cross bears a great gold star. The American Humanist Association, a Washington-based group, is calling for the cross's removal, arguing that a religious image on public land violates the constitutional principle of the separation of church and state. Veterans organizations and some community groups have vowed to fight to keep standing. Meanwhile, the local park and planning commission is researching the legal issues. For more information on the Memorial Peace Cross, visit the Change.org website <http://www.change.org/petitions/maryland-national-capital-park-and-planning-commission-save-the-historical-bladensburg-peace-cross-war-memorial>, the Waymaking.com website <http://www.waymaking.com/waymarks/WMK1G>, and the Historical Marker Database <http://www.hmdb.org/Marker.asp?Marker=5187>. [Source: Military.com article 24 Sep 2012 ++]



"Memorial Peace Cross, Bladensburg, Maryland"

USS North Carolina (BB-55): The Battleship North Carolina in Wilmington, North Carolina flies the national ensign daily and is pleased to fly one for you from the ship's foremast on your special occasion or in memory or honor of your loved one. Flags are flown at no charge except to cover shipping fees, if needed. Flown on the specific date of your preference, the flag, provided by you or purchased through the Ship's Store, will fly high above the North Carolina and then be returned to you with a personalized signed certificate from the Executive or Assistant Director. The North Carolina also offers its facilities as a gratis site for traditional military ceremonies such as re-enlistments, retirements, promotions and memorial celebrations. Usually held on the Fantail of the Ship, inside spaces are available for inclement weather days. Included at no extra cost are chairs, table and podium/sound system. Call the ship to fly a flag for a loved one or for ceremonial reservations at (910) 251-5797. For more information, visit the Battleship North Carolina website at <http://www.battleshipnc.com> or Facebook site <http://www.facebook.com/NCBB55> or Twitter.com/battleshipnc. [Source: Military.com 24 Sep 2012 ++]



BB-55 Fantail

VA Fee-Basis Care Update 01: Fee-basis care may be authorized to treat service-connected disabilities when VA has determined that available VA facilities do not have the necessary services required for treatment; the veteran is not able to access VA health care facilities based on geographic constraints or due to medical emergencies; or when it is economically advantageous to provide treatment using fee basis. These determinations are left to local management because they are in the position to best apply these considerations. All fee requests are reviewed individually to determine the entitlement of veterans in accordance with established Veterans Health Administration guidelines and to determine clinical urgency. You may be eligible for a fee basis ID card if:

- You have a service connected disability;
- You will need medical services for an extended period of time; or
- There are no VA health care facilities in your area.

On 14 SEP the House Committee on Veterans' Affairs, Subcommittee on Health held a hearing titled, "VA Fee Basis Care: Examining Solutions to a Flawed System". The meeting opened with the Honorable Ann Marie Buerkle, Chairwomen's following comments:

“Recent years have seen tremendous growth in VA’s Fee Care program, with independent assessments estimating growth of close to 300 percent from fiscal year 2005 to today. Unfortunately, however, as the program has continued to grow, so have the management and oversight problems that have plagued the system through which the Department of Veterans Affairs (VA) provides care to veterans outside the walls of a VA facility. It is seriously flawed, if not altogether broken. In the last three years alone, the VA Inspector General has issued no less than seven separate reports detailing in-depth the serious deficiencies and challenges the Fee Care Program faces, including inadequate fiscal controls that have resulted in hundreds of millions of dollars in improper payments. Further, last September, the National Academy of Public Administration (NAPA) issued a white paper on VA’s Fee Care Program that drew alarming conclusions about VA’s ability to effectively manage and oversee care and services under the program.

According to NAPA: VA’s Chief Business Office has exercised limited and ineffective oversight of the Fee Care Program; the Program itself lacks operational objectives, performance goals, or, a clearly defined strategy for managing expenditures; and, VA doesn’t understand what services are being procured through the Fee Program and at what cost. There have been some bright spots. Congressionally-mandated pilot programs – Project HERO and Project ARCH – have shown promising results in achieving a more patient centered, coordinated, and cost-effective delivery model for fee care. Small pockets of success - despite VA’s reluctance to implement and utilize these programs to the fullest intent of Congress. Recognizing the substantial deficiencies with the Fee Program, VA has begun implementing two new initiatives – the Patient-Centered Community Care (PCCC) Program and the Non-VA Care Coordination (NVCC) Program. The Department is going to testify today that these two initiatives will address all of the challenges the Fee Program faces and, “...ensure veterans receive effective and efficient non-VA care seamlessly.”

I wish that I could believe that was true. However, given the history of failure we’ve seen already, I have serious reservations that the actions VA is taking will address the core challenges VA faces and not simply lead to further fragmented care and an inability to deliver quality care in rural communities. Most notably, VA lacks the information technology (IT) and administrative services solutions essential to establish in-house the clinical information sharing and electronic claims processing vital to a successful care-coordinated and veteran-centric program. VA spent approximately \$4.6 billion dollars to purchase care in the community for veteran patients last fiscal year. That is billion, with a “b.” We cannot afford to allow VA to continue to flail and struggle to test new programs in an inherently flawed system. We cannot rely on promises from VA that they can finally get it right. Our veterans are everywhere; VA can’t be. And, at the end of the day, what fee care is about is the effective and efficient delivery of care to veterans where they need it, when they need it.

Getting it right is about honoring their preferences, choices, and daily lives as well as their service to our country. Getting it right is about telling a Vietnam or Korean-era veteran that he doesn’t have to travel 4 hours to the nearest VA medical center for his cancer treatments. He can go to a hospital closer to his home and spend the time he would have spent on the road getting better. Getting it right is about telling a Gulf War veteran that she doesn’t have to take a day off of work to drive to the VA clinic two towns over for a physical. She can go to the doctor down the street if she would prefer and get to work on time. Getting it right is about telling a young veteran, recently home from Iraq or Afghanistan, that he doesn’t have to wait all day in a VA waiting room to see his doctor. He can choose another provider who can see him now and spend the afternoon with the people he missed while he was overseas. That is what we are talking about today. And those stories – stories that my colleagues and I hear every day from veterans in our communities who are fed up – are what I want all of us to keep foremost in our minds this morning as we talk about how to make this program better and get it right.”

The hearing heard testimony from a three member panel of DAV, VFW, and American Legion spokesman who basically concurred with the Chairwoman’s comments and two other panels made up of various DVA representatives who basically defended VA’s efforts in this area. The problem was thoroughly aired and it is now up

to congress through legislation and/or VA through policy reforms to take corrective action. [Source: <http://veterans.house.gov/printed-hearings> 24 Sep 2012 ++]

VA Compensation & Pensions Update 07: In July 2010, a Department of Veterans Affairs employee named Kristen Ruell was updating a benefit claim when she noticed something odd. What should have been an increase of about \$2,000 in a monthly payment to the widow of a veteran showed up on her computer screen as \$21,000. Puzzled, she set the claim aside and began digging into computer files for an answer. What she found surprised and worried her: the department's database contained duplicate records for the widow, and the system was trying to pay her twice. It was also recommending a retroactive payment dating back months — though the widow had already been paid for that period. After seeing the same problem in other claims, Ms. Ruell, who works on a quality review team at a veterans pension management center in Philadelphia, says she raised red flags with her bosses. If she, one of scores of payment authorizers nationwide, was just noticing the duplicate payments, was it not likely that the department had inadvertently overpaid many other people for years? Two years later, that concern has not been resolved, Ms. Ruell and several other pension management workers say.

The department says duplicate payments are rare — perhaps fewer than 100 a year. A robust system of checks and balances, human and digital, routinely prevents a vast majority of such payments, said David R. McLenachen, the director of the department's pensions and fiduciary service. But Ms. Ruell and several of her colleagues, who described the problem for a reporter because they felt the department was not addressing it, believe that the duplicate payments are far more common, and costly, than their leadership acknowledges. They say that they see new cases weekly and that the problem also occurs at the department's other pension centers in Milwaukee and St. Paul. They express frustration that the department seems unable to prevent the creation of new duplicate records that can lead to duplicate payments. And they say their superiors do not consistently try to recoup overpayments — though the department denies that assertion. "I'm just bothered the way money is wasted and no one cares," said Ms. Ruell, 37, a lawyer who has worked at the pension center for five years.

The issue is starting to get attention in Washington. The department's Office of Inspector General has begun looking into it, a spokeswoman said, and a congressman from the Philadelphia area says he will ask that the department provide an accounting of duplicate payments by 31 OCT. "No one has a real handle on this," Representative Michael G. Fitzpatrick, a Republican from Bucks County, said in an interview. "The V.A. management appears to believe it is not their responsibility to get our tax dollars back from people who should not have received the money in the first place." The department did not allow Ms. Ruell's supervisors to talk about the duplicate payments. But Mr. McLenachen disputed her assertions, saying he was confident that managers were trying to collect overpayments. "Our field employees are required to follow procedures," he said. Mr. McLenachen, however, acknowledged that it would be hard to determine the precise number of duplicate payments without beneficiaries coming forward voluntarily. Ms. Ruell says people have returned duplicate checks on their own, but only occasionally.

The duplicate payments are the flip side of the attempt to speedily eliminate a backlog in the processing of claims. While the backlog is widely blamed for delays in compensation to veterans, overpayments are unlikely to draw much criticism from veterans advocates. Workers say that both delayed payment and overpayment stem from the same circumstances: too few workers trying to process too many claims in too little time. The pressure to work swiftly despite a complex system of benefits and rules, along with outdated or trouble-prone technology, has made human and computer errors all too common, the workers say. One Philadelphia employee, Ryan Cease, whose job for a time included correcting duplicate records, said it could take hours to fix one. Mr. Cease, who says he has

found evidence of more than 1,200 duplicate pension records, proposed creating a team to tackle the problem. But supervisors have not responded, he said.

The veterans pension system, part of the sprawling Veterans Benefits Administration, pays more than \$4 billion a year in benefits, mainly to low-income veterans. It also provides benefits to the survivors of veterans, who can receive monthly compensation even after a veteran dies. Pension center workers say duplicate payments mainly seem to involve survivors for a variety of reasons. Both management and workers agree that the duplicate payments began about three years ago when the department started shifting from an older computer system to new technology known as the Veterans Service Network, or Vetsnet. Under the old system, workers say, it was impossible to have more than one record for a veteran or relatives of a veteran. But with Vetsnet, workers say, the technology has allowed duplicate records. The problem begins when there is a discrepancy in the identifying information. For instance, if a person is listed in the database without a Social Security number, new claims for that person using his or her Social Security number can lead to the creation of a duplicate record in Vetsnet, the workers say. It was not unusual under the old system that the Social Security numbers of veterans' spouses would not be on file; the veteran's number was more important, workers said. But after a veteran died, a spouse's Social Security number would be used in filing subsequent claims. And that could lead to a duplicate record.

Duplicate records do not always cause extra payments, the workers noted. But if an unsuspecting claims processor updates a duplicate record — perhaps because the survivor is seeking new or additional benefits — the computer may calculate benefits as if the person had filed a new claim. And that could lead to a second monthly check and a large retroactive payment. A human being must sign off on the computer's calculations. But if the person authorizing payments does not notice an excessive award — something Ms. Ruell says might happen when authorizers are inexperienced or rushed — duplicate payments can be approved. Mr. McLenachen said that not only did authorizers usually catch duplicate payments, but that the system also had a fail-proof check: the Treasury Department will not issue payments without Social Security numbers. That ensures, he said, that it catches duplicate records when one has a number and one does not. But Ms. Ruell says she has discovered cases where the Treasury Department system attached incorrect Social Security numbers to a survivor's claim. The result, she said, was a duplicate payment. A few days ago, a fellow employee brought her a case in which the computer calculated that a widow was owed \$28,000. It was a duplicate payment, and Ms. Ruell corrected it. The system had worked. But it does not always, she insists. "We're not catching it," she said. [Source: New York Times | Jessica Kourkounis | 22 Sep 2012 ++]

Coin Trivia: The most valuable penny is a 1943 copper-alloy penny, of which only forty are known to exist. During rationing in World War 2, pennies were made of steel because they needed copper for everything else (wiring, munitions, etc.). Pennies from that time period were made of steel and coated in zinc to prevent rusting. According to the Mint, a 1943 copper penny was sold in 1958 for \$40,000 and the prize would increase to \$82,500 in 1996. (someone got a great deal in 1981 when they paid only \$10,000!) If you thought that was bananas, in late 2010, a bronze 1943 penny was sold for \$1.7 million. The owner worked at the Mint and it's apparently one of a kind as it was mistakenly cast in bronze.

Think back to two years ago and you might remember a nickel fetching \$3,737,500. That was the 1913 Liberty Head V nickel, one of five known to exist (of which two are in museums), designed by Chief Engraver Charles Barber. Made of 75% copper and 25% nickel, the 1913 coin was never authorized. In 1911, the Mint redesigned the nickel and was planning to start minting Buffalo nickels starting February 1913. The five that exist were never officially struck. What's fun about this particular nickel, named the Olsen-Hawn piece (when there are only five,

sometimes they start naming them!), is that it's been in a 1973 episode of Hawaii Five-O and been owned by King Farouk of Egypt and Lakers owner Jerry Buss (who bought it for \$200,000 in 1978!).

How much would you pay for a coin if only nine or ten are known to exist? (only six for certain). What if only twenty four were ever minted? If you said \$1,552,500 then you'd right. That's how much someone paid for an 1894-S Barber dime in an auction in October of 2007. One fetched \$1.9 million in the summer of 2005, right after it had been won at auction for \$1,322,500 that March. As I wrote in the beginning, the coin didn't lose value, the later coin was in lesser condition. The one sold for \$1.3 million (and then \$1.9 million) was PCGS certified Proof-66 while the \$1.5 million dime was a Proof-64.

The most expensive quarter ever auctioned was a superb condition (MS86) 1901-S Barber quarter for \$327,750 in March 2010. It's the third one designed by Chief Engraver Charles E. Barber, which is why they're called Barber dimes or barber quarters. The coins are valuable in part because of the popularity of the Barber Liberty Head design, used from 1892 to 1916.

[Source: Bargaineering | Jim Wang | 24 Sep 2012 ++]

U.S. Submarine Veterans of WWII: The submarine veterans of World War II have seen this coming for a long time. At their national convention this month, 62 veterans attended where thousands used to go. The U.S. Submarine Veterans of World War II disbanded at the end of its convention 7 SEP in Norfolk, Va. Local chapters now must decide whether to continue operating under another name or to dissolve as well. This month in Groton, J. "Deen" Brown, state commander for [Connecticut](#) of the Submarine Veterans of [World War II](#), announced to his fellow WWII submarine veterans that the Thames River Chapter has a new name. "Eastern USA Chapter U.S. Submarine Veterans of WWII," he told members before their monthly luncheon at the U.S. Submarine Veterans clubhouse. "We simply have to face the fact that we're all getting older and, as we do so, eventually we simply cannot remain a viable national organization," said Brown, 90, of Oakdale. Walter "Gus" Kraus, the last national president, said the veterans who wanted to keep the national group going "until the last man is gone" prevailed in a vote three years ago. Two years ago, the vote was split. By this year's convention, some of the stalwarts had died, or their friends had. Of the 1,100 members, the youngest is 86. The oldest is 102.



Dean Brown tells members of the **Thames River Chapter** at the **Subvets clubhouse in Groton, Conn.**, that the **national organization of the USSVWWII** recently voted to disband.

It was difficult for the national organization to find members able to serve as officers and to complete all of the administrative tasks. In their last roster, published 10 years ago, the pages listing the deceased members

outnumbered those listing active members. "The guys said, 'I was all for staying. My shipmate came to the convention with me. He's gone now and I don't feel like coming,'" said Kraus, 91, of Crescent Springs, Ky. The national organization was established in 1955 to honor submarine veterans who served in World War II. Submarines were just 2 percent of the Navy's fleet then, but subs sank more than 30 percent of the Japanese navy and nearly 5 million tons of shipping. About 16,000 men served on submarine war patrols. The submarine force lost 52 boats and more than 3,500 men. After the sixth annual reunion of the national submarine veterans group, the membership grew rapidly. Memorials were erected. "There are memorials all over this country they've created," said retired Vice Adm. Al Konetzni, who has long been close with the World War II veterans even though he is not of that era. "These guys started in 1955 doing this for their buddies, so they would not be forgotten. It's a wonderful story of self-image. They said, 'Hey, we're going to do it, and we will do it.'"

Kraus said the sub veterans considered themselves a unique group and that uniqueness forged a strong bond. The end of the organization, he said, also represents the "end of an era where we were able to get together and blow our own horn, remembering the circumstances under which we fought." Konetzni, who gave the keynote speech at the closing ceremony, said in an interview that the World War II veterans "lived the horror" and "lived the glory," but they do not need the administrative burdens of a federally chartered organization to preserve their memories. "They will never be forgotten, ever, ever, ever," said Konetzni, a former deputy commander of U.S. Fleet Forces Command and the U.S. Atlantic Fleet. "They gave us our traditions and our spirit. They were our leaders." Brown, who was state commander in the national organization, said the veterans who live locally enjoy getting together and want to continue as a group. The new name is intentionally broad, Brown said, because they expect veterans to join from other states when chapters disband. About 120 World War II submariners live in Connecticut. After Brown announced the national organization's decision and the name change at the luncheon, Warren Wildes said, "It was time."

Wildes, 86, of Groton was eating with LeRoy Webb, 88, of Mystic. "I hate to see them do it but the day had to come sooner or later," Webb said. He told Wildes he had just read in "Polaris," the official magazine of the organization, that a chief on the USS Moray, one of the submarines he had served on during the war, had died. "I used to take his girlfriend's picture and put it under my pillow," he said with a laugh at the prank he used to pull to irritate the chief. Webb said he served on 15 submarines in his career and was away so much that when his wife was asked how long she had been married, she cut the time in half. Both Webb and Wildes said they thought it was great that the local group would continue to meet. "We look forward to seeing our buddies every month and swapping lies," Wildes said. "Sometimes you hear the same stories over and over again," Webb said. "But they're still interesting."

Many of the World War II submariners are also members of the U.S. Submarine Veterans Inc., which is open to all U.S. Navy submariners. The younger ones in that group began maintaining the memorials and conducting ceremonies when the World War II veterans could no longer do it. The local World War II veterans turned over the upkeep of the U.S. Submarine Veterans WWII National Submarine Memorial East to the Subvets Groton base and the city of Groton in 2005, said John Carcioppolo, base commander. Subvets willingly took on the responsibility. "The World War II guys are part of our heritage," Carcioppolo said. "And it's up to us to preserve that heritage." George Jones, 92, another World War II submariner who attended the luncheon, said it's important to him that the memorial is well taken care of because his friends' names are on its Wall of Honor. "I lost a lot of friends during the war and I came close myself," Jones, of Waterford, said. "I hope we will continue to be remembered for many, many years to come." [Source: Associated Press article 23 Sept 2012 ++]

VAMC West Los Angeles Update 04: When is the Veterans Affairs Department going to meet its responsibility to house chronically homeless veterans in Los Angeles on the large tract of government-owned land that should have been put to this use long ago? Maybe sometime in 2014, according to the department's estimates. The sprawling 400-acre property in Los Angeles was deeded to the federal government in 1888 expressly for use as a home for disabled soldiers and sailors. But the Veterans Affairs Department long ago strayed from that mission. No long-term housing exists there anymore, though a large VA hospital with short-term treatment beds occupies part of that land. Over the years, the property has been turned over to uses completely unrelated to the department's mission, like athletic fields, a nine-hole public golf course, theater stages, hotel laundries, rental-car and bus storage, even oil wells and a dog park. Yet it's unclear how much rent the department has collected from various businesses like Marriott Hotels or where that money has gone.

A class-action lawsuit by the American Civil Liberties Union of Southern California was filed last year on behalf of disabled homeless veterans, charging that the veterans are entitled by law to effective mental health care but cannot possibly get it if they have no place to live. The Veterans Affairs Department would not comment, given the lawsuit. But a reporter for National Public Radio, using Freedom of Information requests, estimated that in the last 12 years, rental agreements have earned the department at least \$28 million and maybe more than \$40 million. The property has been studied, scrutinized and fought over for more than 20 years. It has been misused for a long time, and now it's the responsibility of Veterans Affairs Secretary Eric Shinseki and the current administration in Washington, including Representative Henry Waxman (D-CA-30), in which the tract is located, to get to the bottom of this debacle. Mr. Waxman's office said he had pressed Mr. Shinseki into finding the \$20 million in July 2010 to renovate one building for long-term supportive housing. But nothing else has happened yet, and the July 2014 completion estimate is evidence of a department that is slow and unresponsive to its mission. [Source: New York Times | Andrew Rosenthal Editorial | 20 Sep 2012 ++]

CA Vet Legislation Update 07: Veterans and those in the military will get more state benefits, including help with education, finances and, in the case of wounded soldiers, their fishing licenses, under 18 bills signed into law 20 SEP by Gov. Jerry Brown. Brown noted that the bills he signed were sponsored and supported by members of both major political parties, and he used the occasion to take a jab at Congress. "Yesterday, a [federal] bill to invest in job training for veterans was blocked because of Washington political infighting," Brown said. "Here in California, Republicans and Democrats joined together to support our veterans. These bills respect the honor and dignity of those who serve." The actions include an extension from four to 15 in the number of years after leaving active duty that a veteran is eligible for priority registration at state colleges and universities. Assemblyman Robert Blumenfield (D-Van Nuys) wrote AB 2133 to reflect the length of time that veterans can get financial assistance through the Post 9/11 GI Bill.

The governor also signed a bill requiring the state Department of Consumer Affairs to expedite the issuing of vocational licenses to military spouses. The agency issues dozens of licenses for vocations including construction contracting, barbering and court reporting. AB 1904 was authored by Assemblyman Marty Block (D-San Diego), who cited a study by the RAND National Defense Research Institute that found the majority of military spouses are less likely to be employed, more likely to be seeking work, and earn less than comparable civilian spouses. Other bills signed by the governor will:

- Reinstate state-offered veterans benefits that were denied by the federal government solely on the basis of sexual orientation when the federal government reinstates those benefits.
- Increase the fees for new and renewed personalized veterans' license plates to provide more money to the County Veterans Service Officer Fund, which assists veterans and their families in obtaining benefits and services.

- Allow licensed drivers of military commercial vehicles to qualify for a California commercial driver's license without undergoing an additional driving test.
- Give the Adjutant General of the National Guard more power to establish support programs and solicit donations for the benefit of military personnel and their families.
- Provide reduced fees for sports fishing and hunting licenses to active military personnel who are recovering from injuries or illnesses.

[Source: LA Times | PolitiCal | 20 Sep 2012 ++].

Tricare Overseas Program Update 14: All military retirees living overseas must now provide proof of payment for any healthcare costs before Tricare will reimburse them. The policy has been in effect for veterans in the Philippines and Panama since 2009 following a Defense Department Inspector General's report that found widespread corruption in those countries. It was expanded by the military healthcare agency to other countries this month. The 2009 action by the U.S. taxpayer-funded system did away with what had been an honor system of sorts. In addition to the crackdown in the Philippines and Panama, it began requiring all retirees — in the U.S. and abroad — to show proof of payment for out-patient treatments over \$5,000 and hospitalizations over \$10,000. It wasn't enough, said Kathy Larkin, chief of Tricare's Health Plan Policy division. "They keep looking at us," Larkin said. "The IG suggested we implement" the new policy requiring proof of payment for **all** overseas claims.

