

RAO

BULLETIN

15 March 2017

PDF Edition



**THIS RETIREE ACTIVITIES OFFICE BULLETIN CONTAINS THE FOLLOWING
ARTICLES**

| Pg | Article | Subject |
|---------|---------------------------------------|--|
| * DOD * | | |
| 04 == | Military Exchange Closures | ----- (Hiring Freeze Impact) |
| 06 == | Commissary Employees [01] | ----- (Hiring Freeze Impact) |
| 07 == | SBP Legislation [01] | ----- (Budget Planners Impact) |
| 08 == | DoD Relocation Policy | ----- (Flexibility for Families Concerns) |
| 09 == | DoD Drug Testing | ----- (Expanding for Applicants) |
| 10 == | DOD Disability Evaluation System [15] | ----- (Proof Impact) |
| 11 == | Tricare Provider Availability [06] | ---- (Network's Dropout Concerns) |
| 12 == | Tricare & Obamacare | ----- (ACA Repeal/Replace Impact) |
| 12 == | POW/MIA Recoveries -- | (Reported 01 thru15 MAR 2017 Thirteen) |
| * VA * | | |
| 16 == | VA Secretary [58] | ----- (Shulkin's 10-point Reform Plan) |
| 18 == | VA Mental Health Care [31] | ----- (O-T-H Vets to Get Services) |
| 1 == | VA Electronic Health Record [06] | ---- (VistA Replacement Decided) |

19 == VA Accountability [41] ----- (House Movement on New Rules)
 20 == VA Health Care Access [48] - (NC | VA Widespread Inaccuracies)
 21 == VA Vet Choice Program [49] ---- (Remove 40-mile, 30-day Rule)
 22 == VA Vet Choice Program [50] - (Appointment Wait Times Report)
 23 == VA Cost Projections ----- (Could Balloon w/New Proposals)
 25 == The Independent Budget FY 2018 [01] ----- (10% Boost Needed)
 26 == VA Copay [14] ----- (Debt Options)
 26 == VA Health Care Enrollment [11] ---- (Deadline Extension Requested)
 27 == VA Cancer Prevention ---- (Aspirin Study Reveals Tumor Impact)
 27 == PTSD [227] ----- (Arkansas VA Marijuana Treatment Policy)
 28 == Vet Toxic Exposure | Lejeune [68] -- (Claims Accepted as of 14 MAR)
 29 == Medical ID Bracelets & Pendants [01] ----- (How To Get)
 30 == VA In Vitro Fertilization [10] ----- (Available for Eligible Vets)
 30 == VA MOVE! Program [01] ----- (10 Tips on Losing Weight)
 31 == VA Caregiver Program [36] ----- (Shulkin Supports Expanding)
 32 == VA Fraud, Waste & Abuse ----- (Reported 01 thru 15 MAR 2017)
 35 == VAMC Durham NC ----- (Patients Seen Being Ignored)
 36 == VAMC Durham NC [01] ----- (Patient Suicide in Parking Garage)
 37 == VAMC Hines IL [06] ----- (Vet Concerns Aired)
 38 == VAMC Tampa FL [07] ----- (Dying Wish Wedding)
 39 == VA HCS Phoenix [29] ----- (\$50 Million Malpractice Lawsuit)

* Vets *

41 == Vet Groups [01] ----- (White House Meeting w/o Trump)
 42 == Burn Pit Toxic Exposure [41] ----- (Amie Muller Has Died)
 43 == Wisconsin Veterans Homes [06] ---- (King Home Survey Results)
 44 == DAV Legislative Presentation -- (28 FEB VA Committee Hearing)
 45 == DAV Transportation Network [01] - (Free Travel to VA Facilities)
 46 == Vet Deportations [09] ----- (Hope for Return Under Trump)
 48 == Duplicate SSN Error ----- (Mixup Prevents Vet Retirement)
 49 == USMC Reunions ----- (Website Established)
 50 == Missouri Veteran Homes [01] ----- (Available Care Concerns)
 51 == Obit: Wapner~Joseph ----- (26 FEB 2017 | People's Court Host)
 51 == Obit: Liebenow~William ----- (24 FEB 2017 | Kennedy Rescuer)
 52 == Stolen Valor [102] ----- (Reported 170301 thru 170315)
 53 == Vet Cemetery South Dakota [01] --- --- (Black Hills Research Project)
 53 == Navy Seal Monument ----- (Virginia Beach Boardwalk)
 54 == Gulf War Memorial [01] ----- (Authorized Under S. J. RES. 1)
 54 == Retiree Appreciation Days ----- (As of Mar 15, 2017)
 55 == Vet Jobs [216] ----- (Unemployment Rate Drops to 4/6%)
 55 == Vet Hiring Fairs ----- (15 MAR thru 14 APR 2017)
 57 == Vet State Benefits & Discounts ----- (Washington MAR 2017)

* Vet Legislation *

58 == BEST Practices Act ----- (Live Animal Use for Battlefield Training)
 58 == PTSD & TBI [04] ----- (No Hero Left Untreated Act)
 59 == PTSD & TBI [05] ----- (Connecticut House Bill 5580)
 61 == VA Records [02] ----- (Vet Connect Act of 2017)

61 == VA Burial Benefits [41] -- (H.R.1390 Transportation Reimbursement)
62 == Vet Gun Control [12] --- (H.R.1181 | 2nd Amendment Protection Act)
62 == VA Caregiver Program [35] ----- (H.R.1472/S.591 | Pre-911 Vets)
63 == SSA COLA [02] ----- (H.R.1251 | CPI-E Act of 2017)
64 == GI Bill [219] --- (H.R.1379 | Post-911 Purple Heart Recipient Benefit)
65 == Other Vet Legislation ----- (Recently Introduced)

*** MILITARY ***

67 == USMC Photo Scandal ----- (Commandant Addresses Issue)
67 == National Security Cutter Program ----- (Trump Budget's Impact)
68 == Navy Readiness [02] ----- (Proposed Ships Procurements)
69 == Beards In Uniform ----- (Army Study Could Change Policy)
71 == USS Enterprise (CVN-65) [02] ----- (Disposal Options)
72 == USCG Budget ----- (Doing the Most with the Least Dilemma)
73 == USCG Budget [01] ----- (Opposition to Cuts Growing)
74 == Pizza MRE ----- (Delayed Indefinitely)

*** MILITARY HISTORY ***

75 == WWII Aleut's Internment ----- (Executive Order 9066)
76 == Fallen Soldier Battle Cross Memorial ----- (Rosenberg OR VAMC)
78 == Battle of Hampton Roads ----- (March 8-9, 1862 | Facts)
80 == Military History Anniversaries ----- (16 thru 31 MAR)
80 == WWII Vets 131----- (Floyd Gene Buck | Merchant Marine Messman)
81 == WWII Vets 132 ----- (Carl Davis | USS Nehenta Bay Sailor)
82 == Medal Of Honor Story ----- (Donlon~Roger | Vietnam)
82 == Medal of Honor Citations ----- (Everhart, Forest E | WWII)

*** HEALTH CARE ***

84 == Cancer Diagnostic Tools [01] ----- (Colonoscopy)
85 == Compensatory Reserve Index -- (New Circulatory Shock Indicator)
86 == TRICARE TBI Treatment ----- (Know Signs & Symptoms)
88 == Heart Health for Women [01] ----- (Leading Cause of Death in U.S)
88 == Drug Cost Increases [04] ----- (Trump Jumps Back Into Debate)
90 == Drug Cost Increases [05] ----- (Change Demanded in Rip-Off Prices)
90 == Vitamin Supplements [06] ----- ('D' | Natural Ways to Boost It)
91 == Flashbacks ----- (Strategies for Coping With Them)
92 == TRICARE Podcast 386 ---- (Donors | Physical Activity | Sleep Habits)
93 == TRICARE Podcast 387 -- (Nutrition Awareness | MHS Genesis | TBIs)
-4 == TRICARE Podcast 388 -- (Speech Disorders | Privacy | Patient Safety)

*** FINANCES ***

96 == SBP DIC Offset [48] ----- (MOAA to Storm The Hill in APR)
96 == Mortgage [05] ----- (Which is Best - 15 or 30 Year Term)
97 == FICO Credit Score [10] ----- (Civil Judgment/Tax Lien Impact)
97 == Home Loan Guaranty ----- (VA Loan Criteria)

100 == VA Home Loan [47] ----- (Falling Behind Tips)
 101 == SBP Beneficiaries [01] ----- (Educate Them | Checklist)
 102 == Online Cigarette Sales Scam ----- (How It works)
 103 == IRS 2017 Filing Season [01] ----- (New Rules)
 104 == IRS 2017 Filing Season [02] ----- (5 Tips)
 105 == IRS 2017 Filing Season [03] ----- (How To File Free)
 105 == Imposter Scams ----- (Rising | Overtaken Identity Theft)
 106 == IRS Student Loan/Tuition ----- (Tax Breaks)
 107 == Debt Collector Scam ----- (How It works)
 108 == IRS Tax Debt ----- (Can't Pay | Here's What to Do)
 110 == Tax Burden for Nevada Retired Vets ----- (As of Mar 2017)

* GENERAL INTEREST *

111 == Notes of Interest ----- (01 thru 15 MAR 2017)
 112 == Rosie The Riveters [03] ----- (National Recognition for 'Rosies')
 113 == Iwo Jima Flag Raising [02] ----- (Photographer Joe Rosenthal Petition)
 114 == U.S. Passport Policy [03] ----- (Owing Uncle Sam Impact)
 114 == DARPA [04] ----- (SIGMA Program | Dirty-Bomb Hunting)
 115 == NASA [01] ----- (Space Poop Challenge)
 117 == Have You Heard? --- (Mule Funny || How to Live Like a Navyman)

Note:

1. The page number on which an article can be found is provided to the left of each article's title
2. Numbers contained within brackets [] indicate the number of articles written on the subject. To obtain previous articles send a request to raoemo@sbcglobal.net.