The aim is to not only stop fraud but also to improve claims payment accuracy and provide additional controls to safeguard government funds, Larkin said. Tricare spends about \$366 million annually in overseas healthcare costs outside military hospitals, where retirees are not eligible for care unless they are U.S. government civilian employees. The top three places where military veterans retire outside the 50 U.S. states are Germany, South Korea and Puerto Rico, according to Tricare. For healthcare and pharmacy claims under \$1,000, Tricare beneficiaries need only provide an invoice or bill from the provider or pharmacy as long as it identifies the amount paid. Claims over \$1,000 also require a copy of a receipt from a check, credit card, electronic fund transfer or cash withdrawal for each service provided. Tricare spokesman Chris Hober said bundled claims must include proof of payment for each transaction.

While it may seem like an extra burden, some of those already affected by the new rules say they have adjusted. "I don't really have a problem with it," said Albert Shelton, a retired Navy master chief who has lived in the Philippines since 2007. For his wife's dialysis treatment, Shelton gets to skip the proof-of-payment process because the facility agreed to bill Tricare directly — a service that healthcare providers and hospitals outside the U.S. are not always willing to provide. The Philippines is the only place where Tricare requires all doctors to be certified through an on-site visit and anti-fraud background check before paying out claims, according to the agency. "Back in the day in the Philippines, they found some beneficiaries were in collusion with providers," said Hober, the Tricare spokesman. "They want to keep that from happening." The country is a top focus of Tricare's fraud department, which saw billings balloon from \$15 million in 1999 to \$59 million in 2009, even as the number of beneficiaries remained the same. In 2008, a Philippine hospital was shut down after cashing in more than \$100 million in fake Tricare claims.

"Proof of payment is a smart move on their part. The Philippines has had their problems with corruption, and there's been some really bad Tricare scams," Shelton said. "Proof of payment is not hard." Getting an itemized bill for a hospital stay that distinguishes between administrative charges, provider fees and medication costs can sometimes be "tricky," Shelton said. "But all you have to do is ask, no matter what country you're in." Fraud is not limited to outside of the United States. TriWest Healthcare Alliance — a former Tricare contractor — was ordered to pay a \$10 million fine after a court found it "systematically defrauded" Tricare in various ways, USA Today

reported earlier this year. Tricare awarded an estimated \$20 billion contract to UnitedHealth Military & Veterans to replace TriWest in March, according to the newspaper. [Source: Stars and Stripes | Charlie Reed | 21 Sep 2012 ++]

DFAS Review Issues: Are You Ready? The year is now officially more than halfway over, which means that everyone's favorite season is on its way. That's right, tax season! As you begin planning for this hectic time, DFAS would like to help you start getting ready as well. Following are issues to review to see if action is required on your part. If so, click on the website provided for instructions on how to proceed:

- **Paper Checks to End.** The Department of the Treasury has announced that all payments from the federal government must be made electronically and not by paper check beginning March 1, 2013. If you're still getting a paper check, sign up for direct deposit today. Refer to <http://www.dfas.mil/retiredmilitary/newsevents/newsletter/treasurymandateeft.html>.
- **Getting Your 1099R by Snail Mail?** If you choose to receive your 1099R from DFAS in the mail, it's important to make sure the mailing address you have on file with us is current. Refer to <http://www.dfas.mil/retiredmilitary/newsevents/newsletter/snailmail1099.html>.
- **Want to Convert to Electronic 1099R?** You can have your tax statement weeks earlier on myPay than it takes to arrive in the mail. Find out how to switch to electronic 1099R. Refer to <http://www.dfas.mil/retiredmilitary/newsevents/newsletter/wanttoconvert.html>.
- **Getting Your 1099R by Email?** If you get your 1099R electronically, and your email address has changed, you need to update it in myPay. Refer to <http://www.dfas.mil/retiredmilitary/newsevents/newsletter/email1099.html>.
- **Delta Dental Premium Change.** If you've enrolled in the TRICARE Retiree Dental Program, you may notice a change in your Oct. 1 payment. This change is due to the regularly scheduled annual adjustment in your monthly premiums. Refer to <http://www.dfas.mil/retiredmilitary/newsevents/news/deltadentalchange.html>.
- **New Fast Forms Have Arrived.** Automated versions of the DFAS 2558 Authorization to Start or Stop an Allotment and the DFAS 2866 Retiree Change of Address/State Tax Withholding Request are now available. Refer to <http://www.dfas.mil/retiredmilitary/newsevents/newsletter/newfastforms.html>.

[Source: DFAS Newsletter 17 Sep 2012 ++]

TFL Trust Fund: When Congress approved TRICARE For Life (TFL) and the TRICARE Senior Pharmacy program in 2000 (for implementation in 2001), the new law set up a trust fund mechanism to cover these new benefits for Medicare-eligible military beneficiaries. At the time, legislators supporting the trust fund said it would ensure the new benefits always would be funded and wouldn't be subject to the whims of the annual appropriations process. After a decade of experience with it, we've learned the TFL trust fund is a two-edged sword. First, we've learned it offers no guarantee the TFL benefit won't be changed. Trust fund or not, the government still has to pay for it. And when government leaders think the cost is getting too high, they will propose changing it — as the administration did in its FY 2013 budget submission. Second, we've learned the trust fund makes it much harder to win any needed benefit improvements. That's because any benefit delivered through a trust fund falls under what Congress calls "mandatory spending" (that is, not subject to annual appropriations).

Under Congress' rules, if the Armed Services Committee wants to improve a TFL benefit, it has to pay for that by cutting an equal amount from other mandatory spending within its purview. And that means cutting retired pay, Survivor Benefit Plan payments, or some other TFL benefit. Robbing Peter's benefits to improve Paul's is a no-win

situation, so it usually won't happen. The result? When Congress adopted new TRICARE preventive care programs (e.g., paying for smoking cessation efforts), TFL beneficiaries age 65 and older had to be excluded. And when the administration proposed higher pharmacy copayments, the big stumbling block in rejecting the hikes is they apply to people over age 65 as well as under 65. If the revenue from charging Medicare-eligibles higher fees is to be rejected by keeping copayments down, the lost revenue must be made up in another mandatory spending program. That's why the House-passed alternative pharmacy plan (which keeps pharmacy copayments significantly lower for both over- and under-65s) had to require Medicare-eligibles to participate in a one-year test of mail-order refills for maintenance medications. The lower cost of mail-order delivery offset the lost revenue from over-65s' copayments.

The Military Officers Association of America (MOAA) has become more than a little jaundiced about setting up any future trust funds. Our experience has been they have more downsides than upsides. But now we come to the latest big budget challenge — the sequestration law that will cut another \$54 billion from the FY 2013 defense budget unless Congress approves alternative savings before the end of the year. As pointed out before, the law exempts VA health care funding from sequestration cuts but not military health care funding. However, the administration's new report on sequestration effects finally demonstrated one positive effect of the TFL trust fund. Because TFL and Medicare-eligibles' pharmacy benefits aren't subject to the appropriations process, Medicare-eligibles' TRICARE benefits won't be subject to sequestration cuts. Only the under-65 beneficiaries' health care funding remains at risk. So whether you're under age 65 or over, the military health care funding system will help you in some ways and hurt you in others. On any given change proposal, it's tough to trust. [Source: MOAA Leg Up Col. Steve Strobridge, USAF-Ret. Editorial 17 Sep 2012 ++]

Covert Camera Use Policy

VAMC Tampa Update 01: The deputy director of the Department of Veterans Affairs on 20 SEP defended the use of a camera disguised as a smoke detector in a veteran's room at the James A. Haley VA Medical Center in Tampa. W. Scott Gould, who is the agency's No. 2 behind VA Secretary Eric Shinseki, testified at a hearing of the U.S. House Veterans Affairs Committee in Washington, D.C., that the camera was the best way to closely monitor the health of a comatose patient, veteran Joseph Carnegie. "We do not believe the camera was hidden," Gould told the committee after its chairman, Rep. Jeff Miller, asked him for an explanation about the camera's use. "We believe the family was informed." Miller (R-Pensacola) appeared exasperated by the response and said he had been told by Haley officials that the hospital did not get any consent from Carnegie's family before the camera was placed in the room. "VA maintains that they don't need the family's consent," Miller told the Tampa Bay Times after the hearing. "The questions I have are, if this camera was for patient safety, why not seek consent?"

Miller asked why the camera was removed if it had been put there legitimately. Gould began explaining that Carnegie had transferred out of Haley. But Miller cut him off, noting that the camera was removed long before Carnegie moved to another VA hospital. "This shows that there is no accountability at the VA," Mike Coleman, Carnegie's son-in-law, said in a telephone interview after the hearing. Miller said he was especially concerned that VA policy allowed camera use in rooms without the consent of patients or their families. "We will agree to disagree," Miller said. "I guess common sense where I come from would say just put a camera ... where people can see it. For some reason, somebody made the decision to hide the camera." Miller said afterward that Gould's ability to give a full accounting of the incident may have been compromised by his own employees in Tampa. "I think it's very difficult for Mr. Gould to answer specifics when it appears that the leadership at Haley are not providing all the necessary facts to VA's central office," he said. The committee was holding a hearing on the VA's performance and accountability. Miller's questions about the camera had not been on the hearing agenda. [Source: Tampa Bay Times | William R. Levesque | 21 Sep 2012 ++]

Student Loan Forgiven Debt Tax: The Andrew P. Carpenter Tax Act (H.R.5044) was developed after 27-year-old Andrew Carpenter — a Columbia, Tenn., native — died after being shot while on active duty. The Internal Revenue Service billed the family about \$2,000 in taxes on Carpenter's unpaid student loan forgiveness. Rep. Scott DesJarlais (R-TN) introduced the bill, which prohibits the IRS from collecting taxes on forgiven student loans held by veterans whose active-duty injuries led to death. "I want to thank the Carpenters both for bringing this issue to my attention and for raising such an extraordinary young man," he said. "In learning about Andrew throughout this ordeal, I've come to know a selfless individual who loved his country. "The bill is retroactive to Oct. 7, 2001 — the start of the war in Afghanistan. Families who already have paid taxes on such loans would be eligible for a refund, according to DesJarlais' office. DesJarlais is running against state Sen. Eric Stewart for re-election this fall. Stewart said he supports the bill, but thinks Congress — and DesJarlais — need to do more for veterans. "I fully support and encourage Congress to pass the Andrew P. Carpenter Act," said Stewart, a Democrat. "But Congress has done little more than talk about supporting our veterans when they return home from war. They have failed our men and women of uniform on more than one occasion." The bill passed the House 19 SEP but still needs to pass the Senate and be signed by President Barack Obama to become law. [Source: Chattanooga Times article 19 Sep 2012 ++]

TRDP Update 11: Premium rates for the TRICARE Retiree Dental Program (TRDP) will undergo an adjustment on 1 OCT as established in Delta Dental's contract with the Department of Defense. The new monthly premium rates for the next TRDP benefit year are effective October 1, 2012 through September 30, 2013. This annual premium adjustment is automatic and will be reflected in the allotment from your retired pay, or if you are billed directly, in your payment coupons or EFT (electronic funds transfer) debit applicable to your October payment. If you have established automatic payment of your monthly TRDP premium through your bank's online bill payment system, you will need to manually update the scheduled payment amount Code prior to the next payment cycle. To find out the new Enhanced Program premium rates for your region, use enter your Zip on the online Premium Search feature at <http://trdp.org/pro/premiumSrch.html>. Retirees can find information on the TRDP program at <http://trdp.org> [Source: <http://trdp.org> 21 Sep 2012 ++]

VRAP Update 04: The Department of Veterans Affairs has approved applications for all 45,000 slots available in fiscal year (FY) 2012 under the successful Veterans Retraining Assistance Program (VRAP) and is in the process of approving applications for a total of 54,000 slots available in FY 2013. "At VA, we know first-hand that Veterans make exceptional employees, which is why this Administration has deployed a full-court press to connect Veterans with good jobs," said Secretary of Veterans Affairs Eric K. Shinseki. "The surge of Veterans applying for VRAP demonstrates this program's importance to provide unemployed Veterans the opportunity to find employment in high-demand fields." VRAP is a new training and education program for unemployed Veterans who want to upgrade their skills for high-demand jobs. The goal of VRAP is to train a total of 99,000 Veterans over the next two years in more than 200 job skills that the Department of Labor (DOL) has determined are the most sought-after by employers.

The joint VA/DOL program is a provision of the Veterans Opportunity to Work (VOW) to Hire Heroes Act of 2011, which Congress passed and President Obama signed into law in November 2011. The program allows qualifying Veterans to receive up to 12 months of education assistance equal to the current full-time Montgomery GI

Bill – Active Duty rate of \$1,473 per month. Starting October 1, 2012 the rate will increase to \$1546 per month. To be eligible for VRAP, a Veteran must:

- Be 35-60 years old, unemployed on the day of application, and not dishonorably discharged;
- Not be eligible for any other VA education benefit program such as the Post-9/11 GI Bill, Montgomery GI Bill, or Vocational Rehabilitation and Employment;
- Not be enrolled in a federal or state job-training program within the last 180 days; and
- Not receive VA compensation at the 100 percent rate due to individual unemployability (IU).

“We’re gratified that 45,000 unemployed Veterans can begin the retraining they need to compete for in-demand jobs,” said VA Undersecretary for Benefits Allison A. Hickey. “We’re going to maintain the momentum of our outreach to make sure we get the maximum of 54,000 Veterans retrained in fiscal year 2013.” Veterans approved for VRAP are encouraged to enroll as soon as possible and begin training full-time in a VA-approved program of study at their local community college or technical school. The program of study must lead to an associate degree, a non-college degree, or a certificate for a high-demand occupation as defined by DOL. Some of the high-demand job training programs Veterans pursued in FY 2012 include- computer support specialist, general and operations manager, business operations specialist, and heating, air conditioning and refrigeration mechanic and installer. VRAP applications were received from all 50 states, Puerto Rico, Guam, and the Virgin Islands. The Top 10 states for Veterans approved for training in the FY 2012 phase of VRAP are: California, Florida, Georgia, Texas, North Carolina, New York, Ohio, Michigan, Illinois, and Virginia. VRAP also attracted Veterans internationally, with applications coming from Veterans living in the Philippines, Canada, Japan, the Northern Mariana Islands, and areas of Europe and the Pacific where American military units are based.

Undersecretary Hickey explained that continued outreach on VRAP is particularly important because the program applies to a segment of the Veteran population that may not have regular interaction with VA or stay informed about the benefits and opportunities for which they may qualify. VRAP is one of many efforts that VA and the Administration are undertaking to connect Veterans with employment. VA has held major live and virtual hiring fairs, as well as connected Veterans with career coaching and other career tools through the VA for Vets initiative. VA has also set a goal to increase Veteran employment within the Department and has partnered with Joining Forces and the U.S. Chamber of Commerce on Veteran hiring. Potential applicants can learn more about VRAP and apply online at www.benefits.va.gov/VOW, or call VA toll-free at 1-800-827-1000. Information about the Department of Labor’s programs for Veterans is available at <http://www.dol.gov/vets>. Veterans can also visit the nearly 3,000 One-Stop Career Centers across the nation, listed at www.servicelocator.org, for in-person employment assistance. [Source: VA News Release 20 Sep 2012 ++]

VA Claims Backlog Update 74: The Department of Veterans Affairs announced 20 SEP that the Veterans Benefits Administration (VBA), which oversees the delivery of disability compensation and other benefits to the nation's Veterans, processed over one million disability claims during fiscal year 2012, marking the third year in row VBA claims processors have exceeded the one million mark. "We have made great strides, but we realize much work remains to be done to better serve Veterans," said Undersecretary for Benefits Allison A. Hickey. "Too many Veterans still wait too long. That's unacceptable, and that is why VA has begun implementing a paperless, digital disability claims system- a lasting solution that will transform how we operate and eliminate the claims backlog." In August, VA had its most productive claims processing period in its history, completing a record 107,462 claims and surpassing the previous monthly record of 103,296 set in 2010. This high level of production is accompanied by an increase in the overall accuracy of rating decisions, which has risen from 83 to 86 percent since September 2011, as determined by VA's national quality assurance program.

The department is administering pensions for World War II veterans while handling new claims from Vietnam veterans struggling with the multiplying ailments of age. Indeed, nearly a third of all pending new claims are from Vietnam-era veterans, roughly equal to the number from Iraq and Afghanistan war veterans. Thanks to superior battlefield medicine and armor, those Iraq and Afghanistan veterans have survived combat at a higher rate. As they return home with more wounds, and perhaps more savvy, the ones who file for disability compensation are claiming on average nearly 10 disorders or injuries each, compared with 6 for Vietnam veterans and fewer than 4 for World War II veterans. Their complex claims are often more time-consuming to process, adding to the backlog. At the same time, a higher percentage - nearly half - of Iraq and Afghanistan veterans are filing for disability compensation, partly because of the weak economy. That is double the rate for previous wars.

While claims production is at historic highs, incoming disability claims have increased nearly 50 percent since 2008, outpacing VA's current claims processing capacity. "Our employees are working very hard to sustain this level of production," said Hickey. "This is a testament to their dedication to meeting the increasing needs of our Veterans." VA's goal is to process all disability claims within 125 days, at a 98 percent accuracy level, and eliminate the claims backlog in 2015. On 17 SEP the department reported it had 895,248 compensation and pension entitlement claims pending, with 592,792, or 66 percent, pending for more than 125 days. This year, VBA is beginning a nationwide organizational transformation to increase its claims decision output by retooling procedures and deploying paperless data systems that will speed claims processing and improve quality. All 56 VBA regional offices will be operating under the new organizational model by the end of 2013. [Source: VA News Release 20 Sep 2012 ++]

APO/FPO Holiday Mailing Dates: The Naval Supply Systems Command's (NAVSUP) Postal Policy Division mail-by dates for pre-Dec. 25, delivery of holiday cards, letters, and packages were announced 5 SEP. The dates are as follows:

Shore APO/FPO/DPO AE zips 090-098 (except 093); AA zips 340; AP zips 962-966

- * Express Mail: Dec. 17
- * First-Class Mail (letters/cards and priority mail): Dec. 10
- * Parcel Airlift Mail: Dec. 3
- * Space Available Mail: Nov 26
- * Parcel Post: Nov. 13

Shore APO/FPO/DPO AE ZIP 093

- * Express mail Military Service: N/A
- * First-Class Letters/Cards/Priority Mail: Dec. 3
- * Parcel Airlift Mail: Dec. 1
- * Space Available Mail: Nov. 26
- * Parcel Post: Nov. 13

For mail addressed from all shore FPOs (except 093)

- * Express Mail Military Service: Dec. 17
- * First-Class Mail (Letters/cards, priority mail): Dec. 10
- * Parcel Airlift Mail: Dec. 3
- * Space Available Mail: Nov. 26

Express Mail Military Service (EMMS) is available from selected military post offices. If mailing to an APO/FPO address, check with your local post office to determine if this service is available. Parcel Airlift Mail (PAL) is a service that provides air transportation for parcels on a space-available basis. It is available for Parcel Post items not exceeding 30 pounds in weight or 60 inches in length and girth combined. The applicable PAL fee must be paid in addition to the regular surface rate of postage for each addressed piece sent by PAL service. Space Available Mail (SAM) refers to parcels mailed to APO/FPO addresses at parcel post rates that are first transported domestically by surface and then to overseas destinations by air on a space available basis. The maximum weight and size limits are 15 pounds and 60 inches in length and girth combined. From overseas locations, items mailed at Parcel Post rates are sent to CONUS by air on a space available basis. The maximum weight and size limit are 70 pounds and 130 inches in length and girth combined.

It is also recommended that customers check with their local civilian or military post office for information on size restrictions and possible need for customs declaration forms. Additionally, customers are advised that certain mail restrictions apply and some items can not be mailed. Examples are: switchblade knives, pornography, controlled substances, and explosive or incendiary devices. If in doubt as to what can or cannot be sent through the mail, contact your local civilian or military post office. Customers are cautioned that packages must not be mailed in boxes that have markings related to any type of hazardous material, such as bleach, alcohol, or cleaning fluids. Parcels found by the U.S. Postal Service with such markings or labels on the outside of the box will not be processed. [Source: NAVSUP Story Number: NNS120905-14 5 Sep 2012 ++]

VA Women Vet Programs Update 20: A study of women who served in Iraq and Afghanistan found significantly higher rates of reproductive and physical health problems in those veterans who also had a mental health diagnosis. Researchers at the San Francisco Veterans Affairs Medical Center and UCSF analyzed national Veterans Affairs data from more than 71,000 female Iraq and Afghanistan war veterans who were new users of the Veterans Affairs health system from October 2001 through December 2010. Of the more than 31,000 patients with at least one mental health diagnosis, the researchers found higher prevalence of nearly all categories of reproductive and physical disease diagnoses. Researchers have shown increasing interest in studying the how military service affects the minds and bodies of women since women are the fastest growing demographic within the veteran population. The study was published in the September/October issue of the journal Women's Health Issues. [Source: San Francisco chronicle | Victoria Colliver | 19 Sep 2012 ++]

PTSD/TBI VA/DOD Study: The Department of Veterans Affairs and the Department of Defense on 19 Sep announced they are investing more than \$100 million in research to improve diagnosis and treatment of mild Traumatic Brain Injury and Post-traumatic Stress Disorder. "At VA, ensuring that our veterans receive quality care is our highest priority," Veteran Affairs Secretary Eric K. Shinseki said. "Investing in innovative research that will lead to treatments for PTSD and TBI is critical to providing the care our veterans have earned and deserve." The two groups, The Consortium to Alleviate PTSD (CAP) and the Chronic Effects of Neurotrauma Consortium (CENC) will be jointly managed by VA, and by the Congressionally Directed Medical Research Programs, on behalf of the DOD.

More than 15 percent of service members and veterans suffer impaired functioning as a result of PTSD. CAP will study potential indicators of the trauma, as well as prevention strategies, possible interventions, and improved treatments. Biomarker-based research will be a key factor for CAP's studies. A primary goal of CENC is to establish an understanding of the after-effects of an mTBI. Potential comorbidities also will be studied; that is, conditions associated with and worsen because of a neurotrauma. "PTSD and mTBI (mild Traumatic Brain Injury) are two of

the most-prevalent injuries suffered by our warfighters in Iraq and Afghanistan, and identifying better treatments for those impacted is critical," Assistant Secretary of Defense for Health Affairs Dr. Jonathan Woodson said. "These consortia will bring together leading scientists and researchers devoted to the health and welfare of our nation's service members and veterans."

On Aug. 31, President Barack Obama signed an executive order to improve access to mental health services for veterans, service members and military families. As part of that executive order, Obama directed DOD, the VA, the Department of Health and Human Services and the Department of Education to develop a National Research Action Plan that will include strategies to improve early diagnosis and treatment effectiveness for TBI and PTSD. He further directed DOD and HHS to conduct a comprehensive mental health study, with an emphasis on PTSD, TBI, and related injuries to develop better prevention, diagnosis, and treatment options. VA, which has the largest integrated health care system in the country, also has one of the largest medical research programs. This year, approximately 3,400 researchers will work on more than 2,300 projects with nearly \$1.9 billion in funding. Specific information on the consortia, including the full description of each award, eligibility, and submission deadlines, and general application instructions, are posted on the <http://grants.gov> and <http://cdmrp.army.mil> websites. [Source: VA Press Release 19 Sep 2012 ++]

VA Homeless Vets Update 33: The Department of Veterans Affairs announced 19 SEP it has approved \$28.4 million in grants to fund 38 projects in 25 states and the District of Columbia that will provide transitional housing to homeless veterans. Among these 38 projects, 31 will provide temporary housing to homeless veterans with the goal that they will retain the residence as their own. "As we drive toward our goal to end homelessness among veterans by 2015, VA continues to find innovative ways to permanently house veterans who were formerly homeless," said Veterans Affairs Secretary Eric K. Shinseki. "Under President [Barack] Obama's leadership, we have made incredible strides in creating programs to aid these brave men and women who have served our Nation so well." Thirty-one of the grants were awarded through VA's Homeless Providers Grant and Per Diem (GPD) Program's "Transition in Place" model. The program allows veterans the opportunity to take over payment of a lease instead of moving out after using VA services—substance use counseling, mental health services, job training and more. Other VA programs require veterans living in transitional housing to move out after 24 months.

GPD helps close gaps in available housing for the nation's most vulnerable homeless veterans, including women with children, Native American tribal populations, and veterans with substance use and mental health issues. Those receiving funding have undergone a rigorous review by teams of experts rating each application under objective criteria to ensure that those funded have the ability to provide the services described and a solid plan to get these Veterans into housing with a high probability of obtaining residential stability and independent living. "Securing permanent housing is a vital step in the journey of our homeless Veterans," said Dr. Susan Angell, executive director for VA's Veterans Homeless Initiative. "This is the last piece of the puzzle, and it is crucial for them in continuing to lead independent lives." Community-based programs funded by GPD provide homeless veterans with support services and housing. GPD grants are offered annually as funding is available by VA's National Homeless Program.

Lisa Pape, national director of homeless programs for the Veterans Health Administration which oversees GPD said VHA's focus is creating and strengthening community services around the country so that homeless Veterans get the support they need. "Our focus is creating a team of community support -- pairing a variety of services, such as mental health support, employment assistance and job training with the essential component of housing," Pape said. "Whether it is aid in overcoming substance use or finding a job, a community helping hand is exactly what these veterans need to lead a better quality of life." On a single night in 2011, a national count of homeless veterans

totaled 67,495, which is 12 percent lower than 76,000 in 2010. As part of the government's five-year plan to eliminate veteran homelessness by 2015, VA has committed almost \$1 billion to strengthen programs that prevent and treat the many issues that can lead to veteran homelessness. The award of grants follows closely with a notice VA published asking interested organizations to submit a nonbinding letter of intent to the Supportive Services for Veteran Families Program to apply for initial and renewal supportive services grants by Sept. 28, 2012. The SSVF Program in the first 10 months of operation has assisted more than 28,000 veterans and their families to prevent or rapidly end homelessness. [Source: VA Press Release 19 Sep 2012 ++]

Merchant Marine Veteran Status: They didn't cross the ocean; they didn't get medals; they didn't even get uniforms. But a North Carolina man believes the thousands of people who worked on tugs and barges carrying supplies between U.S. ports during World War II should also get credit for serving their country. "No one's ever recognized these people," says Don Horton of Camden, who was a young boy when he was drafted to work on the barges, not by the government, but by his father, who captained a series of the vessels. Three of Horton's siblings went, too, along with their mother, who served as cook, nurse and deck hand under difficult and sometimes dangerous conditions. Once the United States entered the fight in 1941, the nation's coastlines became busy thoroughfares, with ships hauling troops and equipment to and from theaters of war. To support the Naval fleet, the government called into service private vessels, whose civilian crews were exposed to the same risks as they crisscrossed the oceans in support of the war effort. Some 7,000 were killed when their ships wrecked or were sunk by enemy fire.

Those ocean-going members of the U.S. Merchant Marine and the U.S. Army Transport Service who were at sea during World War II were recognized as veterans in 1988 after a court battle, and were offered veterans benefits. Such mariners could prove their eligibility by presenting shipping and discharge forms, ships' logbooks, or company letters showing vessel names and dates of voyages. But at the same time those ships plied the oceans, smaller vessels were needed to run between U.S. ports picking up and delivering coal, metal, cotton, lumber and other supplies and raw materials. The tugs and barges put to work at this task included many that had been retired or left to rust on river banks, resurrected and then sometimes manned by people who were too old — or too young — for regular military service. Often, the crews consisted of families such as Horton's, who lived and worked together on different barges for weeks at a time.



Don Horton is seen painting the bulkhead of a barge, circa 1944-45.

Horton was 10 years old, a fourth-grader in Elizabeth City, when he first went to work on a barge in the summer of 1942 with his siblings and parents, Sadie and Capt. William Lee Horton. They ran between ports in North

Carolina and went as far north as Maine, mostly carrying coal from Norfolk. “We could usually make a round trip in a week, but the trips were continuous,” Horton recalls. “As fast as we could make one, there would be a tug waiting for us to go get another load.” Living conditions on the barges were primitive, Horton says: no electricity, no plumbing, limited quarters. Life on the tugs was only slightly better, he reckons, and yet hundreds of families worked on the tugs and barges — at least 10,000 people, according to his research. Sometimes, a couple of barges would tie up together while waiting for the next load, allowing the couples and their children to visit. Horton’s older brother, William, was killed while working as a crew member on a tug boat after leaving the employ of their father. William was aboard the steam tug Menominee, which was pulling three barges when it was chased by a German U-boat and torpedoed near the mouth of the Chesapeake Bay on March 31, 1942. In all, 16 of the tug’s 18 crew members died.

After the war, Horton continued working with his father during the summers between school years, and later went into the U.S. Coast Guard, so he already has veteran status. But it bothers him that so many of those who worked as merchant seamen — many of them women — during World War II were never recognized for it, even after the 1988 ruling, because they didn’t have the paperwork the government required. In the hectic days of the war, most of them never got such papers, he says, and now the shipping companies they worked for are out of business, the log books lost or incomplete because of security issues during the war. “It’s an interesting subject that’s been overlooked by historians,” said Raleigh author Kevin P. Duffus, who has researched and written about World War II maritime events. “And I think the desire to get some sort of recognition and thank-you from the government is valid. “Having said that, there were lots of people — thousands — who served in various capacities as civilians and volunteers in the war effort who probably also deserve recognition.” Horton is 80 years old. At this point, he figures fewer than 500 people are still living who crewed the barges and tugs that helped the Allies win the war. He wants to find as many as he can. He has also asked Congress to relax the standard of proof for this segment of merchant mariners, accepting Social Security documents showing they were paid for this work during wartime, along with sworn statements that they performed the work honorably.

Democratic Congressman G. K. Butterfield of Wilson has sponsored a bill, the World War II Merchant Mariner Service Act (H.R.1288), that would make such a provision. It has more than 100 co-sponsors from the two parties, including Republican Walter Jones of Farmville. For the current session, the bill appears to be stuck in a subcommittee, but Butterfield’s office said that he will introduce it again next year if necessary. Charles A. Lloyd of Rolesville, who served in the U.S. Navy Armed Guard during the war, has been trying to help Horton with his research, because he believes the work the tug and barge crews did was as essential as any other. “They’re entitled to recognition as much as the rest of the Merchant Marines,” he said. “If it weren’t for the Merchant Marines, you couldn’t have got the troops overseas, you couldn’t have got the machines overseas, you couldn’t have got the supplies overseas. “It was a combination of everything, of everybody working together.” [Source: Raleigh News & Observer | Martha Quillin | 19 Sep 2012 ++]

Bottle Redemption Fees: Ten states have some form of bottle law requiring deposits on certain Here are aluminum and glass containers that can be returned for a refund. In addition to my home state of California, the others are: Connecticut, Hawaii, Iowa, Maine, Massachusetts, Michigan, New York, Oregon, and Vermont. Here are some Pros and Cons on the program:

Pros - They provide a means for my grandson to augment his allowance.

Cons:

1. They do little to help the environment. That's because bottles are a very small portion of the so-called "waste stream."
2. Depending on where you live, deposits are not fully reimbursed. In California, for example, distribution center reimbursements are determined via weight – and that total is usually far less than the actual deposits.
3. The bottle redemption fee model is inefficient. It's more expensive than other recycling solutions, like the now-ubiquitous and highly successful curbside pick-up programs.
4. Bottle redemption fees are inconvenient to redeem. To get your money back, you are forced to store empties until you have accumulated enough to make the drive to a recycling center worthwhile. At \$4 a gallon, a round trip to the nearest center 6 miles away costs \$2.00.
5. Unless cleaned, stored containers attract bugs. If cleaned, you are wasting water.
6. Those who do reclaim their deposits are creating new environmental burdens. Driving to those redemption centers increases fuel consumption and greenhouse gas emissions.
7. Curbside recycling programs have been shown to be more effective. Delaware finally repealed its law in 2009 after recognizing that three neighboring states had higher recycling rates despite the lack of bottle redemption fees.
8. Bottle redemption fees are thinly disguised efforts to keep state coffers filled. In fact, they act as a regressive tax on consumers in that the more you participate the less you get. In California lawmakers even went so far as to make the fees subject to sales tax.

[Source: MoneyTalksNews | Len Penzo | 20 Sep 2012 ++]

Navy Lodge Gulfport MS: If you have plans to visit the Gulf Coast remember that the Navy Lodge in Gulfport, Miss., opened its new 43,930 sq. ft., 50-room expansion on 14 AUG This brings to 80 the total number of rooms available to guests. Navy Lodge Gulfport held the ground breaking ceremony for the new lodge on 6 APR 2011. "We are so excited to be opening this new lodge for our military guests," said Janice Baker, General Manager, Navy Lodge Gulfport. "Guests will find all the latest amenities and comforts that are offered in civilian hotels, but at a significant savings. Navy Lodges offer a 40 percent savings compared to other hotels and there are no extra person charges." The new Navy Lodge features three different types of rooms to fit the needs of all its guests. There are 10 two bedroom family suites that include full kitchenettes with dishwashers and a balcony off of living area. There are 12 business class rooms that feature one queen bed, microwave and refrigerator. Finally, guests can stay in one of the 28 extended stay rooms which have two queen beds and a full kitchenette with dishwasher. The Navy Lodge also offers guests a fitness room, vending areas, guest laundry, a patio area with gas grills and free WiFi. Guests can also take advantage of the free continental breakfast offered each morning. To make reservations at any Navy lodging facilities or to receive a Navy Lodge directory, call 1-800-NAVY-INN, 24 hours a day, seven days a week or go online at <http://www.navy-lodge.com>. Reservations are accepted on an as-received basis without regard to rank. Like other facilities on military installations, these are open to eligible customers of all branches — active-duty, National Guard and reserves, and retirees. [Source: Militarylife.com Newsletter 24 Aug 2012 ++]

Commissary Coupon Use Update 06: The Defense Commissary Agency (DeCA) is testing the Commissary Rewards Card that will soon allow customers to access and redeem digital coupons at all of its stores. Testing began 8 AUG at the Fort Lee Commissary, Va., kicking off the first of three pilot phases scheduled for the month of August to give customers at 30 stores the opportunity to try out the cards. The test schedule is subject to change, so customers should visit DeCA's official website, <http://www.commissaries.com>, for the latest information. The card can only be used at these test stores until it is released for worldwide use, which is scheduled for the fall time frame. As an introductory offer, customers who pick up their cards by 24 OCT 2012 will receive preloaded digital coupons on their cards for use in the commissary that day. "We are very excited about this new

initiative," said DeCA Director and CEO Joseph H. Jiu. "These cards will allow our customers to maximize their commissary benefit by using technology to save time, effort and money."

The cards, which will only be available at commissaries, are easy to use. Once customers get their cards in the store, they will need to visit DeCA's website to register it and load digital coupons to their account. It's that simple. They will also be able to print off a list of their coupons before making the trip to the commissary. Once the card is scanned at the register, the coupons will be matched to their purchases and the savings automatically deducted. New offers will typically be posted online every two to three weeks. As an incentive, customers who register their card by Oct. 24 can enter the 2012 Commissary Rewards Card "Home for the Holidays Sweepstakes" sponsored by Dr Pepper/Seven Up for a chance to win round-trip airline tickets for four to anywhere in the states, lodging in a hotel room that accommodates four for six days and five nights, and \$1,000 spending money. The sweepstakes entry form will appear at the end of the registration process online.

Digital coupons, just like their paper counterparts, have expiration dates and other terms and conditions that must be followed for redemption. However, digital coupons will not be accepted for up to six months after expiration overseas as paper coupons are. That's because the coupons are distributed digitally and are instantly available to all customers worldwide, so overseas customers won't need extra time to use the coupons. Once a coupon expires, it will disappear from the customer's account. Also, DeCA's coupon policy limits coupons to one per purchase, so these digital coupons cannot be combined with manufacturer coupons, including paper coupons and military or commissary coupons. Future enhancements to the card are expected to enable DeCA's industry partners to target savings based on the customer's specific usage, alert patrons to available sales promotions at their local stores and reward consistent shoppers with specific incentives. For more information, please visit <http://www.commissaries.com/faq> and click "Commissary Rewards Card." Assistance is also available through the customer service hotline at (855) 829-6219 or through email at <mailto:commissarysupport@inmar.com>. [Source: ArmyEchoes Sep-Dec 2012 ++]

Cellphone Discounts Update 01: While it may have dipped, the U.S. Bureau of Labor Statistics says the unemployment rate for AUG 2012 was still above 8 percent, with 12.5 million workers unemployed. Money is tight for a lot of people right now. Some financial experts will tell you to cut out anything that isn't a roof over your head or food on your table. Obviously food comes before designer jeans but other decisions become more complicated. We need other things to survive. Like a cell phone. Job seekers need a phone number for employers to contact them. Elderly and disabled persons need a phone to keep in touch with family and doctors. Single parents need one in case their child has an emergency. A phone isn't a luxury item when you're using it for practical purposes. But what can you do if you can't afford a phone? Step one is to see if you qualify for discounted service through the federal government's Lifeline program. Managed by the Federal Communications Commission, the Lifeline program offers discounted wireless service for low-income individuals, the elderly, and the disabled who meet certain criteria. Funding for the program comes from the "Universal Service Fee" (also called the "Universal Connectivity Fee") tacked onto every wireless subscriber's bill. The program has two main options.

1.) **The first option:** You can get a free or discounted basic phone with 250 free minutes each month through a regional provider. Under these plans, you can also add more minutes or text messages for a fee. For example, Assurance Wireless has an unlimited talk, text, and Web plan for \$30 a month. ReachOut Mobile offers an unlimited talk and text plan for \$26.50 a month. Check out the full program details and available options at

- SafeLink <https://www.safelinkwireless.com/Enrollment/Safelink/en/Public/NewHome.html> (Note: Free minutes have been upped to 250 per month.)
- Assurance Wireless <http://www.assurancewireless.com/Public/Welcome.aspx>

- ReachOut Mobile <https://www.reachoutmobile.com>

2.) **Your second option:** Sign up for a special Lifeline program plan through a major national wireless provider. Generally, you can sign up with any provider if you qualify for the Lifeline program, but you may face some restrictions. For example, an AT&T doesn't offer Lifeline program coverage in every state and only offers the program for their existing customers. So call the provider to make sure you can get service before filling out an application. Some details on plans are:

- T-Mobile's InReach plan <https://lifeline.t-mobile.com> comes with unlimited talk, text, and Web for \$40 a month with no annual contract for qualified Lifeline program customers. Customers must purchase a cell phone or use their own. Prices vary from \$49.99 to \$299.99.
- Verizon Wireless' plan <http://www.verizonwireless.com/b2c/landingpages/lifeline.jsp> includes 400 anytime minutes and 1,000 mobile-to-mobile minutes (for calling other Verizon Wireless customers) for \$33.99.
- AT&T <http://www.wireless.att.com/learn/articles-resources/community-support/lifeline-link-up.jsp> offers 300 anytime minutes and 1,000 night and weekend minutes for \$15.74 a month under the Lifeline program. Users must have a GSM handset, but discounts are available.
- Sprint's Lifeline program http://shop2.sprint.com/en/services/calling/universal_lifeline_program.shtml includes 200 anytime minutes and unlimited night and weekend minutes for \$16.49 per month. However, customers must sign a new two-year contract and may be charged a service deposit based on their credit history.

The FCC says to qualify for the program, your income level must be at or below 135 percent of the federal Poverty Guidelines, or you must participate in certain assistance programs. The federal Poverty Guidelines are based on family size and set by the U.S. Department of Health and Human Services. The limits for 2012 are: 1-person household – \$11,170; 2-person household – \$15,130; 3-person household – \$19,090; 4-person household – \$23,050; 5-person household – \$27,010; 6-person household – \$30,970; 7-person household – \$34,930; 8-person household – \$38,890. The FCC says you're also eligible for the Lifeline program if you're enrolled in any of the below listed programs. If you're not sure if you qualify, use the Lifeline Eligibility Pre-Screening Tool at

<http://www.lifelinesupport.org/lis/> :

- Medicaid
- Supplemental Nutrition Assistance Program (Food Stamps or SNAP)
- Supplemental Security Income (SSI)
- Federal Public Housing Assistance (Section 8)
- Low-Income Home Energy Assistance Program (LIHEAP)
- Temporary Assistance to Needy Families (TANF)
- National School Lunch Program's Free Lunch Program
- Bureau of Indian Affairs General Assistance
- Tribally-Administered Temporary Assistance for Needy Families (TTANF)
- Food Distribution Program on Indian Reservations (FDPIR)
- Head Start (if income eligibility criteria are met)
- State assistance programs (if applicable)

To sign up, you'll need proof of your eligibility. For example, if you're enrolled in the SNAP program, you'll need a copy of your benefit awards letter. Once you have that documentation, you'll have to apply through the service provider, either online or through the mail. After applying, the provider will contact you to finish setting up your service. Here are the application links:

- SafeLink https://www.safelinkwireless.com/Safelink/program_info/how_to_apply.

- Assurance Wireless
[http://www.assurancewireless.com/Public/Welcome.aspx?utm_source=GoogleLocal&utm_medium=cpc&utm_term=assurance_wireless&utm_content=Brand Name - Exactutm_campaign=Low - Efficiency - Brand - CoreBrand](http://www.assurancewireless.com/Public/Welcome.aspx?utm_source=GoogleLocal&utm_medium=cpc&utm_term=assurance_wireless&utm_content=Brand%20Name%20-%20Exactutm_campaign=Low%20-%20Efficiency%20-%20Brand%20-%20CoreBrand).
- ReachOut Mobile <https://www.reachoutmobile.com/apply.php>.
- T-Mobile InReach <https://lifeline.t-mobile.com/Application/Address>.
- Verizon Wireless <http://www.verizonwireless.com/b2c/landingpages/lifelineapply.jsp>
- AT&T <http://www.wireless.att.com/learn/articles-resources/community-support/lifeline-link-up.jsp>
- Sprint http://shop2.sprint.com/en/services/calling/universal_lifeline_program.shtml

[Source: MoneyTalksNews | Angela Colley | 19 Sep 2012 ++]

Tattoo Removal Update 02: Laser treatment is increasingly successful at removing tattoos, with cosmetically acceptable outcomes and refinements in the technology used, studies have found. Successful removal was accomplished in 47.2% (95% CI 41.8 to 52.5) of participants in a large Italian study after 10 treatments with a Q-switched laser and in 74.8% (95% CI 68.9 to 80.7) after an additional five sessions, according to Luigi Naldi, MD, of Gruppo Italiano Studi Epidemiologici in Dermatologia in Bergamo, and colleagues. And in a small U.S. study, all 12 patients who underwent a series of treatments with an experimental picosecond alexandrite laser had 75% or more clearance of the tattoo after an average of 4.25 sessions, according to Nazanin Saedi, MD, of SkinCare Physicians in Chestnut Hill, Mass., and colleagues. The two studies were published online in the Archives of Dermatology.

The need for tattoo removal has burgeoned in recent years. Surveys have suggested that almost one-quarter of U.S. students have one or more tattoos, and that half of them subsequently seek a removal procedure. The use of Q-switched lasers has greatly improved the process of tattoo removal and today is considered the standard of care. Laser treatment involves the selective destruction of ink molecules that are then absorbed by macrophages and eliminated through the lymphatic system. However, outcomes remain inconsistent, multiple treatment sessions are needed, and researchers continue to seek ways of further improving cosmetic results. To explore variables that could influence prognosis, Naldi and colleagues enrolled 352 patients -- 201 men and 151 women -- whose median age was 30, all of whom underwent treatment with Q-switched 1064/532-nm Nd:YAG and/or 755-nm alexandrite lasers. The Nd:YAG laser was used to target black, blue, and red inks, while the alexandrite laser targeted green and white inks. The tattoos had been in place for a median of 4 years, and median size was 50.5 cm². In most cases, the location was the trunk or extremities.

Better outcomes were seen when the interval between treatment sessions was longer than 8 weeks. No adverse events were reported in 93.8% of patients. Darkening was observed in 4.8%, transient hypochromia in 2.3%, persistent hypochromia in 2.3%, change in texture in 1.4%, and hyperpigmentation in 0.3%. The researchers noted that a new and important finding in their study was a 69.7% reduction in the likelihood of successful tattoo removal among smokers. They pointed out that smoking has numerous effects on the immune system, and the effects of exposure may include interference with the ability of macrophages to clear ink fragments through phagocytosis. Another major finding was that the use of colors other than black or red decreased the chance of successful removal by 79.5%. "Our data could represent the basis for developing predictive models of tattoo removal that are applicable in clinical practice," wrote Naldi and colleagues. However, the study was limited by the lack of an outcome measure assessing patient satisfaction.

In the second study, Saedi and colleagues postulated that the use of a picosecond laser, with shorter pulse durations and lower fluences, should be able to cause breakup of ink particles with fewer adverse reactions than the

nanosecond Q-switched lasers. To assess this, they enrolled 15 patients, 10 of whom were women, whose mean age was 43.7. A total of 12 completed treatment and were included in the analysis. After two to four treatments, 9 of the 12 had at least 75% clearance of their tattoos. All patients reported being "satisfied or extremely satisfied" with the outcome. On a 10-point scale, mean pain was 4.5 when no topical anesthesia was used, and scores ranged from 1 to 3 when lidocaine was applied. Three patients experienced hypopigmentation, while two had hyperpigmentation following the procedures. "The picosecond 755-nm alexandrite laser is a safe and very effective device for tattoo removal and seems to clear pigment in tattoos more rapidly than [Q-switched] lasers," the researchers wrote. This "emerging technology" may provide a new way "to optimize the treatment of tattoos," they concluded. [Source: MedPage Today | Nancy Walsh | 17 Sep 2012 ++]

Military Titles: The Department of Defense (DoD) permits Retirees to use their military titles and status under certain circumstances. Such use is regulated, however, to ensure that the conduct of retired personnel neither discredits the service nor implies that the DoD is endorsing any nonofficial commercial activities. When military titles are used by members to sign their names to documents that pertain to them personally, they must show that they are in a retired status after the grade as follows:

- 1) "USA Retired" will be used by all Regular Army (RA) personnel retired for service, age, or physical disability, including RA personnel on the Temporary Disability Retired List (TDRL).
- 2) "AUS Retired" will be used by all personnel on the Army of the United States (AUS) Retired list, including non-regular Army personnel on the TDRL.

General Restrictions - DoD regulations permit Retirees to use their military titles socially and in connection with commercial activities as long as they don't involve any ethically-questionable associations. They are not allowed to use their military title in connection with any activity, commercial or otherwise, when such use implies the DoD sponsors or otherwise approves of that activity. Retirees may not use their military titles during public appearances in other countries, unless authorized by the theater commander, to prevent other nations from inferring that the U.S. military supports foreign groups or causes not officially sanctioned by the DoD and the U.S. State Department.

Job-related Restrictions - Retirees who accept jobs as federal civil servants after retirement have some further restrictions placed on them, both legal and practical. For example, retired military civil servants may not use their military rank as part of a signature block on official correspondence, as their former military standing isn't relevant to federal civilian policy. When working as a civilian as part of a military command, a Retiree may not answer telephones using his or her retired rank, as doing so would cause confusion in the mind of the caller as to who was taking the call. Common sense also dictates that Retirees working at military commands don't ask to be called by their retired rank when that rank is senior to other officers in their military/ civilian chain of command, especially if that includes the commanding officer.