* ATTACHMENTS *

Attachment - RAO Bulletin March 15, 2017
 Attachment - Washington Vet State Benefits & Discounts MAR 2017
 Attachment - Military History Anniversaries 16 thru 31 MAR

* DoD *



Military Exchange Closures ► Hiring Freeze Impact

At least one military exchange service has had to close or reduce operating hours at some facilities as a result of the federal civilian hiring freeze, while the other exchanges -- and other quality-of-life programs for military families -- could see ill effects as the freeze prevents them from filling vacancies. Central Marine Mart, a convenience store at Camp Lejeune, North Carolina, will close 6 MAR until further notice as a result of staffing

shortages, officials said. Three other convenience stores either have reduced operations or will by 6 MAR. Various other services operated by Marine Corps Community Services at that location have been reduced or temporarily suspended. "The hiring freeze affecting all government employees is now affecting our ability to conduct business as usual," states the website for MCCA at Camp Lejeune and nearby Marine Corps Air Station New River.

The civilian hiring freeze also is affecting the Army and Air Force Exchange Service, according to AAFES spokesman Judd Anstey. AAFES has asked the Army for an exemption to the hiring freeze, he said. In the meantime, AAFES has dealt with the order's effects by increasing hours of part-time employees and delaying planned openings of new stores. But, Anstey said, "an exemption is needed soon to avoid reducing operating hours and/or closing stores." Officials who operate Navy exchanges and Marine exchanges have also asked for exemptions, and are assessing and monitoring the effects of the hiring freeze. Those aren't the only officials doing so: Nearly every military family and quality-of-life program on installations will face challenges if unable to fill job vacancies, including Defense Department schools, commissaries, military exchanges and morale, welfare and recreation programs.

Information was not available from either the Department Defense Education Activity or the Defense Commissary Agency about whether the hiring freeze has affected operations at schools and commissaries. Whether they are teachers or staff members in DoDEA schools, or cashiers in commissaries, these employees are federal government workers, as are those in programs that assist military families with as spouse employment, financial readiness and relocation assistance issues, to name a few.

NO NAF WAIVER? -- A number of officials within the Defense Department are questioning why military exchanges and other entities operated with nonappropriated funds are included under the freeze, sources said. By law, employees of NAF organizations -- such as the military exchanges and MWR activities -- are not employees of federal agencies or employees of the U.S. government. Their salaries are paid for by the profits of those operations. They were not included in the government furloughs of 2013. "It makes no sense to include them," said one DoD official. "They're self-supporting, and their salaries are not paid by the government." The official asked not to be named because he was not authorized to speak publicly on the topic.

NAF employees are included in the civilian hiring freeze because of the wording of President Trump's memo, DoD spokesman Johnny Michael explained. The order states that the freeze "applies to all executive departments and agencies regardless of the sources of their operational and programmatic funding, excepting military personnel." Officials in the Marine Corps Business and Support Services Division have also asked for an exemption for all Marine Corps Exchange retail employees from the hiring freeze "since there is no appropriated fund taxpayer expenditures in funding of their salary and benefits," said Bryan Driver, spokesman for the division. Those officials have also asked to be able to hire seasonal employees at the exchanges, pools and Inns of the Corps, he said. A DoD memo authorizing exemptions to the hiring freeze for some employment areas allows these actions regarding seasonal employees and short-term temporary help needed to meet recurring seasonal workloads, but advance coordination is required.

But the effects are being felt. "With our highly transient workforce, employees leave on a continuous basis, requiring us to constantly hire in order to maintain adequately staffed programs and facilities at a standard level," officials wrote on the MCCA Lejeune-New River website. "As we continue to be included in the hiring freeze, and our current staffing levels continue to be reduced, it has become necessary to alter our current operations, either by temporarily consolidating services, curtailing hours of operation, suspending programs, or closing facilities," Future changes likely would include reducing hours of operation, canceling some activities and programs, and additional temporary closures of facilities, officials wrote. Navy Exchange officials also have asked for an exemption to the hiring freeze, according to Navy Exchange Service Command spokeswoman Kristine Sturkie. "We are currently looking at our open billets and staffing levels to assess potential operational impacts and how we can mitigate them," Sturkie said, adding that NEXCOM recently received approval to hire seasonal workers for its garden centers, Navy Lodges and other short-term requirements.

WHO IS EXEMPT? -- There are exemptions to the hiring freeze outlined in the memo that apply to some programs and services for military families, included because Defense Secretary Jim Mattis has deemed them "necessary to meet national security or public safety responsibilities," according to the guidance:

- Those who provide child care to children of military personnel.
- Those at the installation level providing direct support to the prevention of child abuse, sexual assault, domestic violence, and suicide, and providing support to those who are affected.
- Those who perform mortuary affairs activities and other directly related services to properly care for the fallen and their families.
- Those who provide inpatient care at military treatment facilities, and provide acute and emergency outpatient care in military medical and dental facilities. Also, jobs involving communicable disease prevention and similar public health activities.

However, these aren't blanket exemptions -- they require approval, and officials granted authority to approve the exemptions must be ready to "justify their ... decisions on a position-by-position basis," per the memo. The health care exemption is also vague, said Joyce Raezer, executive director of the National Military Family Association, noting that the DoD guidance also first states that the exemptions apply "to the extent necessary to maintain capability to ensure a medically ready force." She said advocates have been watching military health care, and other areas, to determine if there are effects on families. "AAFES having to cut hours or close stores would be a direct result of the hiring freeze," she said. "But this will be an issue -- separating out the hiring freeze from the problems that existed before." She cautioned against blaming every cut in access on the hiring freeze. For example, families recently have said there are problems for DoDEA in hiring substitute teachers, but family advocates have heard complaints before about such problems and have been trying to track down the root cause.

According to the DoD guidance, any job candidate who received a job offer or appointment before 22 JAN and who received documentation from the agency that specified a start date on or before 22 FEB, was able to take that position. The timeline for the hiring freeze is uncertain. President Trump's memo ordering a hiring freeze of federal civilians, signed Jan. 23, also directed the Office of Management and Budget and the Officer of Personnel Management to come up with a long-term plan within 90 days to reduce the size of the federal government's work force through attrition. When that plan is implemented, the hiring freeze will end, according to the president's order. The unnamed DoD official said no DoD civilians should have been included in the hiring freeze. "They all contribute to the Defense Department's ability to do the job," he said. [Source: TREA Washington Update | February 14, 2017 ++]

Commissary Employees Update 01 ► Hiring Freeze Impact

Commissary customers already are starting to see longer lines at the cash register in some locations as the result of the federal civilian hiring freeze, according to a Defense Commissary Agency spokesman. And things could get worse. "With an over 20 percent average turnover rate, if the hiring freeze continues for an extended duration we may eventually be forced to temporarily cut services or reduce days/hours if staffing problems occur," said DeCA spokesman Kevin Robinson. Such moves will be "our last course of action," he noted. More than 1,650 of the agency's 18,000 jobs are open, Robinson said. That's a vacancy rate higher than 9 percent. Of those vacant jobs, 83 are management positions.

Cashiers and other commissary employees are federal civilian workers. Most of the employees work in the 238 commissaries in 14 countries around the world. Among the employees are military spouses who may leave their jobs to make a move to a new duty station with their service member; military spouses made up about 28 percent of DeCA's worldwide workforce as of 2015. To date, store hours and services haven't been cut, Robinson said, as commissary officials have increased the hours of part-time workers. DeCA is in the process of requesting an

exemption to the hiring freeze through the Defense Department, Robinson said. Its workers do not fall under any of the exemptions outlined in existing DoD guidance, which allows for hiring of military child care workers but leaves out virtually all other quality-of-life programs on military installations. President Trump signed a memo 23 JAN ordering the hiring freeze of federal civilians. That covers exchanges and morale, welfare and recreation programs, even though their employees are paid by operational profits, not taxpayer dollars.

The freeze comes at a bad time for the commissary agency, which was set to begin implementation of a new pricing system 1 MAR. The setup will allow officials to make a profit on some items, marking prices up and down to be more competitive with local grocery stores, they say. The new system will start with 10 installations, with a small number of items. Officials declined to name those stores. DeCA also is suffering technical setbacks as they implement a long-planned new business system in the midst of the pricing change, according to an industry source who wasn't authorized to speak to the media on the matter. A provision in the fiscal 2017 National Defense Authorization Act allows DoD to move DeCA to variable pricing, and doesn't require a pilot program. "Nevertheless, the Defense Commissary Agency will make changes prudently and carefully monitor the effects. We are mindful of maintaining the patron savings baseline that Congress has required while not degrading commissary service levels," Robinson said, adding that "DeCA will maintain savings levels at their baselines at all test locations."