Social Restrictions - If Retirees have business cards that include their rank, they must reflect the fact that the individual is retired, as must any social calling cards they have, by including the phrase "(Ret.)" after their rank. The same restriction pertains to Retirees who use their military title or rank to sign personal documents. Finally, Retirees are entitled to wear their uniforms only at: military funerals, memorial services, weddings, inaugurations, military balls, military parades, other patriotic parades or ceremonies in which any active or reserve United States military unit is taking part, meetings and conferences, or functions of associations formed for military purposes. Retirees may wear medals on civilian clothing for patriotic, ceremonial, and social functions of a military nature. For more information, refer to Chapter 30 of Army Regulation 670-1, Wear and Appearance of Army Uniforms and Insignia, at

http://armypubs.army.mil/ebooks/pdf/r670_1.pdf.

[Source: Army Echoes Sep-Dec 2012 ++]

Tricare Pharmacy Copay Update 05: With members of Congress focused on winning re-election, Tricare pharmacy users will get a temporary reprieve from stiff co-payment increases on prescriptions filled at Tricare retail outlets or mail order. The 112th Congress has reconvened after a five-week recess, primarily to pass a “continuing appropriation resolution” or “CR,” which will allow federal departments, including Defense, to continue to spend at 2012 budget levels until new funding bills are passed after the Nov. 6 election. The CR drafted in the House, which both chambers are expected to approve next week before lawmakers resume campaigning, would expire March 27, 2013. That date, however, does not remove the threat of budget “sequestration” on Jan. 2 when deep, across-the-board cuts in federal programs are scheduled to take effect unless Republicans and Democrats can cut a major deficit-reduction deal. The CR will allow the House and Senate to delay passing a final defense authorization for fiscal 2013, which begins Oct. 1. And that is where the reprieve occurs for users of the Tricare pharmacy benefit.

Both the House and Senate versions of the defense bill block the Obama administration’s plan to raise Tricare enrollment fees on military retirees, but they would allow hefty increases in co-pays at Tricare retail pharmacies and through mail order or “home delivery” program. Language in the House bill (H.R.4310) is more favorable to beneficiaries, allowing only part of co-pay increases sought by the Department of Defense. Out-of-pocket costs for drugs dispensed at retail pharmacies in the Tricare network would increase from \$12 to \$17 on brand name drugs listed on the military formulary. Co-pays for nonformulary brand name drugs would climb from \$17 to \$44. For mail order, the House plan would increase the co-pay for a 90-day supply of brand name drugs on the formulary from \$9 to \$13, while the \$25 co-pay for nonformulary drugs would jump to \$43. There would be no cost for generic drugs by mail order, and the charge would be \$5 at retail outlets. The House bill also would allow annual increases in these drug co-pays beginning Oct. 1, 2013, but these adjustments would be capped to the percentage rise in cost-of-living adjustments for military retired pay.

The House also would require the Department of Defense to conduct a pilot program for five years on Tricare for Life users – beneficiaries age 65 and older. They would be required to obtain refills of all maintenance drugs through the mail-order pharmacy. They could opt out of this arrangement after a year. Also, the mail order requirement for TFL beneficiaries could be waived, on an individual basis, if personal circumstances warrant. These House-passed changes were to take effect Oct. 1 to save the Department of Defense an estimated \$590 million in the new fiscal year. But that is sure to be delayed given stalled progress toward passing a final bill. In the Senate, the armed services committee voted out its version of a defense authorization bill (S.3254) in June. The full Senate won’t vote on the bill until after the election, however. The bill so far places no restriction on the Defense Department’s existing authority to adjust pharmacy co-pays. So, in effect, it green light changes sought by the administration. That plan, unveiled in February, would raise co-pays on brand-name drugs at Tricare retail pharmacies from \$12 to \$26 and allow increases thereafter of \$2 a year until hitting \$34 in October 2016. Co-pays for brand drugs through mail order would jump from \$9 to \$26 for a 90-day supply, and climb annually to reach \$34 by 2016.

Under both the House bill and the Defense plan, base pharmacies would continue to fill prescriptions at no charge and the co-pay on generic drugs at retail would remain \$5 for several years. But in 2017, the department would end the policy of dispensing generic drugs for free through mail order. The co-pay would be \$9 for a 90-day supply of generic drugs by the mail or a 30-day supply at retail outlets. By law, co-pays on brand name drugs for active duty families can’t exceed 20 percent of the military’s average cost to procure them. For retirees, co-pays on brand name drugs can’t exceed 25 percent of cost. Presumably these limits aren’t exceeded under the department’s plan. Pharmacy officials say the goal is to encourage use of mail order or base pharmacies because brand name

medications filled at retail outlets cost taxpayers 27 percent more. The government's average cost for a year's worth of a brand name medication at retail is \$1,156 versus \$840 through mail order. If generic drugs are used instead, that average falls to \$200 a year regardless of where the generic drug is dispensed. In 2017, the department wants co-pays adjusted yearly to match medical inflation. The House seeks to soften that blow by limiting yearly hikes in co-pays to no more than percentage increase in military retired pay.

But with Congress focused on re-election, the Senate won't pass its defense authorization bill until at least mid-November. A House-Senate conference committee then will have to iron out differences between the two versions of the bill including the details on new pharmacy co-pays. Last June, soon after the Senate committee voted out a defense bill with no language to block that administration's co-pay plan, the Department of Defense published a proposed regulation in the Federal Register to prepare the way for charging beneficiaries higher co-pays. In an election year, however, strange things can happen. On July 5, nine days after the draft regulation was published, a new posting in the Federal Register withdrew it. Tricare officials had no immediate comment on why the draft regulation was shelved, nor would they comment on what changes might occur this year in drug co-pays for military beneficiaries. For now, a plan to raise co-pays to what officials called "a more realistic level after a decade of no change" is sidelined. And beneficiaries aren't complaining. [Source: The News Tribune Tom Philpott article 15 Sep 2012 ++]

VA Lawsuit ~ Frances Minter: The widow of a veteran who died after being scalded in a whirlpool bath at the Claremore Veterans Center said 12 SEP that she has settled her tort claim with the state. Frances Minter said she will receive \$175,000, the maximum amount allowed by the state's tort claims law. Her husband, 85-year-old Jay Minter, died in May of complications from thermal injuries, according to a state Medical Examiner's Office report. An investigation found that the whirlpool he was put in was hotter than the regulation temperature and did not have safety features to prevent burns. Frances Minter said the money will help some but that she doesn't consider it to be much. "There's no amount of money that can compensate for my husband's life," she said. "It's terrible what happened to him."



Frances and Jay Minter. He died in May.

In late July, the administrator of the Claremore center, Cynthia Adams, abruptly resigned. On the same day, the executive director of the Oklahoma Department of Veterans Affairs, which oversees the state's veterans centers, retired, citing her husband's health problems. The death sparked a legislative review of the Department of Veterans Affairs, which has pledged a reorganization. The settlement isn't complete, but Frances Minter expects that to happen within the week. She said she did not pursue the case in federal court because of the time and cost it would have taken. In the settlement, the Oklahoma Department of Veterans Affairs does not accept responsibility for Jay Minter's death, which his wife finds disturbing. As for the settlement, "I feel really bad that the state doesn't consider these veterans' lives worth more than that," she said. [Source: Tulsa World | SHANNON MUCHMORE | 13 Sep 2012 ++]

Sequestration Update 06: The White House for the first time offered a detailed look at billions in automatic budget cuts scheduled for January, warning in a report released 14 SEP that alternatives must be found to prevent the crippling of thousands of military and nondefense programs. For the Defense Department, the scenario would mean roughly a 10 percent cut in military spending, except for personnel accounts. The report doesn't detail exactly what those lost dollars would mean in terms of lost programs or purchases, but does give a top-line view of the size of the cuts. Defense Health programs would lose about \$3.3 billion in funding. Army purchases of combat vehicles, weapons and ammunition would be trimmed by \$505 million. The Navy would lose almost \$4.4 billion in ship and aircraft procurement money. The four services' operations and maintenance accounts would be reduced by more than \$18 billion combined. The automatic cuts, also known as sequestration, were enacted by Congress last summer as part of a larger deficit-reduction plan. In total, the spending curbs would take away \$54.6 billion in planned military spending, the first installment on a 10-year deficit-reduction plan to reduce defense funds by about \$500 billion.

The White House called it a potential disaster. "The administration does not support the indiscriminate, across-the-board cuts in this report," one senior administration official said. "We believe they should never be implemented." When Congress adopted the Budget Control Act, it included the sequestration cuts — more than \$1 trillion in budget trims over the next decade, spread evenly between defense and nondefense accounts — as a poison pill designed to force a bipartisan deficit-reduction panel to find alternatives. But that attempt to force compromise failed. For the last nine months, lawmakers and Pentagon leaders have decried the looming defense cuts as dangerous and nonsensical, but Congress has not been able to agree on an alternative. The 394-page report released Friday lists hundreds of exempt spending accounts across the government — including all of the Department of Veterans Affairs — but White House officials have insisted that the law limits how much they can mitigate the effects of the automatic budget reductions. "Sequestration is a blunt and indiscriminate instrument," the report says. "It is not the responsible way for our nation to achieve deficit reduction."

House Armed Services Committee officials criticized the report as lacking any real detail, failing to explain how individual programs and offices will be impacted. They said the White House is dodging its responsibility to inform the public about how harmful the automatic cuts will be, and has failed to direct the Defense Department to properly prepare for a worst-case scenario. On 13 SEP, House Republicans passed legislation calling for the president to replace the automatic defense cuts with nonmilitary trims. House Armed Services Committee Chairman Buck McKeon (R-CA) noted it was the fifth measure passed by the chamber this year aimed at preventing "devastating" cuts to national security programs. "It is my sincere hope that this most recent action by the House will compel the President to finally do his part to end the sequestration crisis and bring his party in the Senate to a conference committee," he said in a statement. Like the previous House GOP proposals to avert sequestration, the measure is unlikely to gain traction in the Democratically controlled Senate. Obama and Capitol Hill Democrats have rejected proposals that would shift all of the automatic cuts onto domestic programs to save military accounts.

Meanwhile, defense contractors have begun warning employees that deep cuts to military funds in the middle of the fiscal year could jeopardize tens of thousands of jobs. The Congressional Budget Office has warned that sequestration could result in massive layoffs among Defense Department civilian employees and lead to a new recession. The exemption for military personnel accounts means that military paychecks won't be affected by sequestration. Officials said that the Department of Defense would also be able to shift funds to ensure that operations in Afghanistan and "critical military readiness capabilities" will not be hurt. But the report states that "sequestration would result in a reduction in readiness of many non-deployed units, delays in investments in new equipment and facilities, cutbacks in equipment repairs, declines in military research and development efforts, and

reductions in base services for military families.” Beyond the military, the report says sequestration would lead to a 2 percent reduction in funding for Medicaid and other domestic health programs, and an 8 percent cut in nonexempt, nondefense programs. White House officials also noted the report offers only preliminary estimates, since operating budgets for every department have not been finalized by Congress. Congress isn’t expected to act on any of those budgets — or alternatives to sequestration — until after the November elections. A copy of the OMB report can be seen at http://www.whitehouse.gov/sites/default/files/omb/assets/legislative_reports/stareport.pdf.

On 17 SEP two Republican senators criticized the Office of Management and Budget for failing to provide what they say is legally mandated analysis in its recent report on the looming spending cuts slated for 2013. In a letter to acting OMB Director Jeffrey Zients, Sens. John Thune (R-SD) and Jeff Sessions (R-AL) accused the office of dragging its feet all year long and for failing in its report to explain the impact the cuts will have at the program, project, and activity level. "We were disappointed to receive a report that did not provide the level of detail required under the law," they wrote in the letter. [Source: Stars and Stripes | Leo Shane III | 14 Sep 2012 ++]

Sequestration Update 07: Military Officers Association of America (MOAA) Government Relations Director Colonel Steve Strobbridge (USAF-Ret) was among military and veteran association leaders invited to Capitol Hill in SEP to discuss legislative priorities with House Minority Leader Nancy Pelosi (D-CA) and more than a dozen other senior House Democrats. Pelosi highlighted ongoing challenges in resolving the sequestration issue that threatens an additional \$1 trillion in across-the-board budget cuts over the next 10 years if Congress doesn't approve alternative ways to cut the deficit by the end of the year. She acknowledged that political considerations have forced deferral on this and a number of other key legislative efforts into the post-election, "lame duck" session of Congress, including the need to change the current law that's scheduled to impose a 27% cut in Medicare and TRICARE payments to doctors in January.

The assembled association representatives detailed a variety of priorities remaining to be addressed, including various wounded warrior and veteran hiring initiatives, protecting VA funding, addressing the unfair deduction of VA survivor benefits from military SBP annuities, and more. Strobbridge highlighted that, while Congress has exempted VA health care from sequester-driven budget cuts, no such protection has been extended to military health care, at least for beneficiaries under 65 and care delivered through military facilities. He supported protection of VA care, but said if we're going to protect health care for vets who served as little as one tour of duty in uniform, those who sacrifice for decades deserve no less. He also praised House Republicans and Democrats alike for including caps on TRICARE pharmacy copay increases in the House-passed version of the FY2013 Defense Authorization Act. He urged House leaders to ensure those caps are retained in negotiations with the Senate during the lame duck session. [Source: MOAA Leg Up 21 Sep 2012 ++]

SVAC Update 09: The Senate Veterans’ Affairs Committee 12 SEP passed an omnibus bill that would, among other things, allow veterans who had become infertile due to battlefield injuries to receive fertility treatment from the Department of Veterans’ Affairs (VA). Also included in the measure was an amendment that would provide veteran ID cards to ALL veterans, regardless of whether they receive care from the VA or not. The bill, S. 3457, sponsored by Senate Veterans’ Affairs Committee Chair Patty Murray (D-WA), authorizes the Department of Veterans Affairs to cover the cost of in vitro fertilization and other advanced reproductive technologies for veterans and their spouses. According to Pentagon figures released by Murray's office more than 1,830 veterans of the wars in Iraq and Afghanistan have suffered pelvic or genital injuries since 2003 that could affect their ability to reproduce. Ranking Member Richard Burr (R-NC) successfully introduced amendments allowing VA to provide

adoption assistance to veterans with infertility conditions incurred in combat and to require the VA to report annually the number of veterans receiving treatment and the cost of that treatment.

Burr also had a proposed amendment to S.3340, a veterans' mental health bill, **fail** on an 8-7 party-line vote that would pay veterans to go to all of their mental health counseling and appointments. Burr's amendment would have created a three-year pilot program in four of VA's 22 regions. Veterans who attend all of their VA-prescribed mental health counseling and treatment would get a stipend as long as they keep their appointments, and would continue to be paid when treatment is over if they remain disabled. The stipend would be determined by VA. Chairman Murray opposed Burr's amendment, saying she had "a great deal of trouble with the implication that veterans would fake symptoms or actively seek to remain injured in order to game the system and receive more compensation." She also made the point, echoed by Senator Mark Begich (D-AK) that Burr's proposal would not resolve a problem that comes from not having enough mental health professionals to treat veterans. [Source: TREA News for the Enlisted 14 Sep 2012 ++]

PTSD Update 113: Veterans suffering from post-traumatic stress disorder who are also battling drug or alcohol problems face a higher risk of death, according to new research from the University of Michigan Health System and the VA Ann Arbor Healthcare System. The new study is the first to examine the association between drug or alcohol use disorders and death in veterans with PTSD, and also includes data from the nation's youngest veterans who have returned from conflict in Iraq and Afghanistan. Kipling Bohnert, Ph.D., the study's lead author, says the research sheds new light on the importance of treating both substance-use and post-traumatic stress disorders in veterans. "Attention needs to be paid to veteran patients with PTSD, with an emphasis on identifying those who might also have a problem with drug or alcohol use," says Bohnert, who is a post-doctoral fellow at VA Ann Arbor and a research fellow at the University of Michigan. "This study highlights the potential importance of effective treatment for both conditions in helping veterans after they've returned from conflict".

Previous research on veterans has linked PTSD with higher risks of death, but this study is the first to highlight the association between substance-use disorders, PTSD and mortality. The study was published online in the journal Drug and Alcohol Dependence. While the researchers found a significant link between substance-use disorders and death in veterans with PTSD across all ages, they also found that the association was most pronounced for the youngest group of veterans, including those from conflicts in Iraq and Afghanistan. The youngest veterans, those 45 and under, showed a particularly strong link between substance-use disorders and both injury and non-injury related death. Injury-related death included homicides, suicides and accidents, while non-injury related deaths included heart disease, cancer and other health problems. Bohnert says more research is necessary to figure out why younger veterans exhibit a stronger tie between substance-use disorders and death. Federic C. Blow, Ph.D., the paper's senior author, the director of National Serious Mental Illness Treatment Research & Evaluation Center at the VA, says the research might be helpful for physicians in deciding the best way to treat their patients. "In theory, a treatment program that addresses both issues – substance use and PTSD – should reduce the risk of death from all causes, and this may be especially true for the nation's youngest veterans," says Blow, who is also the director of the Mental Health Services Outcomes & Translation Section at the U-M Medical School. [Source: Science Codex | Justin Harris | 17 Sep 2012 ++]

PTSD Update 114: The greatest danger to the veteran with post-traumatic stress disorder is loss of sleep. "There is nothing more fundamental to the successful recovery of a combat veteran after war than the ability to get adequate, good quality sleep," says Dr. Jonathan Shay, a psychiatrist. He says sleep loss causes irritability and

propensity to anger, which are classic symptoms of combat veterans suffering psychological injury. Shay says Prazocin, a 50-year-old medicine for high blood pressure, has been shown to be very effective in tiny doses in alleviating combat nightmares. "About half of the veterans who take it say that their nightmares are gone, and another quarter will say, 'Well doc, I'm still having the dreams, but at least I can get back to sleep,'" he says. The VA has begun conducting clinical trials of Prazocin at 13 of its medical centers and expects to complete its study sometime in 2012.

Shay says sleep is fuel for the frontal lobes of the brain, which is where the capacity for emotional and ethical self-restraint lies. "Sleep is crucial. When you're totally out of gas in your frontal lobes, you become a moral moron and a lot of the misconduct of combat veterans, I believe, is driven by this measure of frontal lobe function due to sleep loss," he says. He says one of the complications of sleep loss is that veterans will drink alcohol to put themselves to sleep. "It is a very common way that the veteran's feet get placed on the icy stairway to alcohol abuse and dependency when they try to use alcohol to get to sleep," he says. Shay says alcohol is a poor choice as a sedative because the body metabolizes it rapidly and tolerance develops quickly. Veterans who use it to induce sleep will wake up unrested and more wired than before, he says. "I've no religious scruples against alcohol, but I can tell you its pharmacology is satanic," he says. [Source: Saint Louis Beacon Sharon Wittke | 12 Sep 2012 ++]

PTSD Update 115: Camp Pendleton Marines returning from overseas assignments with the psychological scars of combat have been helped with treatment by Scripps Health researchers, according to a new study. The researchers treated active-duty Marines who had post-traumatic stress disorder with what is called complementary and integrative medicine. Marines treated with the complementary methods, called "guided imagery" and "healing touch," showed significantly more recovery than a control group who didn't receive the treatment. Results were published in the journal *Military Medicine*. Those with PTSD can experience flashbacks to combat situations, nightmares, depression, feelings of hopelessness and emotional numbness.

A total of 123 active-duty Marines were studied, including 68 who received the complementary approaches along with treatment as usual. The other 55 received only the regular treatment. Symptoms of those treated with the complementary methods dropped by more than 13 points on an 85-point scale that measures PTSD. The difference was enough to drop the average score of those treated below the level indicating PTSD. Symptoms of the control group dropped by fewer than 5 points, with the average score remaining above the level indicating PTSD. Study researchers were Mimi Guarneri, M.D., and Rauni King, founders of the Scripps Center for Integrative Medicine. Guarneri said the study demonstrated very strong statistical significance. The study reported that results had a probability of being due to chance of less than 1/20 of 1 percent. A value of 5 percent or less is generally considered statistically significant. Although the methods may be useful for quickly reducing the suffering of returning soldiers, the study's authors said further research on their long-term effects is needed.

Treating PTSD has become increasingly important as the number of troops experiencing combat stress continues to rise. A report on the subject was issued July 13 by the Institute of Medicine, the health arm of the National Academy of Sciences. The report recommended that soldiers returning from Iraq and Afghanistan be screened for post-traumatic stress disorder at least once a year, and that federal agencies conduct more research. The report also stated that complementary and alternative therapies should be "rigorously evaluated for effectiveness and cost." The study was "well-done," said Murray Stein, a professor of psychiatry and preventive medicine at UC San Diego, where he directs the Anxiety & Traumatic Stress Disorders Program. Stein is also principal investigator of a Department of Defense-funded study of treatments for post-traumatic stress disorder and traumatic brain injury. Moreover, the study's results are meaningful, said Stein, who was not involved with the study. "These are some pretty large effects for PTSD research," said Stein, who is also a psychiatrist at VA San Diego Healthcare System.

"They're potentially clinically meaningful." Stein said he was initially skeptical because of the study's title, which included the complementary medicine therapies of healing touch and guided imagery. "Usually when you see titles like that, you don't see well-conducted clinical trials, but this was well-done," Stein said.