Until recently, commissary officials reported that customers saved an average of 30 percent compared with shoppers outside the gate. Congress required DeCA to provide a baseline savings before the variable pricing began. In January, commissary officials announced they'd changed their method of calculating those savings and pegged the new overall figure at 23.7 percent (20.2 percent in the U.S., with variations by region). By law, commissaries will have to provide at least the baseline of savings as they move to this new pricing system. Until now, the commissaries have sold groceries at cost from the supplier, plus a 5 percent surcharge and a 1 percent markup for spoilage and loss. As variable pricing is implemented, items are no longer necessarily sold at cost. [Source: MilitaryTimes | Karen Jowers | February 28, 2017 ++]

SBP Legislation Update 01 ► Budget Planners Impact

Republican defense lawmakers want the government to stop shortchanging military widows and widowers of their benefits, but they'll need help from budget planners to do it. Earlier this week, members of the House Armed Services Committee released their annual "views and estimates" letter petitioning congressional appropriators for a host of military spending priorities. Included in the list for the first time in six years was finding a solution to the ongoing problem of Defense Department's Survivor Benefit Plan payouts — also known as "the widow's tax" — which issue letter signers called small in terms of federal spending totals but significant in the impact it has on military families. Veterans groups have pushed for a solution to the problem for almost three decades, calling it an unfair practice that strips thousands of dollars in benefits payouts from veterans' survivors without good justification.

Families of military retirees who enroll in the SBP can receive up to 55 percent of their loved ones' retirement pay after the veteran dies. The life insurance-type payouts are subsidized by DoD, but require enrollees to pay-in part of their retirement benefit to be eligible. In addition to that program, the Department of Veterans Affairs offers a Dependency and Indemnity Compensation program that awards around \$15,000 a year to survivors of veterans or troops who die of service-related causes. Individuals who qualify for either SBP money or DIC benefits receive full payouts from the respective programs. But family members who qualify for both are subject to an offset, where for every dollar paid out in DIC their payouts under SBP are reduced by one dollar. The result is a loss thousands of dollars a year in benefits. In testimony before Congress Thursday, Gold Star Wives spokeswoman Misty Brammer

said it creates significant financial problems for families who are already dealing with the death of a loved one. “The security they spent saving for is not there,” she said. “This is unfair.”

The issue affects about 63,000 families nationwide. Fixing it would cost about \$1 billion a year, a small fraction of the country’s \$600 billion-plus in annual defense spending. But finding that money has proven near impossible for defense lawmakers, given increased military funding demands and issues of budgetary jurisdiction in Congress. Instead, in recent years lawmakers have approved gap payments — known as Special Survivor Indemnity Allowance — to get around the offset regulations without fully funding a repeal. Those stipends are typically less than \$300 a month. Committee estimates put the average lost payouts due to the SBP/DIC offset problem around \$1,250 a month. And the SSIA payouts are set to expire in May 2018 unless more money is set aside. “Increased funding to support the ‘widow’s tax’ would correct the disconnect in survivor spouse compensation that we simply cannot correct without your assistance,” committee Republicans wrote in the letter to appropriators. The House Appropriations Committee is expected to unveil their defense funding plans for fiscal 2018 in late spring. [Source: MilitaryTimes | Leo Shane III | March 12, 2017 ++]



DoD Relocation Policy ► Flexibility for Families Concerns

An ongoing, comprehensive review of assignment and relocation policies, and their effects on families, will allow the Defense Department to see how its leadership uses existing regulations and resources to allow families much-needed flexibility during military moves, an official told senators at a 28 FEB meeting. Testimony from military family advocates in front of the Senate Armed Services Committee's personnel panel called into question whether such flexibility exists. A provision in last year's Senate version of the defense authorization bill would have let families move up to six months ahead of, or after, a service member for reasons related to family education or spouse employment concerns. That provision was removed in conference, said Sen. Kirsten Gillibrand (D-NY) who has asked military family advocates to weigh in on DoD's flexibility

Newer language being proposed to address the Defense Department's concerns about costs would no longer provide additional money for housing and dual moving expenses, Gillibrand noted, asking Stephanie Barna, acting secretary of defense for manpower and reserve affairs, whether these changes would allow DoD to support such a plan. Barna said she could not speak to any pending legislation. But concerns in the past were about a law that could potentially give less flexibility to moving families, she said. “The area of military assignment and relocation is not an area where there’s a lot of law. We believe the absence of law now allows for a much further line of demarcation,” she said, giving DoD, commanders and families maximum flexibility already. DoD officials are

concerned about a law that might constrain the time frame for moving to 180 days before or after the report date; Barna said existing policies "allow moves to take place much further on either side of that line of demarcation." Laws also could limit eligibility for such programs, Barna said: "Today, a spouse or family can come forward for any reason and ask for additional flexibility on either side of that service member's report date."

"That's not the experience of people on the ground," said Kathy Roth-Douquet, CEO of Blue Star Families. In her own example, when her husband received orders to relocate from Europe one year in June and her daughter's school year didn't end until July, the family was not able to change the move date, she said. The family paid \$15,000 out of pocket to stay for another two months. "I think a lot of times our service members and families don't know what to ask. We tend to salute and move forward with the military," said Joyce Raezer, executive director of the National Military Family Association. She said families are seeking options for them to be able to make the best decision, but noted it's still a "tough decision" for the service member to go ahead of the family or stay behind.

Raezer said many spouses have not had enough lead time to work on job-licensing issues before they move, for example, or the spouse or child may need to stay behind to finish out a semester. "We're very happy to do anything for national security, but moves that take place in October or February don't necessarily help national security," Roth-Douquet said. It's very difficult for a child to start at another school in the middle of the school year. The flexibility in moving puts families more in control, and "make necessary challenges bearable," Roth-Douquet said. Subcommittee chairman Sen. Thom Tillis (R-NC) said there needs to be a culture where it's OK to say the military shouldn't be imposing these hardships, such as a family paying \$15,000 to stay behind for a child's education. "Right now we're not communicating the potentially negative impact on families because of what they've been ordered to do," Tillis said.

The results of the DoD review will be included in a report due to Congress in June, Barna said, adding that DoD hopes to "ensure we're optimizing the use of existing authorities and resources." [Source: MilitaryTimes | Karen Jowers | February 15, 2017 ++]

DoD Drug Testing ► Expanding for Applicants

The Defense Department will be expanding drug testing for military applicants to check for all drugs that are tested in active duty military members, according to DoD. The change, set to take place on 3 APR, is meant to reflect "the level of illicit and prescription medication abuse among civilians, as well as the increase in heroin and synthetic drug use within the civilian population," according to Army Col. Tom Martin. Currently, military applicants are tested for illicit drugs and prescription drug abuse during their time at a Military Entry Processing Station, overseen by United States Military Entrance Processing Command, a joint service command. All branches of the military — including the Coast Guard, National Guard, Air National Guard, reserves, appointees to the service academies, incoming members of the ROTC and officer candidates undergoing initial training in an enlisted status — require applicants to attend MEPS where they are either accepted or rejected for military service.

Military applicants are currently tested for marijuana, cocaine, amphetamines, methamphetamine, designed amphetamines such as MDMA (also known as Molly or Ecstasy), and MDA (also known as Adam). The expanded test will test for 26 drug types, including heroin, codeine, morphine, hydrocodone, oxycodone, hydromorphone, oxymorphone, and a number of synthetic cannabinoids (also known as spice) and benzodiazepine sedatives. Active members of the military are subject to random drug testing three times per year. The goal of the drug test expansion is to ensure that military applicants meet the same standard that are expected of service members. "Military applicants currently are tested on a small subset of drugs that military members are tested on," Martin said. "Applicants need to be aware of the standard we hold our service members to when they join the service."

Roughly 279,400 applicants are processed for entry into military service each year, with around 2,400 of them failing drug tests. It is estimated that 450 additional people will test positive using the expanded testing. Applicants who fail the new drug tests are allowed to reapply after 90 days at the discretion of the particular service. An applicant who tests positive for any of the drugs twice is permanently disqualified from military service in any branch of the armed forces. Under the current policy, there are different standards for reapplication depending on the type of drug found in the applicants system. The updated policy allows for one opportunity to reapply, regardless of which drug (or drugs) the applicant tests positive for. [Source: MilitaryTimes | Christopher Diamond | March 9, 2017 ++]

DOD Disability Evaluation System Update 15: Proof Impact

When Sgt. 1st Class Cameron Corder broke his back in a helicopter accident three years ago, he wasn't thinking about what paperwork he needed to file to properly document the crippling pain. "It's an ultimate insult," the 34-year-old former soldier said. "I couldn't walk away from the helicopter. Today, I can't walk without the help of canes. I can't get myself in and out of bed. But the Army says there's no proof anything happened." Technically, the Army has acknowledged that something happened to Corder, who was serving as a medic in Afghanistan in December 2013 when he was quickly medically evacuated from the war zone because of back problems. He has undergone numerous surgeries and procedures since, all covered as service-connected injuries. But because of a seemingly minor paperwork mistake hours after Corder's accident, the service has refused to pay out \$100,000 from a Traumatic Servicemembers' Group Life Insurance policy, claiming there wasn't a single event responsible for the soldier's injuries.