Guided imagery consists of directed thoughts and suggestions to elicit relaxation. The Mayo Clinic lists guided imagery among other complementary techniques that an "open-minded skeptic" should consider. A number of clinical trials are now being conducted on guided imagery and other complementary methods, usually to relieve stress and pain. For more information, search for the methods at clinicaltrials.gov. Healing touch is based on a belief that a kind of life force or energy sustains living creatures. Practitioners attempt to balance what they call an energy field, placing their hands slightly above or on the patient. This supposed energy field is of an indeterminate composition, and skeptics say its therapeutic value has not been demonstrated in controlled clinical trials. Guarneri said that although the energy source behind healing touch has not been scientifically identified, she hopes that it will be within her lifetime. [Source: San Diego North County Times | Bradley J. Fikes | 24 Sep 2012 ++]

PTSD Update 116: Dr. Eugene Lipov, medical director of Advanced Pain Centers in Chicago, director of pain research at Northwest Community Hospital and medical director of Chicago Medical Innovations thinks he's landed on what could be the "cure" for PTSD with an injection to stellate ganglion area of the neck. The stellate ganglion is a collection of nerves in the neck that are connected to various parts of the brain, including the amygdala, which are thought to be associated with PTSD. Dr. Lipov believes a shot into this area with their treatment called Stellate ganglion block (SGB) is the cure. The injection, which takes approximately 15 minutes to administer, has reportedly led to dramatic improvements in some veterans who suffer from PTS disorder. Some in the study have reported relief from PTS symptoms in as little as 30 minutes after having been administered the treatment. According to an article by Alex Crees, Lipov has received a waiver from the FDA to perform SGB and is currently recruiting participants for a clinical trial. SGB, which has also been used in the past to treat depression, schizophrenia, psychosis, and other mental health disorders, is not backed by the Department of Veterans Affairs for treating PTSD in soldiers. The verdict on program effectiveness is not yet settled. And without funding, which Dr. Lipov says is needed, the true results may never come to the surface. [Source: Seattle PI Military wire | Michael Schindler | 25 Sep 2012 ++]

VA Fraud Waste & Abuse Update 58:

- **Chelsea ME** - Stephen Longstaff, 54, has pleaded guilty 12 SEP in federal court to submitting 156 fraudulent claims for travel expenses submitted to the Department of Veterans Affairs. Such benefits are reimbursements for expense paid to individuals who must travel to receive VA services. Court records say Longstaff submitted the claims between 2009 and 2012 by overstating the distance he was driving between the Togus V.A. Medical Center and locations in Washington and Hancock counties, where he said he lived. An investigator said Longstaff actually lived within 3 miles of the medical center and not over 350 miles away, as he claimed recently. Authorities say Longstaff was paid over \$17,725 in travel benefits. Under the terms of the plea agreement, Longstaff must repay the money. It says he has accepted responsibility for the offense and waives his right to appeal a sentence of less than six months' imprisonment. The charge carries a maximum penalty of five years in prison and a \$250,000 fine. Justice John A. Woodcock Jr. ordered Longstaff freed on \$5,000 unsecured bail pending sentencing. [Source: Kennebec Journal | Betty Adams | 15 Sep 2012 ++]

- **Knoxville TN** - Martha Ann Kaczmarczyk, 62, pleaded guilty on 18 SEP to charges of stealing public money. Her husband, Charles Kaczmarczyk, a veteran, was also charged in the scheme where they lied about his military records to obtain benefits. He pleaded guilty in August. According to investigators, Kaczmarczyk assisted her husband in obtaining disability payments based on a false claim of combat-related Posttraumatic Stress Disorder. Additionally, Kaczmarczyk defrauded the Social Security Administration by falsely claiming that she was disabled due to a back injury. She faces a maximum of ten years in prison, along with forfeiture and restitution. Her sentencing is set for January 16, 2013. Charles Kaczmarczyk will be sentenced on December 12. [Source: WBIR.com 19 Sep 2012 ++]
- **Brooklyn NY** - A Brooklyn businessman who posed as a disabled veteran to qualify for more than \$16 million in government contracts has been sentenced to more than three years in prison. John Raymond Anthony White was sentenced 19 SEP in federal court in Manhattan. The 47-year-old White was convicted in April 2011 of fraud. Prosecutors say he never served in the military but falsely claimed to be disabled and a veteran. The government says the lies enabled him to qualify for government contracts administered by the U.S. Department of Veterans Affairs and the Army from June 2007 through June 2010 in New York, Pennsylvania and Maryland. He was convicted after a five-day jury trial. Besides a prison term of three years and five months in prison, White must also pay a \$30,000 fine. [Source: Associated Press article 19 Sep 2012 ++]
- **Dallas TX:** A co-defendant of a Dallas-area doctor charged with a massive Medicare and Medicaid fraud scheme has pleaded guilty to recruiting patients and billing for unnecessary medical services. Cyprian Akamnonu (ah-kam-NO'-noo) pleaded guilty 25 SEP to one count of conspiracy to commit health care fraud. The plea agreement calls for a 10-year maximum sentence. According to court documents, Akamnonu admitted he had his home health agency sign up Medicare clients. His company would then bill Medicare for more services than were actually provided. Dr. Jacques Roy is accused of signing off on false paperwork in a scheme alleged to have reached more than \$375 million. [Source: San Antonio Express News article 27 Sep 2012 ++]

GI Bill Update 128: The new 2012-2013 Montgomery G.I. Bill (MGIB Chap 30) rates have been updated to reflect the annual rate of inflation. Each year in October, the Montgomery GI Bill payment rates increase to meet the growing cost of education. Effective October 2012, the Montgomery GI Bill full-time payment rate will increase to \$1,564 for the 2013 fiscal year. Last year (2011), the full-time payment was \$1,473. Eligible veterans and servicemembers could receive more than \$56,000 in total benefits over 36 months!

1. The following rates apply to those completing an enlistment of three years or more:

- Institutional Training - Full Time \$1,564 | 3/4 Time \$1,173 | 1/2 Time \$782** | 1/4 Time \$391**
- Apprenticeship and On-Job Training - First 6 months \$1,173 | Second 6 months \$860 | Remainder \$547.40
- Correspondence and Flight - Entitlement charged at the rate of one month for each \$1,564.00 paid.
- Cooperative - \$1,564.00

2. The following rates apply to those completing an enlistment of less than three years:

- Institutional Training - Full Time \$1,270 | 3/4 Time \$952.50 | 1/2 Time \$635 | 1/4 Time \$317.50
- Apprenticeship and On-Job Training - First 6 months \$952.50 | Second 6 months \$698.50 | Remainder \$444.50
- Correspondence and Flight - Entitlement charged at the rate of one month for each \$1,270.00 paid.

- Cooperative - \$1,270.00

3. The following are Basic Institutional Rates for persons with remaining entitlement under Chapter 34 of Title 38, U.S.C. Chapter 30 Category II rates effective October 1, 2012:

Institutional Training

- Full Time - No Dependents \$1,752 | 1 Dependent \$1,788 | 2 Dependents \$1,819 | Add'l Dependents \$16
- 3/4 Time - No Dependents \$1,314.50 | 1 Dependent \$1,341 | 2 Dependents \$1,364.50 | Add'l Dependents \$12
- 1/2 Time - No Dependents \$876 | 1 Dependent \$894 | 2 Dependents \$909.50 | Add'l Dependents \$8.50
- Less than 1/2 time but more than 1/4/time - Flat Rate \$876 **
- 1/4 Time - Flat Rate \$438

Cooperative Course:

- Full Time - No Dependents \$1,752 | 1 Dependent \$1,788 | 2 Dependents \$1,819 | Add'l Dependents \$16
- Correspondence - 55% of the approved charges.
- Flight - 60% of the approved charges

Apprenticeship and On-Job Training:

- First 6 months -No Dependents \$1,275 | 1 Dependent \$1,288.13 | 2 Dependents \$1,299 | Add'l Dependents \$5.25
- Second 6 months - No Dependents \$916.58 | 1 Dependent \$925.93 | 2 Dependents \$933.63 | Add'l Dependents \$3.85
- Third 6 months - No Dependents \$571.20 | 1 Dependent \$577.33 - 2 Dependents \$582.05 - Add'l Dependents \$2.45
- Remainder - 1 Dependent \$565.08 | 2 Dependents \$570.33 | Add'l Dependents \$2.45

** Tuition and Fees ONLY. Payment cannot exceed the listed amount.

Refer to http://gibill.va.gov/resources/benefits_resources/rate_tables.html to see the new rates for the Post-9/11 GI Bill (Chapter 33), Selected Reserve (MGIB-SR/Chapter 1606), Reserve Educational Assistance Program (REAP/Chapter 1607), Survivors' and Dependents' Educational Assistance Program (DEA/Chapter 35), and the \$600 Buy-Up Program. [Source: <http://gibill.va.gov> Sep 2012 ++]

GI Bill Update 129: (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.)

Did Uncle Sam charge you \$1,200 for a benefit you can get for free? Probably. This year, 90 percent of recruits across the armed services — more than 100,000 people and counting — have enrolled in the old Montgomery GI Bill, which requires recruits to pay a buy-in fee of \$100 a month over their first 12 months of service. More than three years after Congress created the new, free Post-9/11 GI Bill, and almost a year after lawmakers enhanced it with changes that largely made the old bill irrelevant, recruits continue to be automatically enrolled in the old GI Bill because the law still states that all troops must be enrolled in the Montgomery GI Bill unless they specifically request to opt out. The Pentagon and military officials defended the old GI Bill, saying there are still cases in which it is the better benefit.

The Post-9/11 GI Bill requires no contribution from troops and provides a far more generous benefits package than the Montgomery GI Bill, including full tuition at in-state public schools or at private schools up to \$17,500 a

semester; housing allowance at married E-5 rates; money for books, tutors and testing; and even the ability to transfer benefits to spouses or children if you serve at least six years and agree to serve a total of 10. It also offers vets a longer window in which to use their benefits: 15 years versus 10 for the Montgomery GI Bill. Troops who buy into the Montgomery GI Bill —those who did so before the new bill’s creation and those who did so after — can switch programs, but there’s only one way to get your money back: You have to exhaust every bit of your Post-9/11 GI Bill benefits. Otherwise, consider it a donation to the federal treasury.

Montgomery GI Bill refunds have escalated annually since the first were doled out in 2010, from nearly \$60,000 that year to nearly \$500,000 in 2011 and close to \$790,000 in just the first three months of 2012. But getting back that \$1,200 enrollment fee is not simple. There’s only way to do it: You must first use up all your Post-9/11 GI Bill benefits, which typically cover 36 months of schooling. And if you use any of your Montgomery GI Bill benefits before applying to the Veterans Affairs Department to switch to the Post-9/11 GI Bill, your refund will be less than the full \$1,200 you paid. Such refunds are added to the final monthly housing allowance payment under the Post-9/11 GI Bill. Ways to get your money back are:

- If you have no college credits: With no or very few credits under your belt, going to college full-time and completing a bachelor’s degree under the Post-9/11 GI Bill likely will get you close to exhausting your benefits and triggering the automatic \$1,200 refund.
- If you’ve earned some credits while in uniform: If your credits add up to a year or more and you won’t use up all of your months of Post-9/11 GI Bill benefits completing a four-year degree, you could plan to finish your bachelor’s and then pursue a master’s degree with your remaining months. Alternatively, if you’ve served at least six years and plan to commit to four more, you can elect to share some or all of your Post-9/11 GI Bill benefits with your spouse, or with your children if you’ve served at least 10 years.
- If you already have a degree: You could pursue an advanced degree — these often translate to higher salaries and better civilian job prospects — and still transfer a portion of your benefits to a spouse or child if you meet the service requirements.
- If you want a vocational or technical degree: These degrees, which typically take two years or less to complete, could leave you with benefits to spare, meaning you wouldn’t trigger the \$1,200 refund. In this case, think about earning multiple credentials: Pair welding with aircraft manufacturing and avionics, for example.

Military officials said they believe there are still some situations in which the Montgomery GI Bill would be better than the Post-9/11 plan. Students attending low-cost schools in low-rent areas could pocket some money under the old program, and they would also have the possibility of qualifying for an extra year of benefits. “If you want your most options available — that doesn’t paint you into a box — Montgomery GI Bill is the best way to start,” said Master Sgt. John Haley, an Air Force education benefits instructor supervisor. The Montgomery GI Bill pays up to \$1,473 per month directly to the student, unlike the Post-9/11 GI Bill, which is tied to actual tuition and fee rates and paid to the school. Rates increase each year; on Oct. 1, the maximum monthly MGIB payment will increase to \$1,564. So in some cases, such as students enrolled at low-cost community colleges in rural areas where housing costs are low, it’s possible to pocket a little cash with the MGIB.

But the biggest gap between the programs vanished last year when Congress expanded the Post-9/11 GI Bill to cover vocational and technical training, which previously had been covered by the MGIB only. With that, veterans advocates say, the Post-9/11 GI Bill is the clearly superior benefit in all but the rarest of circumstances. “There’s no need for [recruits] to have their pay reduced \$1,200 the first year that they put on the uniform of the United States,” said Robert Norton of the Military Officers Association of America. “All of them should be encouraged to opt out of the old GI Bill.” Opting out is not so easy. The law and Pentagon policy dictate that recruits can opt out of the Montgomery GI Bill only within their first two weeks of basic training. But given the stresses of those first days of training, these mostly 18-, 19- and 20-year-olds may be unlikely to say or do anything that might bring them undue

attention. Nor are they likely to understand the nuanced differences between the benefits or to make wise financial decisions when their heads are spinning from the shock of their sudden immersion into military life. “It really doesn’t make much sense,” said Michael Dakduk, a former Marine who used tuition assistance and the GI Bill to get his degree and is now executive director of Student Veterans of America. “That’s just mind-boggling.”

Once a service member is enrolled in the old program, the paycheck deductions continue for the entire first year and can’t be stopped. To complicate the decision just a bit more, troops are also informed of their option to pay an additional (nonrefundable) \$600 into the Montgomery GI Bill — known as a “kicker” — to get \$5,400 in additional benefits. It sounds like a great deal — but even that extra money is unlikely to make the Montgomery GI Bill more valuable than the Post-9/11 GI Bill. Throughout the services, about nine in 10 recruits have been enrolled in the Montgomery GI Bill — except for those at Marine Corps Recruit Depot Parris Island, S.C. In 2010 and 2011, the number of recruits at Parris Island opting out of the Montgomery GI Bill barely hit double digits. But this year, more than 6,200 recruits— 60 percent of Parris Island’s graduates through August — have declined the old program. In contrast, only 10 new Marines at Marine Corps Recruit Depot San Diego declined the Montgomery GI Bill over the same period. According to descriptions provided by a Marine Corps official, the discrepancy may be a result of different education benefit briefings at each depot. Parris Island provides a chart comparing the benefits of the two GI Bill programs, and recruits have time to consider the options and decide on the spot. San Diego provides “brief descriptions” of the programs but doesn’t ask recruits to choose until days later.

Every other place that trains recruits is signing them up for the Montgomery GI Bill by the thousands. Both the Navy and the Air Force enrolled 88 percent of 2012 recruits in the old program, more than 35,000 in all. And the Army was even worse, enrolling 99 percent, or nearly 61,000 recruits, in the Montgomery GI Bill during this fiscal year, according to Army data. In fact, the percentage of Army recruits enrolled in the Montgomery GI Bill has steadily increased since 2010. Army officials would not speculate on the reason. Navy and Air Force officials who help explain GI Bill benefits said they can’t recommend that troops sign up for either program and must leave it to individuals to decide on their best fit. “We’re not allowed to sell one or the other,” said Navy Petty Officer 1st Class Carl Latorre, who advises recruits at Naval Station Great Lakes, Ill. “We can’t even tell [recruits] which one we have.” But an Army master sergeant who briefs recruits on GI Bill benefits expressed no such reservations. He said signing up for the Montgomery GI Bill is a “no brainer” and he “absolutely” recommends that recruits do so. But the master sergeant expressed the incorrect belief that recruits must pay into the Montgomery GI Bill to become eligible later for the Post-9/11 GI Bill.

In fact, Post-9/11 GI Bill eligibility is based solely on cumulative active-duty time since Sept. 11, 2001. Anyone who completes three years of active duty after that date qualifies for full Post-9/11 GI Bill benefits, even if they never paid into the Montgomery GI Bill. The master sergeant might have been confused by another wrinkle in the law, one that allows troops who use up all their Montgomery GI Bill benefits to qualify for an additional 12 months of Post-9/11 GI Bill benefits. But even that extra year won’t make up the difference in the programs, notes MOAA’s Norton. Norton acknowledged that the Montgomery GI Bill may be a slightly better deal in areas with very low living costs, but he characterized that as a rare exception. Troops and vets, meanwhile, seem to figure that out on their own pretty quickly. The number of people actually using Post-9/11 GI Bill benefits has soared since that program began, while the number using the Montgomery GI Bill is plummeting. “What are veterans doing?” Norton asked. “They’re following the money.”

The services point out that they follow current law in continuing to make the Montgomery GI Bill the default choice for recruits and that any changes would have to come from Congress. Both the MOAA’s Norton and SVA’s Dakduk said Congress should simply eliminate the Montgomery GI Bill. Norton speculated that Congress may be reluctant to give up all those \$1,200 buy-in fees. “For all those troops who don’t opt out, that is a cost-avoidance for the [government],” he said. “That’s 90,000 [per year] times \$1,200. That’s a chunk of change.” In fact, legislation drafted in late 2010 that led to major improvements in the Post-9/11 Bill originally included a proposal to kill the

Montgomery GI Bill. But that proposal was one of only a few dropped from the final legislation, probably because an overarching goal was to ensure that improvements to the new program did not add to the government's overall costs to provide GI Bill benefits. A spokesman for Sen. Jim Webb, the Virginia Democrat and former Navy secretary who was the driving force behind the creation of the Post-9/11 GI Bill, declined repeated requests for comment. Rep. Jeff Miller (R-FL), chairman of the House Veterans' Affairs Committee, and his staff also declined to directly respond to questions about the matter. Instead, Miller emailed a brief statement to Military Times lauding the GI Bill and saying that troops "need to be informed about their educational benefits" and should have "flexibility" in their pursuit of higher education. For too many, the necessary understanding comes well after they have already ponied up \$1,200 for a benefit widely advertised by recruiters and Congress as free. [Source: ArmyTimes | George Altman & Bethany Crudele | 10 Sep 2012 ++]

Military Alcohol & Medication Abuse: (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.)

On-base facilities that sell cheap alcohol to troops, Pentagon policies that allow controlled substances to be prescribed without tracking, and Tricare rules against covering current treatments for substance abuse are contributing to the military's growing alcohol and drug problem, an influential scientific panel said 17 SEP. Calling the increase in alcohol and medication abuse among troops since 2001 a "public health crisis," an Institute of Medicine (IOM) panel said the Defense Department's approach to alcohol abuse prevention and treatment is "outdated" and added the department has failed to follow its own clinical policies. "Some of the policies pertaining to substance abuse disorder, prevention, screening diagnoses and treatment were drafted over a decade ago and have not been revised to reflect the most current evidence in the field. The same is true of Tricare substance abuse disorder benefits," said Dr. Mary Oster, study director for the 352-page IOM report, "Substance Use Disorders in the U.S. Armed Forces." DoD and the Veterans Affairs Department "actually have very good guidelines. VA is following them. I don't know why [DoD isn't] following them," added Dr. Charles O'Brien, panel chair and director of the Center for Studies of Addiction at the University of Pennsylvania School of Medicine.

About 20 percent of active-duty personnel reported engaging in heavy drinking in 2008 and 47 percent said they binged regularly, up from 35 percent in 1998, according the most recent DoD survey of active-duty troops. Prescription drug abuse also increased: In 2002, just 2 percent self-reported having a problem; that figure doubled to 4 percent in 2004 and spiked by 2008 to 11 percent, according to the survey. Also, military physicians wrote nearly 3.8 million prescriptions for pain medication in 2009, four times the number as in 2001, according to the IOM. To reverse the trend, leadership must acknowledge these "alarming facts and combat them," the 14-member group of scientists and academicians said. The IOM report makes 12 recommendations aimed at slowing alcohol use, increasing screening and improving treatment for both alcohol and prescription medication abuse. Among the recommendations,

- The panel urged the Pentagon to take charge of programs to ensure consistency across the services, routinely screen in primary care settings to increase access to care and reduce stigma, and change rules that restrict Tricare from paying for drug substitution therapies like suboxone for opioid dependence and naltrexone for alcohol abuse.
- The services approve intensive outpatient therapy as an optional treatment over their current reliance on inpatient hospital therapy.
- Individual services should restructure their substance abuse counseling teams to place physicians or doctoral-level psychologists trained in substance abuse in charge of a multi-disciplinary group that also can treat service members for other mental health conditions such as post-traumatic stress disorder or depression.

- DoD also should enforce regulations on underage drinking, and reduce the number of outlets that sell alcohol on installations and limit the hours of operation for those that remain.

“We’re hoping the recommendations are very clear. And they are doable. If the military was to follow these recommendations, we’d see a big improvement,” O’Brien said. The IOM conducted the research at the request of Sen. Claire McCaskill (D-MO) following media reports on increased distribution of prescription pain medications at military facilities, rising rates of prescription drug abuse and allegations of misconduct at Fort Leonard Wood, Mo. Pentagon spokeswoman Cynthia Smith said DOD officials are analyzing IOM’s findings and will consider the panel’s input in making improvements as needed. “We want to do the right thing for the service member. If there are areas in need of improvement, then we will work to improve those areas. The health and well-being of our service members is paramount,” Smith said. The report did contain some good news, at least for an Army program that allows soldiers to receive confidential treatment for alcohol addiction. The Confidential Alcohol Treatment and Education Pilot, or CATEP — once controversial because it withholds information from a service member’s command — has helped at least 500 soldiers since it was introduced at three sites in 2009. Now offered on six posts, the program is restricted mainly by funding and availability of trained counselors. “CATEP appears to be worthy of expansion within the Army and could be considered as a strategy for addressing misuse of prescription opioids in addition to alcohol,” the report stated. [Source: MilitaryTimes | Patricia Kime | 17 Sep 2012 ++]

Student Loan Lawsuit: (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.)

A Minnesota National Guard officer has won a \$2.3 million settlement for herself and thousands of other troops in a class-action lawsuit against Citibank and The Student Loan Corporation. Maj. Lyndsey M.D. Olson challenged the way Citibank administered the student loans of service members who were entitled to an interest-rate reduction to 6 percent under the Servicemembers’ Civil Relief Act. She gets about \$7,500 of that \$2.3 million as the representative plaintiff in the lawsuit; the rest goes to other service members identified as being affected by the alleged actions. The plaintiff’s attorneys are awarded fees of \$650,000, so Citi’s tab will be closer to \$3 million. The attorneys’ fees are separate from the \$2.3 million being paid to service members. The lawsuit estimated the number of service members affected to be “in the thousands.” An attorney for Olson and a spokesman for Citibank, bound by the settlement agreement to keep mum, declined to specify how many troops are affected. The lawsuit was filed in the U.S. District Court for the district of Minnesota, and the settlement was announced Sept. 5. The amount each service member receives ranges from a minimum of \$50 to more than \$580, according to notices sent to service member informing them of the lawsuit. Citibank denied the allegations, and the court made no ruling about the merits of the allegations.

Olson began her active duty in 2005. She later informed Citibank (New York State) of her active-duty status, asking to have her interest rate on her student loan reduced to 6 percent. The Servicemembers’ Civil Relief Act requires lenders to reduce interest rates to 6 percent on loans that were entered into before a service member goes on active duty, as long as the service member provides notification and is materially affected by being called to active duty. Citibank informed Olson that in order to have her interest rate reduced, her loan had to be placed into forbearance. When lenders put student loans into forbearance, the borrower stops making payments or makes reduced payments for a period of time, but interest continues to accrue. Under the SCRA, additional interest does not accrue. Olson contended that the bank charged her more than 6 percent interest and compounded that extra interest over the remaining terms of the loan.

Service members who qualify to be included in the lawsuit were those who, between July 13, 2004, and Nov. 30, 2011, were in military service and had one or more loans that qualified for the SCRA interest rate reduction and had

their student loan placed into forbearance, and had provided written notice to Citibank of their military service. “The parties are pleased with the settlement,” said Vildan Teske, lead attorney for Olson. Teske is the contact for service members in the class action lawsuit, at <mailto:teske@crowderteske.com>. The lawsuit was filed against Citibank (New York State), Citibank N.A. and the Student Loan Corporation. Citibank (New York State) was merged into Citibank N.A. in 2003. Citibank largely exited the student loan business in 2010 by divestiture, according to Citibank spokesman Mark Rodgers. The bank sold its interest in the Student Loan Corporation. [Source: MilitaryTimes | Karen Jowers | 12 Sep 2012 ++]

Arlington National Cemetery Update 38: **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.)**

The House of Representatives voted 19 SEP to create a new memorial at Arlington National Cemetery to hold unidentifiable fragments or cremated remains of service members who died in combat zones or in the line of duty. Establishment of the Place of Remembrance was included in H.R.5948, a bill that also overhauls the assignment and removal of fiduciaries appointed to handle financial matters for veterans who cannot do so themselves. The bill passed by voice vote. The bill now goes to the Senate for consideration. Creation of a place to put unidentified and unidentifiable remains is one of the fallouts from the scandal involving the military’s mortuary at Dover Air Force Base, Del. Some bone fragments and ashes of service members that could not be identified by the mortuary ended up in a Maryland landfill. Since that incident was uncovered, the military has changed its procedures so that unidentified remains are buried at sea. Rep. Steve Stivers (R-OH), the chief sponsor of legislation, said this might be good for Navy and Marine Corps members, but internment on land should be an option. Under the bill, remains to be placed in the memorial would be restricted to service members who died while on active duty in a war or contingency operation, or in the line of duty. In most cases, burial would happen only after mortuary officials determine identification is not possible. However, the bill also allows for situations where fragments are collected after a burial service already has been held. Survivors might decide they do not want to be notified of additional fragments. Location and design of the Place of Remembrance would be left to the Army, which oversees Arlington National Cemetery. [Source: MilitaryTimes | Rick Maze | 19 Sep 2012 ++]

Vet Jobs Update 84: **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 ---**

One of the Senate’s chief deficit hawks complained 12 SEP that politicians were making false promises of jobs to veterans by discussing a bill that will never become law — and would provide only temporary work for veterans if it did. Sen. Tom Coburn (R-OK) was referring to S.3457, the Veterans Job Corps Act, which would devote \$1 billion over five years to creating law enforcement, firefighter and conservation jobs for veterans. The underlying idea is that once veterans are trained, some would find permanent employment. The measure, a pre-election priority for President Obama, was brought to the Senate floor for consideration without going through the normal legislative process. But Coburn noted that the legislation is “not going anywhere in the House of Representatives” and charged that “what we are really doing is passing a bill for political reasons.”

The Senate took up the measure on 11 SEP after a 95-1 procedural vote to at least begin debate, but it is unclear if any amendments will be considered or when a vote on final passage might come. Coburn said he doesn’t see the need for another expensive program like this. “We already have six veterans’ job programs. Not one of them has a metric on it to see if it is working. There has not been one hearing to see what the jobs program that we are running

now are doing. “Is this about veterans or is this about politicians?” Coburn said. “I suspect it is about politicians. I suspect it is about elections, not veterans.” Veterans already have hiring preference for permanent government jobs, he said, which are better than the temporary positions envisioned under the Veterans’ Jobs Corps bill. Coburn also complained that the measure is aimed at post-9/11 veterans but not other generations. “This is blatant discrimination,” he said. “One class of veterans is better than another class of veterans? Tell me how. Is somebody that died in the Vietnam War less honorable than somebody who has given their life in Afghanistan?” Rep. Bill Nelson (D-FL) the bill’s chief sponsor, said that the measure is aimed at post-9/11 veterans because the unemployment rate in August for this new generation of veterans is 10.9 percent, higher than the 6.6 percent jobless rate for all generations of veterans. [Source: MilitaryTimes | Rick Maze | 12 Sep 2012 ++]

Vet Jobs Update 85: Eager to shoot down President Obama’s legislative agenda just weeks before the election, Senate Republicans on 19 SEP blocked a measure that would have provided \$1 billion over five years to help veterans find work in their communities. The measure, which would have potentially created jobs for up to 20,000 veterans, was blocked on a procedural point by Republicans, who argued that the bill was unpaid for. Senator Patty Murray, a Washington Democrat and the bill’s main sponsor, said the bill would have covered the costs in part with fees on Medicare providers and suppliers who are delinquent on their tax bills. The procedural vote was 58 to 40; 60 votes would have been required to waive Republican objections.

The bill was opposed, by, among others, Senator Tom Coburn, Republican of Oklahoma, who said he believed the bill duplicated existing job programs for veterans that are not well run, and Senator Rand Paul, Republican of Kentucky, who has been seeking amendments on bills that would cut off funding to Egypt and to Pakistan until Pakistan freed Shakil Afridi, the doctor who helped the United States find Osama bin Laden. “It’s both shocking and shameful that Republicans today chose to kill a bill to put America’s veterans back to work,” Ms. Murray said in a statement. “At a time when one in four young veterans are unemployed,” she said, “Republicans should have been able, for just this once, to put aside the politics of obstruction and to help these men and women provide for their families.” She added that the vote was “stark reminder” that Mitch McConnell, Senate minority leader from Kentucky, and Senate Republicans “are willing to do absolutely anything to fulfill the pledge he made nearly two years ago to defeat President Obama. It doesn’t matter who gets in their way or which Americans they have to sacrifice in that pursuit, even if it’s our nation’s veterans.”

Some Republicans, five of whom voted for the bill, also seemed disappointed about the failure of legislation that had the veneer of bipartisan support. “These men and women have worn our uniform, shouldered the burden and faced unthinkable dangers in forward areas during a very dangerous time,” Senator Lisa Murkowski of Alaska said. The vote was met with a strong rebuke from the Iraq and Afghanistan Veterans of America. “Once again, this Congress let partisan bickering stand in the way of putting thousands of America’s heroes back to work,” said Paul Rieckhoff, the organization’s founder. “Lowering veteran unemployment is something both parties should be able to agree on – even in an election year.” [Source: New York Times | Jennifer Steinhauer | 19 Sep 2012 ++]

Veteran License Plates Georgia: Georgia offers a variety of specialty license plates for your vehicle. You may apply for a specialized tag at the Tax Commissioner's Tag Offices in the county in Georgia where you reside at the time you register your vehicle or at the time you renew your vehicle's existing Georgia tag. If the special tag is in your county's inventory and you meet all the requirements for issuance, the tag can be issued to you at that time. If the tag is not in your county's inventory, a temporary operation permit can be issued for your use in operating your vehicle until the tag becomes available for issuance. To obtain you must meet all of the

requirements of vehicle registration (i.e. Provide proof of Georgia liability insurance coverage, pay all registration fees and applicable ad valorem taxes, etc.) Specialized tags can only be issued to vehicles weighing 14,000 lbs. or less that are owned by Georgia residents. Specialized tags are not manufactured as souvenirs. To claim the tag, you must be a resident of this state and register your vehicle with the special tag at the Tax Commissioner's Tag Office in the county in Georgia where you reside. If you decide to order one, you'll need the [application form](#). To view all the available Specialty plates refer to <http://motor.etax.dor.ga.gov/motor/plates/platesamples.aspx>. In the attachment to this bulletin titled, "**Vet License Plates GA**" can be viewed the 40 veteran related plates along with their cost and required documentation. [Source: <http://www.flhsmv.gov> Sep 2012 ++]

Stolen Valor Update 81: The House of Representatives on 12 SEP passed the Stolen Valor Act of 2011 (H.R.1775) which makes it a crime to knowingly benefit from lies about receiving military awards. The bill, introduced by Congressman Joe Heck (R-NV) in May of last year, makes a key change to the Stolen Valor Act of 2005 which was ruled unconstitutional by the Supreme Court on the grounds that it infringed upon free speech rights. Rep. Heck's bill, which unanimously passed the House Judiciary Committee on August 1, will withstand constitutional scrutiny because the legislation narrowly focuses on those who seek to benefit from their misrepresentations of receiving military awards - not the lie itself. Having passed the House, the bill now moves to the Senate for consideration where Senator Scott Brown's (R-MA) companion bill has bipartisan support. Rep. Heck's Stolen Valor Act of 2011 passed the House by a vote of 410 to 3.

"The need to protect the honor, service, and sacrifice of our veterans and military personnel is as strong today as it has ever been. Our service men and women who have been decorated - some of them posthumously - for their exemplary service and heroic sacrifice defending our nation and the freedoms we enjoy as Americans deserve the valor they displayed to be defended against those who would seek to benefit from lying about military decorations," Rep. Heck said. "The Stolen Valor Act of 2011 achieves this objective while ensuring we protect the constitutional liberties for which they fought. I urge the Senate to follow the strong bipartisan example set by the House and bring this bill to the floor for a vote." Some details on the bill are:

- The bill, as amended and passed by the House Judiciary Committee on August 1, 2012, exempts individuals who wear military medals or decorations that do not belong to them from penalties outlined in the bill. This was due to concerns raised in the United States v. Alvarez decision in which the SCOTUS stated that simply wearing medals was considered free speech.
- The new text enforces penalties against individuals who, with the intent to obtain money, property or anything of value, fraudulently hold themselves out to be recipients of a military decoration or medal.
- Under the bill, punishments against such individuals would include fines or imprisonment of no more than a year, or both. Previous text had higher crimes for Congressional Medal of Honor, Special operations service, and service in a Combat Zone. The new text makes the punishment uniform.

[Source: Trea News for the Enlisted 14 Sep 2012 ++]

Veteran Hearing/Mark-up Schedule: Following is the current schedule of recent and future 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>. Missed House Veteran Affairs committee (HVAC) hearings can viewed at <http://veterans.house.gov/in-case-you-missed-it>. Text of completed Senate Veteran Affairs Committee (SVAC) hearings are available at <http://www.gpo.gov/fdsys/browse/committee.action?chamber=senate&committee=va&collection=CHRG&plus=CHRG>:

- **September 21, 2012.** HVAC, Subcommittee on Disability Assistance and Memorial Affairs will conduct a hearing entitled "Breaking Through the Backlog: Evaluating the Efforts of the New State Strike Force Team." 10 AM; Cannon HOB.
- **October 3, 2012.** Joint House and Senate Veterans' Affairs Committees hearing on Legislative Presentation of the American Legion. 10:00 A.M.; 345 Cannon
- **Hearing being rescheduled:** House Veterans Affairs Committee Subcommittee on Economic Opportunity will be holding a hearing on October 4, 2012 on; State Approving Agencies Roles and Reviewing the Challenges of PL 111-377 Section 203. 10 A.M.; 334 Cannon

[Source: Veterans Corner w/Michael Isam 30 Sep 2012 ++]

WWII Vets Update 28: World War II veteran LoRae Unger arrived at a New York state Navy WAVES boot camp just months before the German army surrendered to the Allied Forces. "I just got into uniform when the Nazis gave up. I guess I scared them," said the 87-year-old Unger, who on April 15, 1944, her 20th birthday — the day she became eligible — enlisted in the United States Navy WAVES. The California native, who came to live in Brigham City Utah through marriage and a business she and her late husband had established there, served in the Navy for about 18 months. She was sworn in by then-U.S. President Harry S. Truman. Most of Unger's time was spent at Naval Air Station Banana River, north of Satellite Beach, Fla., before she was formally discharged in 1946. "They didn't put us overseas," she said of the women who joined the Navy WAVES (Women Accepted for Volunteer Emergency Service).

At Banana River, Unger said, she served as an instructor for combat crews stationed there. "I showed films. That was about it," said Unger, one of about 100 women among 10,000 men stationed at the base at the time. The films trained combat crews on how to identify various ships and planes the crews might come in contact with, Unger said. But before her days of operating a film projector at Banana River, the Brigham City resident was part of a singing platoon during her stay at Hunter College in New York, where Navy WAVES attended boot camp. Hunter College, now known as Lehman College, was in the Bronx. During the war it was commandeered by the Navy to serve as its WAVES boot camp. There, about 2,000 women every six weeks would attend the camp to receive basic military training. It was during her stay there, Unger said, that she became part of a platoon that performed throughout the New York area in an effort to raise money for war bonds. She said she can still recall singing in New York's Times Square at a war bond rally.

It was out of a love for her country, Unger said, that she served in the military. She hopes sharing her story will put her in touch with other women who may have served during the same period. So many of the World War II veterans are dying, Unger said, and she has lived such an interesting life, she would like to share her experiences with others. "I was 16 when the war started on Dec. 7, 1941. I'll never forget that day," Unger said of the bombing of Pearl Harbor. "It was frightening. We lived in California, and we had blackouts." The bombing of Pearl Harbor was one of the biggest reasons she eventually enlisted in the Navy, said Unger, who was doing defense work on radar systems when she eventually joined the WAVES. "I was just a kid when it started," she said of the war. "Those boys that were going over (to fly) were just kids," said Unger, who married twice after the war. Her second husband, Cody Unger, an Army Air Force veteran, is buried in Arlington National Cemetery in Virginia. "I love the

nation,” Unger said, “and it is kind of upsetting what is happening to it.” Unger said that to make this nation great, its leaders need to live more in accordance with the Ten Commandments, and the public needs to take a greater interest in voting.



LoRae Unger poses for a portrait at the Brigham City Senior Center

“World War II female veterans are rare,” said Terry Schow, director of the Utah Department of Veterans’ Affairs. There are about 30 living female World War II veterans in the state of Utah, said Gina Painter, Women Veterans Program Manager with the VA Salt Lake City Health Care System. [Source: Standard-Examiner Bryon Saxton article 23 Jul 2012 ++]

Korean War Vets: Although it’s called the “forgotten war,” those who were there will never forget. Jim Crouch, USMC, ret., 82, served as a machine gun squad leader in the Korean War. The Inverness resident and combat veteran says even after 40 years he will never forget “the forgotten war.”



Jim Crouch, USMC

“We landed on Inchon Beach by LST (landing barge) on Sept. 15, 1950,” recalled Crouch. “Because the LST could not reach the beach, we had to wade in the water — with full gear on — up to our arm pits. Our rifle squad leader

was killed by enemy fire before he could even get off the LST. “Once we were ashore, a battle took place immediately. The North Koreans were waiting for us. We secured Inchon overnight and the next day,” he said. After that came a bloody battle at Ammo Hill on the way to Seoul and then an even bloodier battle at Yong Dong Po. “That’s where I got hit by mortar shrapnel,” Crouch said. “Not real bad, but we had to keep going because we had to take Seoul the next day.” After Seoul, Crouch and his company met up with fellow Marines and the 31st Army regiment at the Yalu River where they got trapped at the Chosin Reservoir, surrounded by seven divisions of Chinese. “We fought day and night ... under extremely hard conditions. At times we were without water and food because it was 40 below zero and the canteens of water and the food froze,” he said. “Many of the men had frozen feet and were sick from the lack of rest and the cold. We were unable to bathe or even change our socks for weeks at a time.”

Crouch was 20 years old, a machine gun squad leader. He had joined the Marines in December 1947. One of seven brothers, Crouch was raised on a farm in Virginia. He joined the military at 17 to do something other than farm. He had six months left of his enlistment when the war broke out, and his hitch was extended a year. He had fought the Chinese at the Chosin Reservoir with injuries from when he was at Yong Dong Po — shrapnel wounds in his leg, back, neck and face. “It took its toll on me, wading through waist-high ice water,” he said. “After coming out of the reservoir I was sent to the USS Hope hospital ship for two or three weeks and then a hospital in Japan for three months. When I got out of the hospital they sent me back to my company. That was hard. I had to get used to being shot at and everything all over again.” He was honorably discharged Jan. 19, 1952. Sixteen days later Crouch’s younger brother was killed in the very same battle he had been in before he was sent home. “That was hard,” he said.

Crouch said when the servicemen returned from Korea there was no fanfare or welcome home, but neither did they experience being spit on or yelled at like the Vietnam War veterans. “There was just nothing,” he said. “You got your papers and you left.” He said he’s still waiting to receive his Purple Heart and Bronze Star from his time in service 60 years ago. “I didn’t go to any of the reunions for 40 years,” he said. “When I did go, that’s when we realized all that had been done to us. It was amazing. I saw guys I thought had been killed. For 40 years I tried not to think about the things that happened, but I never forgot. “Just before a mortar explodes, it makes a suction noise,” he said. “They say you couldn’t hear them, but I could.” [Source: Citrus County ChronicleE Nancy Kennedy article 27 Jul 2012 ++]

World War II Posters (14)





POW/MIA Update 28: "Keeping the Promise", "Fulfill their Trust" and "No one left behind" are several of many mottos that refer to the efforts of the Department of Defense to recover those who became missing while serving our nation. More than 83,000 Americans are missing from World War II (73,000+), the Korean War (7,900+), the Cold War (126), the Vietnam War (1,666), 1991 Gulf War (0), and OEF/OIF (6). Over 600 Defense Department men and women -- both military and civilian -- work in organizations around the world as part of DoD's personnel recovery and personnel accounting communities. They are all dedicated to the single mission of finding and bringing our missing personnel home. For a listing of all personnel accounted for since 2007 refer to http://www.dtic.mil/dpmo/accounted_for . 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. The remains of the following MIA/POW's have been recovered, identified, and scheduled for burial since the publication of the last RAO Bulletin:

Vietnam

- DPMO announced 7 SEP that the remains of Lt. Cmdr. **Edward J. Broms, Jr.**, 25, of Meadville PA, missing in action from the Vietnam War, have been identified and returned to his family for burial with full military honors. He was buried on Sept. 7, in Arlington National Cemetery near Washington, D.C. On Aug. 1, 1968, Broms was the pilot of an A-4C Skyhawk aircraft that crashed while attacking enemy targets in Ha Tinh Province, North Vietnam. Three other U.S. pilots in the flight did not witness the crash, and search-and-rescue teams found no sign of the aircraft or Broms. In 1993, a joint U.S./Socialist Republic of Vietnam (S.R.V.) team, led by the Joint POW/MIA Accounting Command (JPAC), traveled to Ha Tinh Province to

interview villagers and analyze leads. As a result, the team found and surveyed the crash site locating aircraft wreckage and military equipment. In addition, a villager turned over human remains that his father found at the site in 1968. The remains could not be identified given the technology of the time. During an excavation of the site in 1995, a second joint team located more aircraft wreckage but no additional remains. In 2011, given advances in DNA technology, the remains were reanalyzed. Scientists from JPAC and the Armed Forces DNA Identification Laboratory (AFDIL) identified the remains as Broms, using circumstantial evidence and mitochondrial DNA – which matched that of his mother and sister.

- DPMO announced 11 SEP that the remains of Air Force Lt. Col. **Clarence F. Blanton**, 46, of El Reno, Okla, missing from the Vietnam War, have been identified and will be returned to his family for burial with full military honors. He will be buried Sept. 15, in his hometown. In 1968, Blanton and 18 other men were assigned to Lima Site 85, a tactical air navigation radar site on a remote, 5,600-foot mountain peak known as Phou Pha Thi in Houaphan Province, Laos. In the early morning of March 11, the site was overrun by Vietnamese commandos, causing the Americans to seek safety on a narrow ledge of the steep mountain. A few hours later, under the protective cover of A-1 Skyraider aircraft, U.S. helicopters were able to rescue eight of the men. Blanton, who was the U.S. commander of the site, and 10 other Americans were killed in action and unable to be recovered. In 1994, a joint U.S. /Lao People’s Democratic Republic (L.P.D.R.) recovery operation, led by Joint POW/MIA Accounting Command (JPAC), took place near the top of Phou Pha Thi with negative results. A second recovery operation, in 2003, resulted in the discovery of remains which were subsequently identified as one of the missing U.S. servicemen—Tech Sgt. Patrick L. Shannon. Since that time, JPAC has evaluated the feasibility of conducting recoveries on Phou Pha Thi but logistics and safety concerns precluded further attempts. From 1994 to 2009, in cooperation with the Socialist Republic of Vietnam (S.R.V.) and L.P.D.R., teams pursued multiple leads from dozens of witnesses interviewed, including those involved with the attack. In 2005, a Laotian citizen provided U.S. officials an identification card bearing Blanton’s name and human remains purportedly found at the base of Phou Pha Thi. Scientists from the JPAC and the AFDIL determined the identity of the remains using circumstantial evidence and forensic identification tools, such as mitochondrial DNA—which matched Blanton’s sister. Today, 1,660 Americans remain unaccounted for from the Vietnam War. Since 1973, 986 servicemen have been accounted for from that conflict, and returned to their families for burial with military honors. The U.S. government continues to work closely with the governments of Vietnam, Laos, and Cambodia to recover Americans lost during the Vietnam War.

Korea

- DPMO announced 25 SEP The remains of a U.S. serviceman, missing in action from the Korean War, have been identified and will be returned to his family for burial with full military honors. Marine Pfc. **Richard S. Gzik**, 19, of Toledo, Ohio, will be buried Sept. 28, at Arlington National Cemetery near Washington, D.C. On Dec. 2, 1950, Gzik and the other Marines of M Battery, 11th Artillery Regiment, 1st Marine Division, came under attack on the west side of the Chosin Reservoir in North Korea. It was during this battle that Gzik was killed in action and his remains were buried alongside the road leading to Hagaru-ri. Later that month, the withdrawal of U.N. forces from the Chosin Reservoir region made it impossible to recover Gzik’s remains. In 1954, United Nations and Communist Forces exchanged the remains of war dead in what came to be called “Operation Glory.” All remains recovered in Operation Glory were turned over to the Army Central Identification Unit for analysis. Those which were unable to be identified, given the technology of that time, were interred as unknowns at the National Memorial Cemetery of the Pacific in Hawaii—the “Punchbowl.” In 2012, analysts from the Joint POW/MIA Accounting Command (JPAC) re-examined the case records and determined that advances in technology could likely aid in the identification of the unknown remains as Gzik. Once the remains were exhumed, scientists from JPAC used

circumstantial evidence and forensic identification tools, including dental records and radiographs, to validate Gzik's identification. Using modern technology, identifications continue to be made from remains that were previously buried as unknown. Today, 7,947 Americans remain unaccounted for from the Korean War.

World War II

- DPMO announced 24 SEP that the remains of a U.S. serviceman, missing in action from World War II, have been identified and will be returned to his family for burial with full military honors. Army Air Forces 2nd Lt. **Samuel E. Lunday**, 20, of Marianna, Fla., will be buried Sept. 28, at Arlington National Cemetery near Washington, D.C. On April 24, 1943, Lunday and four other U.S. servicemen were flying a C-87 Liberator Express aircraft over the Himalayan mountains, from Yangkai, China, to their home base in Chabua, India. After losing radio communications following take-off, the crew was never heard from again. Eleven aerial search missions were unable to locate the aircraft or crew due to intense snows on the mountains at high altitudes, and dense jungle growth at lower altitudes. As part of the war effort against the Japanese, U.S. Army Air Forces cargo planes based in India continually airlifted critical supplies over the high mountain ranges that comprise the Himalayas – known as “The Hump” – in support of American airbases in China. The amount of materiel flown over the Himalayas was a logistical achievement unparalleled at the time. Almost 60 years later, in 2003, an American citizen discovered the wreckage of the C-87 aircraft while trekking in the mountains, approximately 100 miles from Chabua, near the Burmese border. He recovered the aircraft's identification plate, military equipment and human remains. The artifacts and remains were turned over to U.S. officials for analysis. Attempts to excavate the site are being negotiated with the Indian government. To determine the identity of the remains, scientists from the Joint POW/MIA Accounting Command and the Armed Forces DNA Identification Laboratory used circumstantial evidence and mitochondrial DNA – which matched that of Lunday's nephews. Of the 16 million Americans who served in World War II, more than 400,000 died. Today, more than 73,000 are unaccounted-for from the conflict.

[Source: http://www.dtic.mil/dpmo/news/news_releases Sep 2012 ++]

Saving Money: Thinking about putting a Jacuzzi-style jetted whirlpool tub in your master bathroom. Don't do it. The cons far outweigh the pros. In fact, here are a whole gaggle reasons why jetted whirlpool tubs just aren't worth it:

- **They're expensive.** Trying to find a decent one for less than \$1500. And that's before adding in the costs required to have someone install it, assuming you aren't the do-it-yourself type. Then again, even if you are:
- **The manufacturers recommend you don't install them yourself.** For obvious reasons. Most people are simply better off getting a licensed general contractor, electrician, or 24-hour plumber who knows what they're doing.
- **They're not romantic.** On first blush the seductive thought of relaxing in a deep tub of warm water with your significant other, surrounded by lots of candles and rose petals, seems extremely romantic. It's not. One big reason why is because:
- **They're noisy.** The sound of the running motor and pump is not only a mood killer for those looking for a little romance, it also works against those simply looking for a little relaxation after a long hectic day too.