That's left the Michigan native and his wife, Bethany — now a full-time caregiver to Corder — scrambling to cover bills and expenses resulting from the injury, and wondering why military bureaucracy is fighting so hard against them. "This whole situation has just been devastating," he said. "I was an Army man through and through. But once I got involved in this, I just wanted to get out as fast as possible." Corder's fight comes as lawmakers and President Trump have promised to cut back on federal bureaucracy and unnecessary regulation. The new commander in chief has also instituted a hiring freeze and indicated plans to cut back on middle management throughout government agencies.

Advocates for Corder say his ordeal could be a case study in how red tape and inflexible rules can hurt families, and raises unsettling questions about how the military expects wounded troops to handle their own post-injury needs. In a letter to Army officials, Rep. Dan Kildee (D-MI) called the situation "a clear case of mid-level bureaucrats misapplying policy and intent at the expense of a wounded warrior." Kildee has petitioned a host of military officials over the last few years, and brought Corder to Capitol Hill as a special guest to big events to highlight his fight. So far, it hasn't changed the Army's decision. "It has been frustrating, that's for sure," the congressman said. "Cameron represents the best this country has to offer. Never did I imagine how much difficulty we'd face in getting him basic support."

Corder was on a routine medical mission when his accident occurred. He was treating a wounded Marine injured in a bomb blast when the man -- in a state of shock -- became violent and tackled Corder. The pair fell to the helicopter floor, with Corder landing awkwardly on metal medical kit. "Immediate shooting pain went through my low back and down both of my legs." Other crew members wrestled the agitated Marine away, but Corder could barely move by the time they landed back at base. He needed help walking to the base medical facility for treatment. There, other Army medical specialists on call asked about his injury and whether he had any existing medical conditions. Corder noted that he had experienced minor back pain a few months earlier, after injuring himself lifting a patient, but said the helicopter injury was much more severe.

Over the next few days, as Corder's condition deteriorated and he was sent back to Germany for emergency surgeries, reports of the helicopter accident went missing from his medical files. Army officials listed his injury as "a history of lower back pain" instead of a single event. That meant that Corder's immediate medical bills were covered by the Army, but his claim a few months later for a payout Traumatic Servicemembers' Group Life Insurance was rejected. "The documentation provided for your event ... does not indicate you suffered a loss resulting from a qualifying traumatic event," the Army's rejection letter stated. "There is nothing in your 800+ page record which indicates or points to an event involving an altercation with a patient." Over the last three years, Corder has submitted multiple statements from his fellow flight crew members confirming the accident, but the Army has yet to recognize them.

Service officials insist that despite numerous filings from Corder and Kildee, they only recently received a "formal" appeal of the 2014 TSGLI decision, and are still sorting through his documentation for the latest process. Kildee called the drawn-out process infuriating. "The Army ought to be finding every way it can to help someone like this," he said. "If there was a mistake, it's OK to admit it. Let's just get him what he needs." Meanwhile, Corder said his family has gone from a "middle-class" lifestyle before his injury to financial struggles afterwards, mostly because of the loss of his wife's income. His 10-year-old daughter had to choose between two after-school activities this year because the family doesn't have the time or money to get her to both. "That (TGSLI) money would be huge for us," he said. "It's an opportunity to pay off some of our loans and debt, and a lot of that came when my wife was traveling to see me after surgery. It would be a chance to put money aside to help pay for the kids' college." "It would just help to dig ourselves out of the hole we're in." [Source: MilitaryTimes | Leo Shane III | March 11, 2017 ++]

Tricare Provider Availability Update 06 ► Network's Dropout Concerns

Some military families are seeing some doctors and other health care providers dropping out of the Tricare network in advance of the change in Tricare contracts this year, according to complaints submitted to the Department of Defense Military Family Readiness Council. "There's concern about providers backing out of the network," said Chief Master Sergeant of the Air Force James Cody, who is a member of the council and has seen the submissions. He asked about oversight DoD is providing, given the anxiety of some service members and families. "We're already seeing some ill effects," he said. Cody did not provide the number of complaints the council has received, nor the number of providers leaving the network.

The contracts will take effect later this year. Among other things, Tricare's three regions are now consolidated into two, with Humana in the East region and HealthNet in the West, pending one challenge to the contract. DoD has strict requirements in the contracts for the number and types of providers in each area, said Navy Capt. Edward Simmer, deputy director of Tricare, who provided a briefing at the council's 15 FEB meeting. "If they don't meet that, we hold them accountable. Right now, for most of the specialties, they're doing very well.

"I've seen their proposed networks," Simmer added. "Humana will stay in the South, so that won't change very much. With Humana going into the North region and HealthNet moving out to the West, they've really had to show us what they're doing, how they're getting these networks in place. So far, I think they're doing very well and I feel very good about where they are, but I can assure you that before this goes live and we go to these new contracts, they're going to have to show us they have these providers in place ready to see patients, or we're not going to make the switch."

Cody said there should be "a conversation, especially with folks who have acute conditions and special needs," where continuity of providers is important. He said that continuity of care is already taken into consideration when personnel decisions are made about moving people, but it's a different scenario if that care is taken away when the family is in their current location. "We absolutely have to account for that on the forefront. This can't be triaged,"

Cody said. And for those who have expressed concerns about the issue to the council, there should be follow-up, he said. Simmer said Tricare officials “are constantly watching that. If we see any problems along those lines, we’re going to challenge [the contractors].” [Source: MilitaryTimes | Karen Jowers | February 15, 2017 ++]

Tricare & Obamacare ► ACA Repeal/Replace Impact

The Republican House Leadership has just rolled out their ideas on how to repeal and replace Obamacare. Of course this is just the opening bid... and we see that many members on each side of the aisle intend to fight it. But while that is going on you should know how these proposals could affect TRICARE. The quickest answer is that they won’t (though that is very simplistic). The House leadership version has just been rolled out and consists of two staggeringly long bills.

You should remember that TRICARE is a health care earned benefit. It is NOT an insurance policy or an insurance company and we must never forget that. We must continue to fight to keep that distinction clear in the minds of the members of Congress. The two programs were created separately and exist in two separate chapters of the Federal Code. Changes of one program should not affect the other program. TREA and the great majority of other VSOs and MSOs successfully fought to keep TRICARE separate and independent from Obamacare (Affordable Care Act) when it was first passed. But there were items in the ACA that TRICARE beneficiaries liked and wanted. So after much lobbying the 2015 NDAA authorized Young Adults (until they reach 26) to be allowed to remain on their parents TRICARE. It also provided breastfeeding benefits without any co-pays or other costs to TRICARE beneficiaries (like sections of the ACA). Again this was done in the NDAA not the ACA.

The real area of concern for TRICARE beneficiaries is the NDAA 2015 also instructed TRICARE to follow the ACA. What does that mean if it is repealed and replaced? Not quite clear. But so far so good. TREA will be watching it very closely and if any threats or troubles arise we will fight them and inform you about them immediately. [Source: TREA Washington Update | March 7, 2017++]

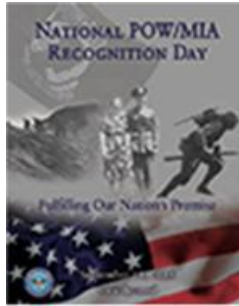
POW/MIA Recoveries ► Reported 1 thru 15 MAR 2017 | Thirteen

"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. The number of Americans who remain missing from conflicts in this century are: World War II (73,515) Korean War (7,841), Cold War (126), Vietnam War (1,627), 1991 Gulf War (5), and Libya (1). 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.dpaa.mil/> and click on ‘Our Missing’. If you wish to provide information about an American missing in action from any conflict or have an inquiry about MIAs, contact:

== Mail: Public Affairs Office, 2300 Defense Pentagon, Washington, D.C. 20301-2300, Attn: External Affairs

== Call: Phone: (703) 699-1420

== Message: Fill out form on <http://www.dpaa.mil/Contact/ContactUs.aspx>



Family members seeking more information about missing loved ones may also call the following Service Casualty Offices: U.S. Air Force (800) 531-5501, U.S. Army (800) 892-2490, U.S. Marine Corps (800) 847-1597, U.S. Navy (800) 443-9298, or U.S. Department of State (202) 647-5470. 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

The Defense POW/MIA Accounting Agency announced the identification of remains and burial update of 1 U.S. servicemen who had been previously listed as missing in action from Vietnam. Returning home for burial with full military honors are:

-- **Air Force Reserve Capt. Daniel W. Thomas** was an OV-10A pilot. On July 6, 1971, Thomas and his fellow crewmember were flying over Laos in support of an eight-man Special Forces reconnaissance team when they crashed due to bad weather. Interment services are pending. Read more about Thomas <http://www.dpaa.mil/News-Stories/Recent-News-Stories/Article/1105800/airman-missing-from-vietnam-war-identified-thomas>.