- **Bubble baths and whirlpool tubs don't mix.** If you aren't very careful, the water jets tend to cause a foaming issue, which can result in a bubble bath on overdrive. Besides:
- **They take too long to fill.** That's because they're so deep, which also means whirlpool tubs require a lot of water. So much so that:
- **They tend to completely drain traditional hot water tanks.** Larger whirlpool tubs can use between 50 and 80 gallons of hot water, which is bad news for the other people living in the house who may need hot water for other reasons while you're busy getting squeaky clean.
- **Before you know it, you're sitting in a tub full of cold water.** Well, unless your tub has a built-in heater. Then again, if it does, that heater, coupled with the whirlpool tub's pump motor, ends up leading to:
- **Higher energy costs.** Depending on the tub model, how often you use it, and the price of electricity, you could spend up to \$40 per month or more over a traditional soaker tub.
- **Ventilation concerns.** The larger amount of heat and moisture that is generated by whirlpool tubs can become a problem if the bathroom has inadequate ventilation.
- **Higher maintenance costs.** You'll be paying for those motors, pumps, and other electronic and mechanical parts that fail beyond the manufacturer's warranty period.
- **They're prone to algae growth.** Algae is a common problem with a whirlpool tub because, even after you've drained it, water tends to sit in its internal network of pipes, nozzles, and jets, thereby allowing it to grow. As a result:
- **They require frequent cleaning.** At least twice per month – unless you're the type that likes seeing bits of black and green algae floating in your bath water.
- Washing your hair or shaving in them isn't wise. At least it isn't if you plan on using the jets; that will only make cleaning even tougher than it normally is.
- **You'll hardly ever use it anyway.** (Because of the above listed reasons)
- **They don't add anything to your home's resale value.** Regardless what your real estate agent might tell you, for most people looking to buy a home, a whirlpool tub is not very high on their list of "must haves." And for good reason.

[Source: MoneyTalksNews Len Penzo article 26 Jul 2012 ++]

Purple Hearts Reunited Inc: Since the Supreme Court reversed a seven-year-old ban on buying and selling Purple Hearts, merchants have enjoyed a boom in business among collectors of military memorabilia. But one Afghanistan War veteran is determined to shoot down the rising transactions. The overturning of the Stolen Valor Act in June allowed for retailers to sell one of the military's most distinguished awards -- the Purple Heart, a medal given to servicemen and servicewomen who are killed or wounded in action, NBC reports. But while these merchants aren't breaking any laws, Zachariah Fike -- a Vermont Army National Guard captain -- has made it his mission to at least try and return the medals to their rightful owners before they're purchased. "I know I'm outnumbered on this -- there's hundreds of collectors selling them and buying them compared to one guy who's on this crusade," Fike told NBC News. "But if I can just reach one or two of these dealers and convince them to at least try to reunite the medals with the families of the recipients, well, then I've done some justice."

While Fike sees the buying and selling of Purple Hearts as an American tragedy, some sellers, like Scott Kraska, operator of BayStateMilitaria, view such transactions as a "celebration of America's good deeds" and contend that the medals have been willingly dropped off at vintage stores or posted on Internet shopping sites. But when a Purple Heart ends up with a price tag hanging off of it, oftentimes it's because the owner had no choice but to relinquish the hard-earned keepsake. Such was the case when an Afghanistan War veteran dropped off one of his two Purple Heart medals at a pawn shop in Holland, Mich., last November, according to the Holland Sentinel. "He was falling on hard times," Bryan VandenBosch, A-Z Outlet owner, told the news outlet. "He said the same thing everybody else who

comes in here says. He was short on funds.” In 19 years of business, it was the first time VandenBosch had seen a Purple Heart come through his doors. And he wasn’t willing to make his first sale. The dutiful owner said he would hold onto the medal, just in case the vet returned to get it out of hock.

Gary Chasin, a pawn shop buyer in Columbus, Ohio, had the same reaction when a seller, who claimed to have found a Purple Heart on the street, wanted to make a profit, NBC4i.com reports. While Chasin, was willing to buy it, he only did so, so that he could at least try to track down the owner. "It doesn't belong in this shop and I'd like to return it," Chasin told the news outlet. While VandenBosch and Chasin aren’t inclined to make money off of a military member’s sacrifice for his or her country, sites — like Kraska’s -- are making a pretty penny. On BayStateMilitaria.com, Purple Heart medals fetch somewhere between \$90 and \$395, according to NBC. For Fike, though, a collector who scours the Internet and antique stores for Purple Hearts, reuniting owners with their lost medals is a priceless opportunity.

After Fike received a Purple Heart from his mother, one that she had found at an antique shop, he realized his mission, which eventually evolved into his nonprofit, Purple Hearts Reunited Inc. (PHRI), in JUL 2012.NPR. After some extensive researching, Fike learned that the medal belonged to Corrado A.G. Piccoli, an Italian translator for the Army during WWII who was killed in action. He also eventually tracked down his sister Adeline Rockko. Though her family didn’t know the medal was missing, Rocko never lost track of how much it meant to her. “But as I grew older," she told the news outlet, "and missed my brother more and more, I realized, Well, this is the only tangible thing that we have left." For more information on Purple Hearts Reunited and what it has accomplished to date refer to <https://www.facebook.com/pages/Purple-Hearts-Reunited-INC/252965351489307>. [Source: Huff Post Impact article 20 Sep 2012 ++]

Notes of Interest:

- **COLA Watch.** The Consumer Price Index (CPI) jumped 0.7% in August. As of now, inflation is up 1.7% for the year. The 2013 COLA will be based on the CPI average from July through September.
- **CA Vets.** According to the state DVA as of 2012, there are approximately 1,865,342 veterans currently living in California, of those, 165,439 are females. According to Housing California about 26% of all the homeless in California are veterans. California has the highest number of homeless veterans in the country, according to the organization.
- **Neil Armstrong.** The cremains of the first man to walk on the moon were Buried at Sea during a burial at sea service aboard the USS Philippine Sea (CG 58), Friday, Sept. 14, 2012.



- **FEHBP.** Premiums for nonpostal enrollees in the Federal Employees Health Benefits Program will increase an average of 3.4 percent in 2013, the Office of Personnel Management announced 20 SEP. The average health care premium increase for U.S. Postal Service employees for 2013 will be 3.8 percent.
- **Housing.** The average time to sell a house now in the U.S. is 84 days.

- **VA Telehealth.** The Department of Veterans Affairs has confirmed in the Federal Register that in-home video telehealth care is not subject to copayment requirements.
- **VocRehab.** Under a new policy, if a college requires health insurance for all of its students, the Veterans Affairs Department will cover the costs for former service members attending under the Vocational Rehabilitation Program.
- **Suicide.** Since 2009 more Americans commit suicide than die in car crashes, making suicide the leading cause of injury deaths. More than 37,000 Americans killed themselves in 2009.
- **Hero's Welcome.** Check out http://www.youtube.com/embed/TNJ9umv10EM?feature=player_detailpage.
- **Elections.** For the first time in almost 80 years none of the 4 major candidates for President and Vice President have served in the military. The last time was 1932 (Hoover vs. FDR) Neither man served in the military However both were heavily involved in the First World War in civilian positions (Mr. Roosevelt was Assistant Secretary of the Navy from 1913 through 1920 while Mr. Hoover ran America's European relief efforts from 1913 through 1921.)
- **Cable TV.** The average customer rating score for the cable TV industry is 66 out of a possible 100 making it the third-lowest rated of all the industries in customer satisfaction. It is topped by only the airlines (65 out of 100) and newspapers (64 out of 100).



[Source: Various 15-30 Sep 2012 ++]

Medicare Advantage Plans Update 06: Medical treatment under Medicare can be unexpectedly costly if you are not familiar with the rules under which the Advantage Plan insurer you selected plays. If you are unhappy with that insurer's rules you are limited as to when you can change your Medicare health plan during the year (this is known as lock-in). Changes can only be made during ACEP which is 15 NOV thru 31 DEC of every year, OEP, or SEP periods/circumstances. You can get free counseling to help unravel your medical bills from your State Health Insurance Assistance Program (SHIP). To get the contact number of a SHIP counselor in your area, check online for the contact information at <http://www.shiptalk.org> or call 1-800-MEDICARE (1-800-633-4227). What you pay out-of-pocket depends on a number of factors that include the following:

- **The type of Medicare Advantage Plan enrolled in.** In most Health Maintenance Organizations (HMOs), for example, you can only use doctors and other healthcare providers in your plan's network, except in an emergency. You may also need to get a referral from your primary care doctor. If your plan is a Preferred Provider Organization (PPO), you pay less if you use doctors and healthcare providers that belong to the plan's network and more if you use doctors and providers outside of the network. Under Private Fee-For-Service (PFFS) Plans, you can generally go to any doctor or healthcare provider, as long as they agree to accept your coverage. The plan determines how it will pay doctors and other providers.

- **Use of network providers.** If your doctor or other healthcare provider doesn't belong to the plan, the services provided may not be covered, or your costs could be higher. In most cases this applies to Medicare HMOs and PPOs.
- **Deductibles and cost sharing.** If your plan has a yearly deductible or any additional deductibles for the services your husband received, that may be a factor in the unexpectedly high cost. The deductible is the amount you must pay out-of-pocket before your plan covers the claim.
- **Plan fee structure.** If you are enrolled in a PPO, it may cover some portion of your husband's care from providers outside your plan's provider network. Some plans use Medicare's fee for a specific medical procedure as a base, and then multiply it by a certain percentage to develop the maximum amount that they will pay for that procedure. For example, your insurer may agree to pay 130% of the rate Medicare normally would pay for the visit. But even if your plan's out-of-network rate is higher than Medicare's fee schedule, it could still be less than what you are charged. This is particularly true for specialties like surgery and anesthesiology, as well as outpatient services like radiology and lab visits. *For Example: If Medicare would normally pay \$1,000 for the procedure and your insurer pays up to \$1,300, you pay any uncovered balance. If your provider charged \$2,000, and your plan paid \$1,300 that leaves you to pay \$700. But if you had a \$1,000 deductible, you would be responsible for \$1,700.*

[Source: TSCl article 12 Sep 2012 ++]

Medicare Reimbursement Update 02: Despite cutting Medicare by more than \$600 billion over the past two years, the program remains the target of Congressional deficit reduction plans. Budget experts are pressing Congress to move — and soon — to avoid a fast-approaching federal budget crisis that could erupt by year end. Proposals are under debate that would transform Medicare from a program that guarantees coverage for a fixed set of benefits, to one that guarantees a fixed federal payment to cover a portion of beneficiaries' healthcare expenses. According to a new poll conducted by the Senior Citizens League, seniors overwhelmingly oppose the widely – debated Medicare plans. Seventy percent of respondents said Medicare should not be changed, and only 13 percent supported changing the system.

The proposals would transform Medicare into a system of “premium support,” under which beneficiaries would receive a fixed amount of money to purchase their Medicare coverage. Proposals differ in how the payments for beneficiaries would be determined, and whether the Medicare fee-for-service system would remain a choice. Plans also differ in the extent to which the federal government would cap the contribution per beneficiary, as well as protections for low-income beneficiaries. Proponents say competition between plans could help reduce spending. But the Congressional Budget Office and Medicare's Chief Actuary have said that, while the proposals would save the federal government money, the main risk is in setting premium support levels too low. If that occurs, beneficiaries would have to pay a larger portion of their income to cover costs than they already do under current law.

Medicare Part B premiums are one of the most rapidly growing costs that seniors have. Since 2000 Medicare premiums have grown as fast as gasoline prices. A TSCl survey conducted in the fall of 2011 indicates that seniors already spend a significant portion of their Social Security benefits on Medicare costs. Thirty-six percent reported spending up to \$299 a month, a sum that's about one quarter of today's average monthly Social Security benefit. Another 27 percent of respondents to the survey reported spending up to \$599 a month, about half of the average monthly Social Security benefit. “Plans to further cut Medicare just don't add up,” says TSCl Executive Director, Shannon Benton. “Over the past two years, Congress has cut Medicare by one of largest amounts in the history of

the program,” she notes. “But that savings was not set aside to ensure Medicare’s financing,” Benton says. TSCL believes that should not be allowed to occur. “Before squeezing any more money out of beneficiaries, we believe Congress should be putting the squeeze on Medicare fraud, waste and abuse,” Benton says. To learn more about Medicare cuts contained in healthcare reform legislation, see “How Did the Supreme Court Decision About the Affordable Care Act Affect Medicare?” [Source: CBO Estimated Cost of the Affordable Care Act 11 Mar 2010, CBO Estimated Impact of Automatic Budget Enforcement Procedures in the Budget Control Act 12 Sep 2011, & TSCL 24 Sep 2012 ++]

Medicare Fraud Update 101:



- **Shelby NC** - Linda Smoot Radeker, 71, pleaded guilty 13 SEP to one count of health care fraud conspiracy and two counts of money laundering. Radeke’s health care scheme defrauded Medicaid of at least \$6.1 million over three years, according to the justice department. She is the wife of N.C. District Court 27B judge candidate Gwynn G. Radeker. The former licensed professional counselor, who was enrolled with North Carolina Medicaid, admitted she obtained fraudulent reimbursement payments from false claims submitted to the federal agency. She claimed to be the attending clinician for provided services when she wasn’t, according to the justice department. Court documents also state children were the primary Medicaid beneficiaries involved in Radeker’s scheme. Parents thought they were enrolling their children in after-school programs. Radeker used the pocketed Medicaid money to purchase \$500,000 in jewelry, a recreational vehicle (RV), a 2010 Lincoln MKS SUV, and a 2010 Ford Ranger valued at \$21,500. Radeker worked with co-conspirators, located in Cleveland and Gaston counties, who owned and operated the after-school programs used in the fraud. Bantavani gave limited details about how many co-conspirators are possibly involved. Defrauded money was only taken from Medicaid, Bantavani said. Radeker faces a maximum sentence of 10 years and a \$250,000 fine apiece for health care fraud conspiracy and money laundering charges.
- **Washington DC** - Senate Special Aging Committee will hold a hearing to examine Medicare prior authorization requirements for power mobility devices. A 2011 Inspector General’s report found that 80 percent of power mobility device claims did not meet Medicare criteria and should not have been paid. The hearing will review a 3-year demonstration project by the Centers for Medicare & Medicaid Services which required prior authorization for power mobility devices in the seven states where power mobility devices fraud is most common: California, Illinois, Michigan, New York, North Carolina, Florida and Texas. These seven states account for 43 percent of the annual Medicare spending on power mobility devices. In 2010, Medicare spending on power mobility devices accounted totaled \$606 million. The cost for the devices ranges from \$1,500 for scooters to \$3,600 for more complex power wheelchairs over the course of the rental period. Sen. Bob Corker (R-TN) ranking member of the Special Committee on Aging, will chair the hearing.

- Los Angeles** - Physician Assistant David James Garrison, 50, who stole the identities of doctors to write medically unnecessary prescriptions for expensive durable medical equipment (DME) and diagnostic tests was sentenced 18 SEP to serve 72 months in prison in connection with a \$18.9 million Medicare fraud scheme. In addition to his prison term, Garrison was sentenced to three years of supervised release and ordered to pay \$24,935 in restitution, jointly and severally with convicted co-defendants. In June 2012, after a two-week trial, a federal jury found Garrison guilty of one count of conspiracy to commit health care fraud, six counts of health care fraud, and one count of aggravated identity theft. The trial evidence showed that Garrison worked at fraudulent medical clinics that operated as prescriptions mills and trafficked in fraudulent prescriptions and orders for medically unnecessary DME and diagnostic tests that were used by fraudulent DME supply companies and medical testing facilities to defraud Medicare. Garrison wrote the prescriptions and ordered the tests on behalf of doctors whom he never met and who did not authorize him to write prescriptions and order tests on their behalf. The trial evidence showed that between March 2007 and September 2008, Garrison's co-conspirator Edward Aslanyan and others owned and operated several Los Angeles medical clinics established for the sole purpose of defrauding Medicare. Aslanyan and others hired street-level patient recruiters to find Medicare beneficiaries willing to provide the recruiters with their Medicare billing information in exchange for expensive, high-end power wheelchairs and other DME, which the patient recruiters told the beneficiaries they would receive for free. Often, the solicited Medicare beneficiaries did not have a legitimate medical need for the power wheelchairs and equipment. The patient recruiters then provided the beneficiaries' Medicare billing information to Aslanyan and others or brought the beneficiaries to the fraudulent medical clinics. In exchange for recruiting the Medicare beneficiaries, Aslanyan and others paid the recruiters a cash kickback for every beneficiary they recruited. The trial evidence showed that Garrison admitted to writing prescriptions for power wheelchairs and ordered diagnostic tests on behalf of approximately six different doctors, many of whom never met Garrison and never had a delegation of services agreement with him, as required by law. The trial evidence also showed that Garrison was paid up to \$10,000 a week in cash for his work at the clinics. As a result of this fraud scheme, Garrison and his co-conspirators submitted over \$18.9 million in false claims to Medicare and received \$10.7 million on those claims. Currently, Garrison is facing federal drug charges as a result of his alleged involvement with another medical clinic where medically unnecessary prescriptions for Oxycontin were distributed. Garrison is scheduled for trial on the federal drug charges on November 6, 2012. He is presumed innocent of the charges against him.
- Richmond VA** - Veronica Sharon Cunningham, 49, has been sentenced to 11 years and three months in prison for health care fraud and other offenses. A federal judge on 13 SEP also ordered her to pay more than \$6.6 million in restitution to Medicare, Medicaid and private insurance companies, as well as more than \$473,000 to the Internal Revenue Service. A jury in March convicted her on 26 counts of health care fraud, eight counts of falsifying patient health care records and one count of filing a false tax return. Cunningham owned and operated Community Neurological Services, which administered intravenous immune globulin to patients suffering from immune deficiency disorders. She regularly billed insurance companies and the Medicare and Medicaid programs for intravenous immune globulin not actually administered.
- Detroit MI** - Dr. Hicham Elhorr, 45, was charged and arrested 20 SEP in the Eastern District of Michigan for his alleged leading role in a \$40 million Medicare fraud scheme involving physician home visits and home health services. In addition to the arrest, law enforcement agents executed search warrants at three locations and seizure warrants for three bank accounts related to the scheme. According to a criminal complaint Elhorr masterminded a \$40 million scheme involving the submission of fraudulent claims submitted to Medicare for services that were medically unnecessary and/or never provided through House

Calls Physicians (HCP), a physician home visiting service he owned and operated. Elhorr allegedly submitted claims through HCP for physician home visits for patients who were never seen and for visits conducted by doctors who were not licensed. The complaint alleges Elhorr submitted claims to Medicare for physician home visits purportedly rendered when he was out of the country, when beneficiaries were hospitalized or when the beneficiary was dead. Elhorr is also alleged to have referred Medicare beneficiaries for medically unnecessary home health services, as well as accepted kickbacks from home health agencies in exchange for writing these referrals. According to court documents, since January 2008, HCP has billed Medicare for approximately \$9.2 million. In the same time period, HCP has allegedly referred Medicare beneficiaries for home health services that have resulted in approximately \$30.8 million of reimbursements from Medicare.

- **Las Vegas** - Radiation oncologist Dr. Navneet Sharda agreed to settle with the Justice Department to resolve civil allegations of health care fraud to the Medicare program. The agreement, effective Sept. 17, states that Sharda, who owns Cancer Care Center in Las Vegas, agreed to pay \$486,000 to the United States to resolve allegations that he improperly billed Medicare from January 2006 through March 2010. Sharda allegedly over billed federal health care insurance programs such as Medicare, Tricare and the Federal Employees Health Benefits program, by unbundling the billings for the treatments he provided. Unbundling is when a doctor splits the billing for a major procedure into several smaller procedures to obtain more money from the government than he or she is entitled to receive. The settlement states that it is neither an admission of liability by Sharda nor a concession by the United States that its claims are not well founded.

[Source: Fraud News Daily 1-14 Sep 2012 ++]

Medicaid Fraud Update 71:

- **Lincoln NE** - A former western Nebraska therapist has pleaded no contest to one count of Medicaid fraud. Nebraska Attorney General Jon Bruning says Jennie Miller, former of Chadron, entered the plea on Thursday in Dawes County District Court. Bruning says Miller claimed more than \$15,000 in Medicaid payments for services she did not provide. The plea stems from an investigation by the Attorney General's Office Medicaid Fraud and Patient Abuse Unit. The investigation showed Miller received \$15,629 for mental health services she claimed to have provided in 2009 in Chadron. But the investigation found she was jailed in Wyoming on unrelated charges at the time she claimed to have provided those services. Miller faces up to five years in prison when she's sentenced on Nov. 27.
- **Lansing MI** - A native of Africa who operated a medical practice out of an office on Main Street in Niles and an apartment in Berrien Springs has admitted he didn't have a valid license and that he committed sexual assaults on female patients, Michigan Attorney General Bill Schuette announced 26 SEP. Schuette said Charles Mosimbwa, 43, entered a guilty plea this week before Circuit Court Judge Clinton Canady in Lansing to one count of first-degree criminal sexual conduct, two counts of Medicaid fraud, one count of making false pretenses claims to Medicaid for an amount exceeding \$1,000 and one count of practicing medicine with a fraudulently obtained license. Mosimbwa is expected to receive a 5- to 20-year prison sentence when he's sentenced Oct. 24. According to Schuette, Mosimbwa submitted forged documents to obtain licenses to practice in Michigan as a medical doctor and registered nurse. When he was arrested on 8 MAR, Schuette's office asked that patients of Mosimbwa contact them regarding concerns stemming from their dealings with him. Calls from those patients revealed that he had used his guise as a physician to perpetuate sexual assaults during examinations of female patients, Schuette said. Schuette said Mosimbwa will be ordered at sentencing to compensate Medicaid and Medicare for payments received while he

fraudulently practiced medicine. The amount will be determined at a later date. After he serves his sentence, Mosimbwa, a citizen of Malawi, Africa, is likely to be deported, Schuette said.

[Source: Fraud News Daily 1-14 Sep 2012 ++]

State Veteran's Benefits: The state of Florida provides several benefits to veterans. To obtain information on these refer to the “**Veteran State Benefits – FL**” attachment to this Bulletin for an overview of those benefits listed below. Benefits are available to veterans who are residents of the state. For a more detailed explanation of each click on “**Learn more about ...**” wording highlighted in blue on the attachment.

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

[Source: www.military.com/benefits/veteran-benefits/florida-state-veterans-benefits Sep 2012 ++]

Military History: In all the stories you see and read about the Battle of Midway, the focus is on the surface and air activity. Yet one of the assets the Pacific fleet had plenty of were submarines. Submarine activity up until June 4th of 1942 had demonstrated capabilities beyond what the original concept was thought of. Certainly intercepting warships and merchant shipping would remain the most critical task of the enemy. A snapshot of the use of submarines in the Midway conflict can be found in the Naval Heritage and History submarine fleet. But many missions would keep the boats busy as the Navy decided the best course to pursue the Center’s Midway Plan of the Day Notes which are included in the attachment to this bulletin titled “**Battle of Midway Sub Action**”.