Korea

The Defense POW/MIA Accounting Agency announced the identification of remains and burial update of 5 U.S. servicemen who had been previously listed as missing in action from the Korean War. Returning home for burial with full military honors are:

-- **Army Sgt. 1st Class Robert R. Cummings**, 20, of Manistique, Michigan, will be buried March 4 in Clarksville, Tennessee. In late November 1950, the 187th regiment was moved to positions along the Chongchon and Kuryong rivers in order to preserve lines of communication after an attack by approximately 300,000 Chinese soldiers. On Nov. 29, Cummings was sent out as part of a reconnaissance patrol. The patrol was ambushed near Hajoyang, North Korea, and Cummings was declared missing in action. Read more about Cummings at <http://www.dpaa.mil/News-Stories/News-Releases/Article/1093933/soldier-missing-from-korean-war-accounted-for-cummings>



-- **Army Cpl. Gerald I. Shepler**, 20, of Liberty, Ind. was scheduled for burial March 11 in Liberty. Shepler was the lead scout on a reconnaissance patrol for Company K, 3rd Battalion, 187th Airborne Infantry Regiment, 7th Infantry Division, near Hajoyang-ni, North Korea, when his patrol was ambushed by enemy forces. Shepler was unaccounted for after the mission, and the U.S. Army declared him deceased on Nov. 29, 1950. Read more about Shepler at <http://www.dpaa.mil/News-Stories/News-Releases/Article/1105860/soldier-missing-from-korean-war-accounted-for-shepler>



-- **Army Pfc. Manuel M. Quintana** was a member of Company K, 3rd Battalion, 29th Infantry Regiment. In late July 1950, the regiment unexpectedly encountered enemy forces while moving toward Hadong, in present day South Korea. Following the battle, Quintana could not be accounted for and was declared missing in action as of July 27, 1950. Interment services are pending. Read more about Quintana at <http://www.dpaa.mil/News-Stories/Recent-News-Stories/Article/1108168/soldier-missing-from-korean-war-accounted-for-quintana>

-- **Army Sgt. Willie Rowe** was a member of L Company, 3rd Battalion, 9th Infantry Regiment, 2nd Infantry Division. On Nov. 25, 1950, his unit was attacked by Chinese forces while advancing north toward the Ch'ongch'on River region of North Korea. Following the battle, Rowe was unaccounted for and was declared missing. Interment services are pending. Read more about Rowe at <http://www.dpaa.mil/News-Stories/Recent-News-Stories/Article/1108232/soldier-missing-from-korean-war-accounted-for-rowe>

-- **Army Cpl. Billie J. Jimerson**, missing from the Korean War, has now been identified. In late November, 1950, Jimerson was a member of Company C, 1st Battalion, 24th Infantry Regiment, 25th Infantry Division, when his unit engaged with opposing forces near Anju, North Korea. He was reported missing in action as of Nov. 28, 1950, when he could not be accounted for. In September 1954, a set of remains reportedly recovered from a prisoner of war cemetery at Camp 5 were sent to the Central Identification Unit in Japan for attempted identification and further processing. This set of remains was designated X-14400, and was determined unidentifiable in November 1955.

In February 2014 the Defense POW/MIA Accounting Agency requested the disinterment of Unknown X-14400. In June 2014, X-14400 was disinterred from the National Memorial Cemetery of the Pacific and accessioned into the laboratory. DNA analysis and circumstantial evidence were used in the identification of his remains. Interment services are pending.



World War II

The Defense POW/MIA Accounting Agency announced the identification of remains and burial update of 7 U.S. servicemen who had been previously listed as missing in action from World War II. Returning home for burial with full military honors are:

-- **Navy Steward's Mate 1st Class Cyril I. Dusset** was assigned to the USS Oklahoma, which was moored off Ford Island in Pearl Harbor, Hawaii, when Japanese aircraft attacked his ship on Dec. 7, 1941. Dusset was one of 429 crewmen killed in the attack. Interment services are pending. You can read more about Dusset at <http://www.dpaa.mil/News-Stories/Recent-News-Stories/Article/1093686/uss-oklahoma-sailor-from-world-war-ii-identified-dusset>.

-- **Navy Fireman 1st Class Lawrence H. Fecho** was assigned to the USS Oklahoma, which was moored off Ford Island in Pearl Harbor, Hawaii, when Japanese aircraft attacked his ship on Dec. 7, 1941. Fecho was one of 429 crewmen killed in the attack. Interment services are pending. You can read more about Fireman 1st Class Fecho at <http://www.dpaa.mil/News-Stories/Recent-News-Stories/Article/1093628/uss-oklahoma-sailor-from-world-war-ii-identified-fecho>.



-- **Navy Seaman 1st Class Paul S. Raimond** was assigned to the USS Oklahoma, which was moored off Ford Island in Pearl Harbor, Hawaii, when Japanese aircraft attacked his ship on Dec. 7, 1941. Raimond was one of 429 crewmen killed in the attack. Interment services are pending. Read more about Seaman 1st class Raimond at <http://www.dpaa.mil/News-Stories/Recent-News-Stories/Article/1093642/uss-oklahoma-sailor-from-world-war-ii-identified-raimond>.

-- **Navy Fireman 1st Class Walter B. Rogers** was assigned to the USS Oklahoma, which was moored off Ford Island in Pearl Harbor, Hawaii, when Japanese aircraft attacked his ship on Dec. 7, 1941. Rogers was one of 429 crewmen killed in the attack. Interment services are pending. Read more about Fireman 1st Class Rogers at <http://www.dpaa.mil/News-Stories/Recent-News-Stories/Article/1093613/uss-oklahoma-sailor-from-world-war-ii-identified-rogers>.

-- **Army Air Forces Pvt. William D. Gruber** was assigned to the Philippine Department, U.S. Army Forces in the Far East, when Japanese forces invaded the Philippine Islands on Dec. 8, 1941. Gruber and his unit tended to the wounded until the U.S. fortress of Corregidor fell on May 6, 1942. Gruber was among the thousands of U.S. and Filipino service members taken captive and forced to endure the Bataan Death March en route to prisoner of war camps. Gruber was eventually moved to Cabanatuan POW camp on the island of Luzon, where more than 2,500 POWs would perish. Interment services are pending. Read more about Gruber at <http://www.dpaa.mil/News-Stories/Recent-News-Stories/Article/1108194/soldier-missing-from-world-war-ii-accounted-for-gruber>



-- **Navy Fireman 1st Class Elmer T. Kerestes** was assigned to the USS Oklahoma, which was moored off Ford Island in Pearl Harbor, Hawaii, when Japanese aircraft attacked his ship on Dec. 7, 1941. Kerestes was one of 429 crewmen killed in the attack. Interment services are pending. Read more about Kerestes at <http://www.dpaa.mil/News-Stories/Recent-News-Stories/Article/1108222/remains-of-uss-oklahoma-sailor-from->

[world-war-ii-identified-kerestes](#)

-- **Army Air Forces 1st Lt. Robert E. Oxford** was a member of the 425th Bomber Squadron, 308th Bomb Group, 14th Air Force. On Jan. 25, 1944, Oxford's B-24J Liberator disappeared in bad weather while flying a supply mission from Kunming, China to Chabua, India. Without a way to determine the loss location, no search efforts were conducted and all aboard were declared deceased the following day. Interment services are pending. Read more about Oxford at <http://www.dpaa.mil/News-Stories/Recent-News-Stories/Article/1108253/soldier-missing-from-world-war-ii-accounted-for-oxford>

[Source: <http://www.dpaa.mil> | March 15, 2017 ++]

* VA *



VA Secretary Update 58 ► Shulkin's 10-point Reform Plan

In appearances before veterans groups this week, Veterans Affairs Secretary Dr. David Shulkin is outlining his 10-point plan for reforming department operations and offerings, with a heavy emphasis on VA medical improvements. The plan is separate from the 10-point VA plan President Trump unveiled on the campaign trail last summer, but includes some of the same themes of accountability and a more customer-service focus for department employees. It also includes several provisions championed by Shulkin's predecessor, former VA Secretary Bob McDonald, who was criticized by Trump and other conservatives for not acting quickly enough on reforms. During an appearance before the American Legion's winter conference on 28 FEB, Shulkin said his new 10-point plan will "take the best of VA and the best of the private sector, and make that work for veterans." He also promised to work quickly on the reforms, saying many are facing deadlines or long overdue. The list includes:

1. New accountability legislation -- "When people lose their values, and deviate from the ethics and values we hold dearly, they no longer have the right to work in VA," Shulkin said. "We're going to make sure they don't work in VA." But McDonald struggled with Congress on finding appropriate accountability legislation, sparring over measures he saw as crudely crafted or ineffective in solving department discipline issues. House and Senate leaders could not agree on new firing policies for VA last year because of congressional infighting over the scope of the rules. House Veterans' Affairs Committee Chairman Phil Roe (R-TN) has promised to mark up a new accountability bill in early March, and said he has worked with Shulkin already on refining those updated rules.

2. Extend the Choice deadline past August -- The controversial VA Choice Card program, put in place in the wake of the 2014 wait times scandal, is set to expire later this year. Lawmakers have complained the program has not helped as many veterans as it should, but Shulkin said he sees it as a key program for future VA reforms. "We need to see that legislation extended beyond August, because we need those resources to provide care for veterans that they deserve," he said. Renewing the program will require congressional appropriators to set aside several billion dollars in coming years to fund the outside medical care appointments, a demand that may be difficult to get past fiscal conservatives in the House.

3. Choice 2.0 Legislation -- Shulkin is also promising that if he gets more money for the Choice Card program, he won't be simply dumping the funding into a broken system. "We want to come back and redesign the choice program so it actually works for veterans," he told the Legion conference. "We know this program was way too complex, there were too many steps to go out and get the care that veterans need." Shulkin has already promised to eliminate program rules that limit outside care options to veterans who live at least 40 miles away from a VA facility or face a VA clinic wait time of more than 30 days. But those changes will also require congressional cooperation.

4. Infrastructure improvements and consolidations -- McDonald had pushed for more money for new VA construction projects but also closing of some outdated or underused VA facilities. Shulkin is putting those ideas among his top priorities as well. "We're going to be looking towards investments, but we're also going to have to make some choices," he said. "There are some parts of the country where facilities are sitting empty, and there is no sense in keeping them empty." Both are potentially difficult proposals that will require help from Congress. Lawmakers are often loathe to close facilities in their own districts, and have been critical of the skyrocketing cost of recent new VA hospital constructions.

5. Enhance foundational services in VA -- While Shulkin is open to shifting more routine medical care out of the VA system, he is pledging not to have that move pull away funds from department specialties like prosthetics work, post-traumatic stress disorder care and other veteran-related research. "There are certain services that VA does better than anybody," he said. "I want to make sure that we continue to be on the cutting edge, and continue to invest in those."

6. VA/DOD federal coordination -- Like McDonald, Shulkin is promising better coordination of VA and Pentagon records systems, transition programs and a host of other services overlapping military service and veterans status. "The Department of Defense needs us, and we need the DoD," he said. "We're going to be working closely to make sure we maximize our ability to work together." But seamless cooperation between the two bureaucracies has remained elusive in recent years, even with White House pressure for better coordination. And whether both departments can stay focused on joint collaborations may depend on other priorities and distractions in Trump's military plans.

7. Electronic medical record modernization -- Lawmakers have been frustrated in recent years with the slow pace of modernization efforts for veterans' electronic medical records. Former VA Secretary Eric Shinseki pushed to move the department from mostly paper records to completely digital files, but Shulkin -- a former medical system director -- sees other areas for improvement. "These systems desperately need modernization," he said. "We have to take those steps this year." It's unclear whether that effort will require new funding from Congress, or if existing information technology funds can cover those changes.

8. Breakthrough in suicide prevention -- Shulkin called suicide prevention "our top clinical priority right now" and said he is hopeful for major improvements in treatment in coming years. Those advances have been disappointingly slow, even with extra funding and focus in recent years. Roughly 20 veterans a day nationwide take their own lives, according to estimates from VA researchers. The issue is part of a broader push to get more mental health research and experts into the Veterans Affairs system, something that Trump promised on the campaign trail.

9. Appeals modernization -- McDonald had offered a comprehensive appeals modernization plan to lawmakers a year ago that he insisted would have cut benefits appeals wait times from years to months, but the legislation stalled. Shulkin is picking up that same initiative, calling it an urgent improvement which would save time and stress for thousands of veterans and their families. "We need to get that system fixed," he said. "Veterans should not be waiting anywhere near the amount of time they are to get their appeals heard and decisions made. But until we get a legislative fix, we're not going to see any progress made."

10. Accelerating performance on benefits claims -- VA officials brought down the veterans benefits claims backlog by more than 500,000 cases in recent years, but a substantial number of filings still take more than four months to fully process. About 99,000 cases were still backlogged as of Feb. 25. "Although we have made

tremendous progress, we still have more we can do to make faster decisions,” Shulkin said. The backlog numbers have seen an increase in recent months, raising questions of whether improvements made in the past were temporary fixes instead of systemic changes.

[Source: MilitaryTimes | Leo Shane III, February 28, 2017 ++]

VA Mental Health Care Update 31 ► O-T-H Vets to Get Services

Veterans Affairs Secretary David Shulkin said his department will start offering mental health services for veterans with other-than-honorable dismissals as soon as possible, saying the issue is too important to wait for congressional intervention. “We have some authorities to do that,” he told members of the House Veterans’ Affairs Committee on 7 MAR. “So many veterans are just disconnected from our system. The 20 a day committing suicide are not getting the care they need. “We’re going to do whatever we can. We’re going to work with you. This is unacceptable, and we shouldn’t have to wait for Congress to force the issue.”

Veterans advocates for years have pushed for that type of care for the estimated 300,000 veterans who have been separated from the military with so-called “bad paper” discharges, making them ineligible for a range of VA health and education benefits. They argue that a significant portion of those cases are troops dismissed for erratic behavior or substance abuse, problems that are often symptoms of more serious, undiagnosed mental health issues. Denying those former troops access to mental health care dramatically increases their chances of suicide, they say. After the hearing, Shulkin said he hopes to have the new offerings available within a few months, with instructions for individual hospitals on outreach and urgent care treatment options for those veterans. He also credited Colorado Rep. Mike Coffman with “changing my mind” on the issue.

Last month, Coffman introduced legislation requiring the VA to offer mental health care to veterans with other-than-honorable discharges, calling it an urgent public health need. Coffman praised the news, said it caught him by surprise. Shulkin’s announcement was met with a loud round of applause from the lawmakers and veterans advocates at the Tuesday evening hearing. Kris Goldsmith, founder of High Ground Veterans Advocacy, has pushed the issue in recent years and called Tuesday’s announcement a critical step forward for thousands of veterans. He attempted suicide in 2007 while in the Army, but was given a general discharge instead of treatment for his post-traumatic stress disorder. “To hear that the VA is finally going to abide by the 1944 GI Bill of Rights is fantastic,” said Goldsmith, who also works as assistant director for policy at Vietnam Veterans of America. “Since I ‘came out’ with my bad-paper story ten years ago, I’ve had countless veterans reach out to me for help. “I’m so glad they’ll finally be able to get help where they deserve to: at the Department of Veterans Affairs.” [Source: MilitaryTimes | Leo Shane III | March 7, 2017 ++]

VA Electronic Health Record Update 06 ► Vista Replacement Decided

VA Secretary David Shulkin, MD, told House Committee on Veterans Affairs' members on 8 MAR that the VA would be moving to a commercial electronic health record system. "I've come to the conclusion that VA building its own software products and doing its own software development inside is not a good way to pursue this," said Shulkin. "We need to move toward commercially-tested products. "If somebody could explain to me why veterans benefit from VA being a good software developer, then maybe I'd change my mind," he added. "But right now we should focus on the things veterans need us to focus on and work with companies who know how to do this better than we do."

The initial plan was a single, integrated EHR system for both the VA and the U.S. Department of Defense. Last year the groups announced the agencies would instead build separate systems – after two years of discussion and planning. Since then, VA has been trying to modernize its self-developed VistA EHR system – and failing. In fact, it's been the focus of numerous Congressional hearings, where members have expressed frustration with delays in the rollout and the struggles to develop an in-house, interoperable system. Congress has long pressured the VA to move into an off-the-shelf EHR. Even the Government Accountability Office is fed up: It named VA healthcare and IT systems on its High-Risk List in 2017 for the second time. Shulkin and his team met with Comptroller General Gene Dodaro to discuss GAO recommendations.

During a separate House Committee on Veterans Affairs in February, Acting Assistant Secretary for Information and Technology and Acting CIO of the Office of Information and Technology for the VA Rob Thomas told members that the VA would be going with a commercial EHR – prior to Shulkin's confirmation as secretary. "My goal, my charge, is that we go commercial to the greatest extent possible," said Thomas. "We don't have a great track record with developing software." Committee Chairman Rep. Phil Roe (R-TN) echoed those sentiments: "This is the third major attempt to modernize VistA in the past decade," he said. "Retaining or replacing VistA is a make-or-break decision for VA and must be made deliberatively and objectively. The VA must judge VistA Evolution realistically against concrete goals. If it falls short, moving the goalposts is unacceptable." [Source: Healthcare IT News | Jessica Davis | March 09, 2017 ++]

VA Accountability Update 41 ► House Movement on New Rules

The House veterans panel advanced new accountability legislation 8 MAR designed to speed the firing of problem employees at the Department of Veterans Affairs and reform the bureaucracy's "broken civil service system." The move came despite concerns from Democrats, who called the measure too aggressive and unlikely to get Senate approval, leaving the current flawed system in place for years to come. But Republicans insisted the measure is a critical step ahead in reforming department operations and improving veterans' care, and have repeatedly cited incidents of criminal behavior by VA employees who are transferred or suspended rather than fired. "Ninety-nine percent of VA employees are hard-working public servants," said Rep. Phil Roe, R-Tenn., chairman of the House Veterans' Affairs Committee. "Unfortunately, when the VA secretary comes across the small number of employees who don't meet VA standards ... it is nearly impossible to discipline them."

Ridding VA of bad employees was a campaign promise of President Trump, and has been a major focus of conservative advocates since the 2014 wait time scandal which uncovered numerous department administrators covering up appointment problems at VA hospitals. But union officials have called the measures an unfair attack on workers' appeals and due process rights, and an opportunity to unfairly blame lower level employees for management mistakes. In his confirmation hearing last month, VA Secretary David Shulkin promised "far greater accountability" at the department in months to come. "A basic function of any chief executive is to be able to get the right people working in the organization," he told senators. "And those that do stray from the values that we hold, they have to leave the organization. We don't currently have that right on either side."