[Source: The Lean Submariner <http://theleansubmariner.com/tag/uss-tambor> Aug 2012 ++]

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

- Oct 00 1943 – WW2: USS Dorado (SS-248). Date of sinking unknown. Most likely either accidentally bombed and sunk by friendly Guantanamo-based flying boat on 13 October or sunk by a German submarine mine in the West Indies. 77 killed
- Oct 01 1951 – 24th Infantry Regiment, last all-black military unit, deactivated
- Oct 01 1957 – Cold War: B-52 bombers begin full-time flying alert in case of USSR attack.
- Oct 01 1992 – U.S. aircraft carrier Saratoga cripples Turkish destroyer TCG Muavenet (DM-357) causing 27 deaths and injuries by negligently launched missiles.
- Oct 02 1835 – The Texas Revolution begins with the Battle of Gonzales: Mexican soldiers attempt to disarm the people of Gonzales, Texas, but encounter stiff resistance from a hastily assembled militia.
- Oct 02 1864 – Civil War: Battle of Saltville – Union forces attack Saltville, Virginia, but are defeated by Confederate troops.
- Oct 02 1944 – WW2: Battle of Aachen Germany begins. Fighting for the city took place between 13–21 October.
- Oct 03 1940 – U.S. Army forms airborne (parachute) troops.
- Oct 03 1944 – USS Seawolf (SS-197) accidentally sunk by naval aircraft from USS Midway (CVE-63) and USS Richard M. Rowell (DE-403) off Morotai Island. 100 died
- Oct 03 1993 – Somalia Intervention: Battle of Bakhara Market, Mogadishu, Somalia

- Oct 05 1813 – War of 1812: U.S. victory at the Battle of the Thames in Ontario broke Britain’s Indian allies with the death of Shawnee Chief Tecumseh and made the Detroit frontier safe.
- Oct 05 1965 – Korea: U.S. forces in Saigon receive permission to use tear gas
- Oct 05 1966 – Vietnam: Hanoi insists the United States must end its bombings before peace talks can begin.
- Oct 05 2001 – GWOT: Operation Enduring Freedom began in Afghanistan.
- Oct 06 1971 – Vietnam: Operation Jefferson Glenn ends. The last major operation in which US ground forces participated.
- Oct 07 1777 – American Revolution: Americans beat Brits in 2nd Battle of Saratoga aka. Battle of Bemis Hts.
- Oct 07 1864 – Civil War: Battle of Darbytown Road: Confederate forces' attempt to regain ground that had been lost around Richmond is thwarted.
- Oct 07 1864 – Civil War: U.S.S. Wachusett captures the C.S.S. Florida Confederate raider ship while in port in Bahia, Brazil.
- Oct 07 1940 – WW2: the McCollum memo proposes bringing the United States into the war in Europe by provoking the Japanese to attack the United States.
- Oct 07 1943 – WW2: USS S-44 (SS-155). Lost to Japanese escort destroyer Ishigaki, northeast Araitō Island off Kamchatka. 56 killed
- Oct 07 2001 – GWOT: The U.S. invasion of Afghanistan starts with an air assault and covert operations on the ground.
- Oct 08 1918 – WW I: In the Argonne Forest in France, U.S. Corporal Alvin C. York leads an attack that kills 25 German soldiers and captures 132.
- Oct 08 1950 – Korea: Chinese Communist Forces begin to infiltrate the North Korean Army.
- Oct 08 1862 – Civil War: The Union is victorious at the Battle of Perryville, the largest Civil War combat to take place in Kentucky.
- Oct 08 1968 – Vietnam: U.S. forces in launch Operation Sealord, an attack on North Vietnamese supply lines and base areas in the Mekong Delta.
- Oct 09 1950 – Korea: The invasion of North Korea begins when U.N. forces led by the 1st Cav Div cross the 38th parallel and begin attacking northward towards the capital of Pyongyang.
- Oct 10 1812 – War of 1812: In a naval engagement on Lake Erie, American forces capture two British ships: HMS Detroit and HMS Caledonia.
- Oct 10 1845 – The U.S. Naval Academy is founded at Annapolis MD.
- Oct 10 1861 – Civil War: Battle of Santa Rosa Island – Union troops repel a Confederate attempt to capture Fort Pickens.
- Oct 10 1864 – Civil War: Battle of Tom's Brook – Union cavalrymen in the Shenandoah Valley defeat Confederate forces at Tom's Brook, Virginia.
- Oct 10 1941 – WW2: German U-boat torpedoes U.S. destroyer Kearney.
- Oct 10 1944 – WW2: U.S. takes Okinawa
- Oct 10 1966 – Vietnam: U.S. Forces launch Operation Robin in Hoa Province south of Saigon to provide road security between villages.
- Oct 11 1776 – American Revolution: Benedict Arnold’s Lake Champlain fleet defeated by the British.
- Oct 11 1845 – In Annapolis, Maryland, the Naval School (later renamed the United States Naval Academy) opens with 50 midshipman students and seven professors.
- Oct 11 1943 – WW2: USS Wahoo (SS-238) sunk by Japanese naval aircraft, submarine chasers Ch 15 and Ch 43, and minesweeper W.18 in La Perouse Strait off Japan. 80 killed.
- Oct 11 1944 – Holocaust: 800 Gypsy children are murdered at Auschwitz concentration camp.
- Oct 12 1861 – Civil War: Confederate ironclad Manassas attacks Union's Richmond.

- Oct 12 1915 – WWI: The Battle for the Hohenzollern Redoubt marks the end of the Battle of Loos in northern France.
- Oct 12 1942 – WW2: In the Battle of Cape Esperance near the Solomon Islands (Guadalcanal) U.S. cruisers and destroyers decisively defeat a Japanese task force in a night surface encounter.
- Oct 12 1943 – WW2: The U.S. Fifth Army begins an assault crossing of the Volturno River in Italy.
- Oct 12 2000 – Bombing of the USS Cole killing 17 crew members and wounding at least 39 by Al-Qaeda terrorists.
- Oct 13 1775 – American Revolution: The US Navy was established when the Continental Congress authorizes construction of two warships.
- Oct 13 1812 – War of 1812: At the Battle of Queenston Heights a Canadian and British army defeats the Americans who have tried to invade Canada.
- Oct 13 1942 – WW2: In the first of four attacks two Japanese battleships sail down the slot and shell Henderson field on Guadalcanal in an unsuccessful effort to destroy the American Cactus Air Force.
- Oct 14 1773 – American Revolution: The United Kingdom's East India Company tea ships' cargo are burned at Annapolis, Maryland.
- Oct 14 1863 – Civil War: Battle of Bristoe Station – Confederate General Robert E. Lee forces fail to drive the Union Army out of Virginia.
- Oct 14 1943 – WW2: U.S. 8th Air Force loses 60 B-17 Flying Fortresses during an assault on Schweinfurt.
- Oct 14 1952 – Korea: Battle of Hill 598 (Sniper Ridge).
- Oct 14 1962 – Cuban Missile Crisis begins: A U-2 flight over Cuba takes photos of Soviet nuclear weapons being installed.

[Source: Various Sep 2011 ++]

Military Trivia 59:

1. After their invasion, North Korean forces quickly captured the capital of Seoul on the _____ day of fighting.

5th | 15th | 2nd | 7th

2. United Nations forces were pushed to the southern edge of the Korean peninsula. They formed a defensive position known as the _____ perimeter.

Taejon | P'yongt'aek | Pusan | Wonju

3. Initially the Soviet Mig 15 was superior to U. S. fighters. The F-86 arrived and gained air superiority. The F-86 was nicknamed the _____.

Shooting Star | Sabre | Thunderjet | Delta Dart

4. Operation Chromite, an amphibious assault at _____ helped to trigger UN counter-offensive operations.

Inchon | Seoul | Pusan | Suwon

5. Gen. MacArthur was in command of UN forces until relieved by President Truman. Who was his replacement?

Gen. Clark | Gen. Van Fleet | Gen. Ridgway | Gen. Douglas

6. Helicopters were used to transport seriously wounded to medical care. Although other were also used the most well known MASH helicopter was the Bell H-13 _____.

Choctaw | Iriquois | Sioux | Kiowa

7. During the war US soldiers were often bombarded with propaganda from _____.

Seoul City Sue | Pusan Patty | Yalu Rose | Inchon Sally

8. Mig alley was the site of many dogfights between UN and communist forces. The general location was the northwest border of Korea along the _____ river.

Yellow | Han | Yalu | Yongsan |

9. Over 20 nations sent troops or medical teams to assist S. Korea. Which of these did NOT do so?

Ethiopia | Pakistan | Luxembourg | Colombia

10. The Armistice, or cease-fire ending the war was signed on July 27, 1953 in the village of _____.

Daeseong-dong | Panmunjom | Kaesong | Uijeongbu

ANSWERS:

1. The **5th**. N. Korea began their invasion on the 25th of June, 1950. Seoul fell on the 29th.
2. **Pusan**.
3. **Sabre**. The F-80 shooting star was 1st operational jet aircraft used by the USAF. The F-84 Thunderjet was also in use in Korea. The F-106 delta dart was the USAF's primary interceptor aircraft in 60's and 70's.
4. **Inchon**. - A force of nearly 70,000 men and over 300 warships took part in the operation.
5. **Gen. Ridgway**. Gen. Walker was 8th Army commander until his death in a jeep accident. Ridgway took his position until appointed as UN commander. Van Fleet took Ridgway's vacant 8th Army command. Clark eventually succeeded Ridgway.
6. **Sioux**. The Iroquois became better known as the "Huey", a common sight in Vietnam. The Kiowa is used for observation and the Choctaw serves many roles including troop transport.
7. **Seoul City Sue**. The others named did not exist. Her real name was Anna Wallis Suh (1900-1969) and she had originally gone to the Far East as a missionary.
8. **Yalu**. The Han river flows through Seoul. The Yellow river is in China and Yongsan has served as a US Army post since the end of WWII.
9. **Pakistan**. UN resolution 83 recommended countries send assistance following the invasion from the North Koreans.
10. **Panmunjom**. Daeseong-dong is the only S. Korean village within the DMZ. Kaesong was in S. Korea before the war, moved into N.korea by the establishment of the DMZ, the only village to change hands. Uijeongbu is in S. Korea very near the DMZ.

[Source: <http://www.funtrivia.com/playquiz/quiz319223248b8d0.html> Sep 2012 ++]

Tax Burden for New York 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. States raise revenue in many ways including sales taxes, excise taxes, license taxes, income taxes, intangible taxes, property taxes, estate taxes and inheritance taxes. Depending on where you live, you may end up paying all of them or just a few. Following are the taxes you can expect to pay if you retire in **New York**:

Sales Taxes

State Sales Tax: 4.0% (food, prescription and non-prescription drugs exempt); Other taxing entities (cities and counties) may add up to 5.00% in additional sales tax.

Gasoline Tax: 49.0 cents/gallon

Diesel Fuel Tax: 49.5 cents/gallon

Cigarette Tax: \$4.35/pack of 20; New York City adds an additional \$1.50.

Personal Income Taxes

Tax Rate Range: Low – 4.0%; High - 8.97%. The state has enacted two new temporary income tax rates in its 2010 budget levied on the highest-income filers. For households with taxable income above \$500,000, regardless of filing status, the tax rate rises to 8.97 percent from 6.85 percent; for those with taxable income below \$500,000 but above \$200,000 for single individuals, \$250,000 for heads of households, and \$300,000 for married couples filing joint returns, the rate increases to 7.85 percent from 6.85 percent. You are entitled to a [household credit](#) if you are single and have an adjusted gross income of \$28,000 or less, or married with AGI of \$32,000 or less.

Income Brackets: Five. Lowest – \$8,000; Highest – \$500,000. For joint returns, the taxes are twice the tax imposed on half the income.

Personal Exemptions: Single – \$0; Married – \$0; Dependents – \$1,000

Standard Deduction: Single – \$7,500; Married filing jointly – \$15,000; Dependents – \$3,000

Medical/Dental Deduction: Federal amount

Federal Income Tax Deduction: None

Retirement Income Taxes: Social Security, military, civil service, New York state/local government pensions are exempt. Also, up to \$20,000 of qualified private pensions for those 59½ and older. Out-of-state government pensions can be deducted as part of the \$20,000 exemption. For more information on senior citizen and retiree benefits, [click here](#).

Retired Military Pay: Exempt from taxes.

Military Disability Retired Pay: Disability Portion – Length of Service Pay: Member on September 24, 1975 — No tax; Not Member on September 24, 1975 — Taxed, unless combat incurred. Retired Pay – Based solely on disability. member on September 24, 1975 — No tax. Not Member on September 24, 1975 — Taxed, unless all pay based on disability, and disability resulted from armed conflict, extra-hazardous service, simulated war, or an instrumentality of war. For information on taxes for military personnel in New York State, [click here](#) and [here](#).

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

Property taxation is limited to real property. New York State law gives local governments and public school districts the option of granting a reduction on the amount of property taxes paid by qualifying senior citizens. This is accomplished by reducing the assessed value of residential property owned by seniors by 50%. To qualify, seniors must be 65 years of age or older and meet certain income limitations and other requirements. For the 59%

exemption, the law allows each county, city, town, village or school district to set the maximum income limit at any figure between \$3,000 and \$24,000. Localities have the further option of granting an exemption of less than 50% to senior citizens whose incomes exceed the local income limit by less than \$1,000 in three income ranges or \$900 in six other income ranges. For example, in a community that has taken this “sliding-scale” option and has adopted the \$21,500 income maximum, an eligible resident whose income is more than \$21,500 but less than \$22,500, is entitled to a 45% exemption. If a person’s income is more than \$29,000 but less than \$32,400, the exemption is 5%. For more information refer to <http://www.tax.ny.gov/pdf/publications/income/pub22.pdf>.

There is no general, statewide homestead property tax exemption. However, a taxpayer’s primary residence may be partially exempted from school taxes under the state’s School Tax Relief Program (STAR) program. Seniors can take advantage of this program that provides a partial exemption from school property taxes. All New Yorkers who own and live in their one-, two-, or three-family home, condominium, cooperative apartment, manufactured home, or farm dwelling are eligible for a STAR exemption on their primary residence. For more information refer to <http://www.tax.ny.gov/pit/property/star/index.htm>.

There are three parts to the STAR program:

The Basic STAR exemption is available for owner-occupied, primary residences regardless of the owners’ ages or incomes. It works by exempting the first \$50,000 of the full value of a home from school taxes if a senior citizen’s income in 2009 was under \$79,050 and at least \$30,000 for all other homeowners. [Click here](#)

The Enhanced STAR exemption is available for the primary residences of senior citizens (age 65 and older) with yearly household incomes not exceeding the statewide standard. For qualifying senior citizens, the Enhanced STAR program works by exempting the first \$62,200 of the full value of their home from school property taxes. For property owned by a husband and wife, or by siblings, only one of them must be at least 65 years of age as of December 31 of the year in which the exemption will begin to qualify for the Enhanced exemption. Their combined annual income, however, must not exceed the STAR income standard. Call 877-678-2769 for details.

For general information on senior citizen and retiree benefits in New York refer to <http://www.tax.ny.gov/pdf/publications/income/pub36.pdf>.

Inheritance and Estate Taxes

There is no inheritance tax. Regarding the estate tax, if the date of death is on or after January 1, 2004, the estate must file a New York State estate tax return if any one of the following conditions are met: (1) The decedent was domiciled in New York State at the time of death and the total of the federal gross estate, federal taxable gifts and specific exemption exceeds \$1 million; (2) The decedent was not domiciled in New York State at the time of death and the estate includes real or tangible personal property with a situs in New York State, and the total of the federal gross estate, federal taxable gifts and specific exemption exceeds \$1 million; or (3) The decedent was neither a resident nor a citizen of the United States, the estate includes real or tangible personal property with a situs in New York State, and the estate is required to file a federal estate tax return. For more information refer to <http://www.tax.ny.gov/pit/estate/etidx.htm>.

For further information, visit the New York Department of Taxation and Finance site <http://www.tax.ny.gov>.

[Source: <http://www.retirementliving.com> Sep 2012 ++]

Aviation Art (14):



First Re-Entry by Mike Machat

June 29th, 1965, Edwards Air Force Base. Capt. Joe Engle returns from a high altitude X-15 mission in the which he has just qualified as an astronaut. [Source: <http://www.brooksart.com/1stre-entry.html> Sep 2012 ++]

Veteran Legislation Status 28 SEP 2012: With the House planning to go into recess 22 SEP until after the elections, senators and representatives scrambled with varying degrees of success to get some final legislating done. Keeping the Government Running: House and Senate leaders have agreed on a six-month continuing resolution (H.J. Res. 117) to keep the government funded until April 1, 2013. The House has passed it, and the Senate is expected to before they recess. Action on other legislation of interest to veterans was:

- **FY2013 Defense Authorization Bill:** The House passed this key bill (including important caps on TRICARE pharmacy copay hikes) back in May, but the Senate won't act on it until after the election. This week, Senate Armed Services Committee Chairman Carl Levin said the number of amendments will have to be limited, given the short time the Senate will have to pass it. That could be bad news for MOAA-supported amendments on concurrent receipt, SBP, and more.
- **Veterans Job Corps Bill:** Chances for legislation to enhance veteran hiring (S. 3457) died in the Senate when partisan disagreements couldn't be resolved. Sponsor Sen. Patty Murray, D-WA, included all of Sen. Richard Burr's (R-NC) alternative proposals in the bill, but it fell two votes short of the required 60, on a party-line vote after only five Republicans joined all Democrats in supporting it.
- **Veteran Hiring Incentives:** S. 3536 (Mikulski and Cardin, both D-MD) introduced a bill to extend tax incentives for employers to hire veterans to 2016. Current authorities expire in December.
- **Stolen Valor Act:** The House approved H.R. 1775 (Heck, R-NV), which would make it illegal to reap financial gain from false claims regarding the Medal of Honor and certain other military decorations.

The Senate Veterans Affairs Committee approved a number of bills of interest, including:

- S. 3340 (Murray, D-WA) would require the VA to reduce wait times for mental health care services; expand such care for families of deployed servicemembers; and expand outreach efforts to improve mental health care access. It also would put Clark Veterans Cemetery in the Philippines under the American Battle Monuments Commission.
- S. 2241 (Murray; Webb, D-VA; Merkley, D-OR; Lautenberg, D-NJ) would strengthen oversight of all colleges serving GI Bill students by expanding consumer protections for student veterans, banning deceptive advertising; and establishing counseling requirements. It also would extend Post-9/11 GI Bill eligibility to surviving spouses.
- S. 3322 (Brown, D-OH) / S. 2299 (Murray) would extend mortgage foreclosure protections to servicemembers in combat zones; surviving spouses of personnel who die on duty, and 100% disabled medical retirees. It also authorizes suits against banks, landlords and businesses that violate Servicemember Civil Relief Act protections.
- S. 2259 (Tester, D-MT) would authorize a COLA for VA disability and survivor annuitants at the same percentage as the retired pay COLA.

Members of the do-little Congress disbanded until 13 NOV with one collective hope. They are hoping Election Day delivers a clear message about what the county wants out of Washington, and they are signaling a willingness to try to start delivering it before the end of the year. Republicans are conceding that an Obama victory, especially if accompanied by continued Democratic control of the Senate, would require them to make concessions on taxes — meaning acquiescing in some higher income tax rates on millionaires in 2013, for starters. Democrats are conceding that a Romney win, particularly if the GOP picks up the four Senate seats needed to claim the majority, will at a minimum require them to yield on more domestic spending cuts without much pain for the Pentagon. Both parties are saying that even marginal gains by either side should be interpreted as a mandate for the winning party to start advancing its version of change in November and December, even before the new Congress convenes and the presidential winner takes the now-under-construction inaugural stage on the West Front.

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/bss/d111/sponlst.html> 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. [Source: <http://www.loc.gov> Sep 2012 ++]

Have You Heard? The 2012 Darwin Awards are out ! It's that magical time of year again when the Darwin Awards are bestowed, honoring the least evolved among us.

Here is the glorious winner:

1. When his .38 caliber revolver failed to fire at his intended victim during a hold-up in Long Beach, California would-be robber James Elliot did something that can only inspire wonder. He peered down the barrel and tried the trigger again. This time it worked.

And now, the Honorable mentions:

2. The chef at a hotel in Switzerland lost a finger in a meat cutting machine and after a little shopping around, submitted a claim to his insurance company. The company expecting negligence sent out one of its men to have a look for himself. He tried the machine and he also lost a finger.. The chef's claim was approved.

3. A man who shoveled snow for an hour to clear a space for his car during a blizzard in Chicago returned with his vehicle to find a woman had taken the space. Understandably, he shot her.

4. After stopping for drinks at an illegal bar, a Zimbabwean bus driver found that the 20 mental patients he was supposed to be transporting from Harare to Bulawayo had escaped. Not wanting to admit his incompetence, the driver went to a nearby bus stop and offered everyone waiting there a free ride. He then delivered the passengers to the mental hospital, telling the staff that the patients were very excitable and prone to bizarre fantasies. The deception wasn't discovered for 3 days.

5. An American teenager was in the hospital recovering from serious head wounds received from an oncoming train. When asked how he received the injuries, the lad told police that he was simply trying to see how close he could get his head to a moving train before he was hit.

6. A man walked into a Louisiana Circle-K, put a \$20 bill on the counter, and asked for change. When the clerk opened the cash drawer, the man pulled a gun and asked for all the cash in the register, which the clerk promptly provided. The man took the cash from the clerk and fled, leaving the \$20 bill on the counter. The total amount of cash he got from the drawer... \$15. [If someone points a gun at you and gives you money, is a crime committed?]

7. Seems an Arkansas guy wanted some beer pretty badly. He decided that he'd just throw a cinder block through a liquor store window, grab some booze, and run. So he lifted the cinder block and heaved it over his head at the window. The cinder block bounced back and hit the would-be thief on the head, knocking him unconscious. The liquor store window was made of Plexiglas. The whole event was caught on videotape.

8. As a female shopper exited a New York convenience store, a man grabbed her purse and ran. The clerk called 911 immediately, and the woman was able to give them a detailed description of the snatcher. Within minutes, the police apprehended the snatcher. They put him in the car and drove back to the store. The thief was then taken out of the car and told to stand there for a positive ID. To which he replied, "Yes, officer, that's her. That's the lady I stole the purse from."

9. The Ann Arbor News crime column reported that a man walked into a Burger King in Ypsilanti, Michigan at 5 A.M., flashed a gun, and demanded cash. The clerk turned him down because he said he couldn't open the cash register without a food order. When the man ordered onion rings, the clerk said they weren't available for breakfast... The frustrated gunman walked away.

10. When a man attempted to siphon gasoline from a motor home parked on a Seattle street by sucking on a hose, he got much more than he bargained for. Police arrived at the scene to find a very sick man curled up next to a motor home near spilled sewage. A police spokesman said that the man admitted to trying to steal gasoline, but he plugged his siphon hose into the motor home's sewage tank by mistake. The owner of the vehicle declined to press charges saying that it was the best laugh he'd ever had and the perp had been punished enough!

Remember.... They walk among us ... They can reproduce

Naval Lingo: Bitter End. A turn of a line around a bitt, those wooden or iron posts sticking through a ship's deck, is called a bitter. Thus the last of the line secured to the bitts is known as the bitter end. Nautical usage has somewhat expanded the original definition in that today the end of any line, secured to bitts or not, is called a bitter end. The landlubber (Anyone unfamiliar with the sea or seamanship) phrases "stick to the bitter end" and "faithful to the bitter end" are derivations of the nautical term and refer to anyone who insists on adhering to a course of action without regard to consequences.

A government which robs Peter to pay Paul can always depend on the support of Paul.

--- **George Bernard Shaw** (1856 –1950 Irish playwright, essayist, and novelist)



Obama's speech was interrupted



by a security leak.

The ARAB Street Reacts...





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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 | Bulletin Web Access: <http://sjcvets.zymichost.com/index.html> or
<http://www.veteransresources.org/rao-bulletin> [Word format].
 RAO Office: Red Lion, 92 Glen Luna, cnr Leonard Rd & Brent Rd. Baguio City 2400 RP TUE & THUR 09-1100
 AL/AMVETS/DAV/NAUS/NCOA/MOAA/USDR/VFW/VVA/CG33/DD890/AD37/TSCL member

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