Lawmakers have made multiple attempts at approving new accountability rules for the department in recent years, and passed a measure designed to ease the firings of senior staff in 2014. But officials with President Obama's Department of Justice later judged that law to be unconstitutional, and VA officials stopped enforcing the measure. The move enraged congressional Republicans, who accused the administration of being too passive in rooting out failed employees and criminals from the department's ranks. The new bill would allow the VA secretary to fire or suspend any employee for poor performance or misconduct, regardless of their position. Those employees would receive advance notice of discipline of not more than 10 days, and the secretary would have five days after

the action to respond to any objections. If those employees appeal the punishment, judges with the Merit Systems Protection Board would have 45 days to issue a ruling.

Those provisions go to lawmaker complaints that disciplining problem employees within current federal rules is too time consuming, sometimes taking months of hearings and reassignments. The legislation would also allow VA officials to recoup bonuses paid to employees later disciplined for misconduct, and reduce the federal pension of employees convicted of a felony “which influenced their job performance.” Those decisions can also be appealed. Similar provisions were included in House-passed legislation last year, which failed to advance in the Senate. Senate officials have not yet weighed in on the new legislation.

House committee ranking member Rep. Tim Walz (D-MN) unsuccessfully tried to amend the new measure with Senate-backed language containing similar disciplinary changes, but Republicans knocked down that bid. Walz said he worries that without closer coordination with the committee’s Senate counterparts, Congress is unlikely to address the issue at all this year. The measure passed out of committee on a party-line voice vote. The House committee on 8 MAR also advanced measures to remove the August expiration date of the VA Choice Card program, update gun ownership rules for veterans’ deemed unfit to handle their own finances, and to expand hiring authorities for physicians for the VA secretary. No timetable has been announced when any of the measures may come before the full House for a vote. [Source: MilitaryTimes | Leo Shane III | March 8, 2017 ++]

VA Health Care Access Update 48 ► NC & VA Widespread Inaccuracies

A review of a dozen Veterans Affairs medical facilities in North Carolina and Virginia identified widespread inaccuracies that vastly understated veteran wait times for appointments last year, leading the VA inspector general to conclude that VA scheduling data is still unreliable and a “high-risk” area for the agency. *The miscalculations, outlined in an inspector general report issued 2 MAR, masked actual demand for care and precluded veterans from getting private sector treatment*, which they are supposed to be able to get if they have to wait longer than a month for a VA appointment. The inspector general looked at primary and mental health care appointments for new patients and referrals for specialists and found that overall, 36% had to wait longer than a month for an appointment, but the VA scheduling system said only 10% had waited that long.

The report estimated that as many as 13,800 veterans should have been able to get VA-sponsored care in the private sector because of their long waits, but the VA never added them to lists authorizing them to receive outside care under the so-called Choice program. VA staffers entered the wrong dates in the scheduling system in some cases and didn’t follow up on appointment requests in a timely way in others. In a few cases, medical center directors or other supervisory staff disagreed with national guidelines designed to ensure veterans see specialists within a time frame dictated by their referring doctor. So they just didn’t require staff to follow them. The inspector general also reviewed records of veteran patients who were added to Choice lists and managed to get appointments outside the VA. Auditors found that 82% of them waited longer than 30 days, and on average, they waited nearly three months. “Choice did not reduce wait times to receive necessary medical care for many veterans,” Larry Reinkemeyer, assistant inspector general for audits, wrote in the report.

The investigation is the largest on wait-time manipulation at the VA since 2014, when at least 40 veterans died waiting to be seen at the Phoenix VA while schedulers there kept secret wait lists hiding how long they were waiting. The inspector general has looked at more than 100 medical centers individually since then and found widespread problems, but the most recent investigation is the first to assess the reliability of wait-time data in an entire region, the mid-Atlantic in this case. And it identified flaws in the scheduling system still used by VA facilities nationwide.

VA Secretary David Shulkin, whom the Senate confirmed unanimously a few weeks ago, was undersecretary for health at the time of the audit, which stretched from April 2016 to last month. He said the agency has already taken action to improve wait times for the Choice program, and he disputed the findings about inaccurate wait times because he disagrees with the way the inspector general calculated them, according to his response included with the report. “I cannot concur with some of the conclusions in this report nor use them for management decisions,” Shulkin wrote. He said they are also based on outdated rules for scheduling appointments. Shulkin issued new rules in July.

Understating wait times. But the inspector general said that even after taking those rules into account, schedulers entered dates that understated how long veterans were waiting in nearly 60% of appointments. “Thus even if we calculate wait times using VHA’s updated policy, which was not in effect during the scope of our audit, there were still significant inaccuracies,” Reinkemeyer wrote. “VA data reliability continues to be a high-risk area,” he said, adding that the findings are consistent with others by the Government Accountability Office as recently as last month. His office reviewed a sampling of more than 1,400 appointment records from the last quarter of 2015 and found veterans waited an average of 27 days for primary care appointments — the VA scheduling system said the average was only eight days. For mental health, the inspector general found the average wait was 26 days, but the VA system showed 6 days. And for referrals to specialists, the audit found veterans waited an average of 36 days, while the VA system said the wait was 10 days.

The inspector general tracked the time between appointment requests and the actual appointments. The VA system, on the other hand, tracks the time between dates that veterans say they want to be seen or when a doctor says they should be seen and their actual appointments. For example, if a veteran asks for an appointment in two weeks or if a doctor says come back in two weeks, the wait time clock starts in two weeks instead of at the time of the request. “VHA believes it is very important to respect veterans’ preferences for when they want to be seen,” Shulkin wrote in his response to the report. But depending on schedulers to enter the right dates can lead to inaccurate results. For example:

- The inspector general found a new veteran patient asked in August 2015 for a primary care appointment and didn’t get one until nearly two months later, but the VA system showed zero wait time because the scheduler entered the appointment date as the preferred date.
- In another case, a veteran seeking a mental health appointment in July 2015 couldn’t get one until the end of September that year. Four days before the appointment, the VA canceled it along with others that day. A scheduler rebooked it two months later in November 2015 and entered that date as the one preferred by the veteran. The system showed zero wait time even though the wait was actually four months.

Republican Rep. Richard Hudson of North Carolina, home to nine of the 12 medical facilities audited, said the resulting report “shines a light on a systemic, bureaucratic problem at the VA.” “It is an absolute fiasco and our veterans deserve better,” he said in a statement 3 MAR. “I am alarmed and outraged that employees weren’t following proper reporting protocol, preventing veterans from accessing timely, quality care through the Choice Program.” [Source: USA TODAY | Donovan Slack | March 3, 2017 ++]

VA Vet Choice Program Update 49 ► Remove 40-mile, 30-day Rule

VA Secretary David Shulkin outlined his aim 26 MAR to remove the 40-mile, 30-day rule for veterans accessing private sector care outside the VA system. Among other proposals, Shulkin unveiled his plan to dramatically increase the ability of veterans to get care outside of the VA at the Disabled American Veterans annual conference, which is ironic, as DAV has been one of the groups most consistently opposed to the VA Choice Program. In Shulkin’s first address since taking over the reins of the department, he stated he wants to transform the existing choice program into “Choice 2.0,” Stars and Stripes reports. Such a proposal is an indication that the Trump

administration is serious about bringing the VA closer to privatization — without privatizing the entire department. In December, a Trump transition team official said that the administration was considering allowing some veterans to bypass the VA system and receive care solely from the private sector. Major veterans groups have repeatedly stated their opposition to expanding the choice program and moving towards privatization.

Currently, under the choice program, veterans must either wait 30 days for an appointment or live more than 40 miles away from the nearest VA facility. Shulkin slammed the existing program as overly complex and bureaucratic, but said the expiry date should be removed, in order for his plan about moving overly burdensome rules to be actualized. GOP Sen. John McCain and Rep. Phil Roe introduced legislation in the Senate and House to eliminate the expiry date, but so far the bills haven't gained much traction.

The choice program was first implemented following revelations of manipulated wait times and veterans languishing and dying on secret wait lists at the Phoenix VA. The conservative-leaning veterans advocacy Concerned Veterans for America noted that the choice program, while somewhat of an improvement, still suffers from poor implementation. "The Choice Card program, which was intended to be a stopgap passed in response to the 2014 Phoenix VA scandal, is imperfect and was implemented poorly," Concerned Veterans for America policy director Dan Caldwell said in a statement. "We agree with Secretary Shulkin that Congress should reauthorize the Choice Program in August, but only as a temporary measure while better methods for offering veterans choice are developed." [Source: The Daily Caller | Jonah Bennett | February 26, 2017 | ++]

VA Vet Choice Program Update 50 ► Appointment Wait Times Report

The Inspector General for the Department of Veterans Affairs has found local veterans waiting months for appointments made through the VA Choice Program. The IG watchdog announced the findings as part of an investigation into wait times at VA medical facilities and the VA choice program for a region including North Carolina and Virginia. The new report available at <https://www.va.gov/oig/pubs/VAOIG-16-02618-424.pdf> was released 2 MAR. In the report, investigators looked at the total amount of time veterans were waiting for appointments at VA medical centers, community outpatient clinics and at private providers treating veterans through the VA Choice Program.

Congress passed a law in 2014 that required the VA to pay for veterans to be seen by a private specialist if they would have to wait more than 30 days to be seen by a VA doctor. That program became known as the VA Choice Program. North Carolina's WBTV-3 has been investigating problems and long wait times at VA facilities and the VA Choice Program for more than a year. Their investigations has exposed veterans waiting months to even have an appointment scheduled through the VA Choice Program. One veteran they talked with even experienced a worsening in his medical condition as a result of the extended wait time to be seen by a specialist through the VA Choice program. The Inspector General's report reached a similar conclusion.

According to the report, 82 percent of veterans that received care through the VA Choice Program in VISN 6--the region that includes North Carolina and Virginia--in the time period studied waited more than 30 days. "We estimated that overall, the approximately 22,500 veterans who received Choice care waited an average of 84 days to get their care through Health Net," the report said. "We estimated it took medical facility staff an average of 42 days to provide the authorization to Health Net to begin the Choice process and 42 days for Health Net to provide the service" Despite Health Net's poor performance in ensuring local veterans get timely access to care in under 30 days, as the program intended, the company's CEO made more than \$14 million in 2015, up from nearly \$12.5 million the year before.

Table 1. Average Time To Complete New Patient Appointments

| Appointment Type | Appointments With Inaccurate Wait Time Data | VA-Calculated Wait Time | OIG-Determined Wait Time | Difference |
|------------------|---|-------------------------|--------------------------|------------|
| Primary Care | 5,200 | 8 Days | 27 Days | 19 Days |
| Mental Health | 2,700 | 6 Days | 26 Days | 20 Days |
| Specialty Care | 34,000 | 10 Days | 36 Days | 27 Days |
| Totals* | 41,900 | 9 Days | 34 Days | 25 Days |

The IG's report singled out Health Net's poor performance and the VA's lax oversight as major reasons for veterans' delayed care. "As discussed in Finding 2, many of the problems in obtaining timely access to care through Choice were caused by Health Net," the report said. Investigators also found the VA did not have adequate resources to ensure the program was meeting its required targets. The report estimated that VA employees responsible for coordinating non-VA care (NVCC) has seen their workload increase 200 percent. "NVCC staff at the seven VISN 6 medical facilities did not adequately monitor Health Net's information to ensure veterans received timely care and Health Net returned authorizations in compliance with the contract timeliness requirements," the report found.

The report also found that more than a third of veterans face wait times longer than 30 days at VA medical facilities in VISN 6, too. "VISN 6 medical facilities did not consistently provide timely access to health care for new patient appointments," the report found. Investigators estimated 36 percent of new patients waited more than 30 days for an appointment. Of that 36 percent, the report found the average wait time to be 59 days. The report noted that investigators found a significantly higher number of patients who had to wait longer than 30 days to be seen than what data in the VA's system showed for wait times. The VA's own data showed just ten percent of veterans had experienced extended wait times.

A separate investigation by the Inspector General released in October 2016 found employees at the Salisbury VAMC were instructed to manipulate wait time data in order to improve performance metrics. In response to the report, the medical center's director said staff underwent more training and those supervisors had been removed from their roles. [Source: WBTV.com | Nick Ochsne | March 2, 2017 ++]

VA Cost Projections ► Could Balloon w/New Proposals

VA Secretary David J. Shulkin announced in early MAR that his priorities for improving services to veterans include expanding access to private sector health care in part by asking Congress to remove two irksome cost controls. Under the often-criticized VA Choice Program, enacted in 2014 in response to a wait-time scandal across the VA health system, veterans can seek private sector care at the VA's expense only if they face wait times longer than 30 days for a VA appointment or they live more than 40 miles from a VA health care facility. Congress set these restrictions to limit the exodus of patients to private sector care during what was seen as a temporary crisis. Without the restrictions, the Congressional Budget Office predicted, VA Choice Program users would burn through in less than a year the \$10 billion set aside for a three-year emergency program.

The Trump administration now wants Choice extended and expanded, as do key congressional leaders, despite warnings from veteran service organizations that shifting too many patients and too much funding to private sector care could begin a slide toward full privatization of VA health care. Shulkin told attendees at a conference of the American Legion 28FEB he wants Congress to extend authority for Choice past its 7 AUG sunset date "because we need those resources to be able to provide the care for veterans that they deserve." More surprisingly, Shulkin said the VA will seek authority to redesign the VA Choice Program to provide faster access to private sector care, which

“means we're going to need to eliminate the 40-mile/30-day rule.” President Trump, he added, is committed to such moves to ensure more timely care.

VA policymakers made those early cost projections by congressional auditors look wildly high. They did so by continuing to serve as gatekeepers on access to non-VA care, referring patients whenever possible to approved networks of civilian providers, and leaving veterans frustrated, angry, and complaining to Congress. By early 2016, the VA had revised the 40-mile rule twice to broaden eligibility, first by replacing “as-the-crow flies” distance with driving distance to the nearest VA hospital or clinic and later mandating a VA facility must have at least one primary care physician to be counted in the 40-mile rule.

Rep. Phil Roe (R-TN) a physician who now chairs the House Veteran's Affairs Committee, noted the VA health budget has climbed from \$97 billion in 2009 to almost \$180 billion this year while the VA hired 100,000 more health care employees, he told Legionnaires. Still, Roe said, he wants to see access to private sector care expanded and veterans put “in charge of health care decisions.” “If you feel like you're not getting the care you need at the VA hospital, then you should have the choice to go where you want,” Roe said. Veterans deserve “the absolute best health care that can be provided by anybody in the world,” he added. Sen. John McCain (R-AZ) an architect of the VA Choice Program, also wants it expanded. He said the VA “does the best job of anybody on [post-traumatic stress disorder], traumatic brain injury, prostheses” and other select health services. But veterans shouldn't have to wait to get routine medical care, McCain told the American Legion conferees. They should have the same access to local physicians and hospitals as do Medicare patients.

Shulkin listed nine other priorities, some with significant price tags, including modernizing the VA's electronic medical records. But one pending issue he didn't discuss could increase VA costs by more than many of his other priorities combined. Shulkin is said to be weeks away from deciding whether hundreds of thousands more Vietnam War veterans will be eligible for VA compensation and health care for new illnesses linked to Agent Orange and other herbicides used during the war. Among ailments under final review is hypertension (high blood pressure) which afflicts two thirds of elderly Americans to include Vietnam War-era veterans. Other conditions that might be added to the list of 17 ailments the VA presumes were caused by wartime herbicide exposure are bladder cancer, hypothyroidism, and conditions with Parkinson's disease-like symptoms.

A year ago, the National Academy of Medicine, formerly known as the Institute of Medicine of the National Academy of Sciences, delivered to the VA the last of a series of reviews of scientific studies on ailments possibly linked to chemicals used in Vietnam to defoliate jungles where the enemy could hide. The Academy concluded recent research strengthens the association to herbicide exposure of bladder cancer and hypothyroidism, finding “limited or suggestive” evidence of a link. That was an upgrade from “inadequate or insufficient” evidence found earlier. The report also affirmed limited or suggestive evidence that herbicides could cause hypertension. It also found “no rational basis” not to add conditions that cause Parkinson's-like symptoms from the limited or suggestive evidence category.

Dr. Ralph Loren Erickson, chief consultant of post-deployment health services for the Veterans Health Administration, said the Academy findings were reviewed for months by a VA technical work group that included experts in disability compensation, environmental medicine, public health, toxicology, epidemiology, and legal requirements of relevant statutes. That work then was reviewed by a strategic work group and finally a task force of senior VA leaders. Shulkin received their final packet of recommendations Feb. 17, three days after he was sworn into office. “It doesn't take much imagination to realize how broad it would be and the costs involved” if Shulkin, backed by staff work, decides high blood pressure is a service-connected condition for Vietnam veterans, said Rep. Tim Walz (Minn.), ranking Democrat on the House Veteran's Affairs Committee. “I trust the secretary. I know he'll do what's best for veterans,” said Walz. “But I think we put him in a very difficult position” where a decision to add high blood pressure to the list of presumptive conditions also would force him to ask for billions of dollars more to process claims, award compensation, and provide care for a condition common in any adult population, or else cut back on other VA services.

DoD estimates 3.4 million servicemembers deployed to Southeast Asia from 1964-75. If 75% still are alive and, based on age, two thirds have high blood pressure, that's almost 1.7 million more veterans potentially filing new compensation claims. Asked whether the VA takes cost into account for such decisions, Erickson said no. "I suppose at some later date, someone who is paid to count beans and to cost things out will probably come up with a number," he said. "But as it relates to the decision for presumption, cost is not a factor. What we are guided by is if the scientific evidence in the peer review literature is sufficient to support presumption." Erickson said the drafting of new rules following the secretary's decision on possible new presumptions would take several months because other federal agencies, including the Office of Management and Budget, would be involved. [Source: MOAA Leg Up | Tom Philpott | March 2, 2017 ++]

The Independent Budget FY 2018 Update 01 ► 10% Boost Needed

Veterans Affairs officials needs a 10 percent boost in funding next year to meet the medical and program needs on the department, according to a coalition of outside advocates. The fiscal 2018 Independent Budget for VA — budget recommendations for the department compiled annually by researchers from the Veterans of Foreign Wars, Disabled American Veterans and Paralyzed Veterans of America — calls for an \$8 billion boost in the department's budget next year, "We believe that the ever-growing demand for health care and benefits services, particularly with more health care being provided in the community, provided by the VA certainly validates the continued need for sufficient funding," the coalition report states. "We understand that VA has fared better than most federal agencies in budget proposals and appropriations, but the real measure should be how well the funding matches the demand for veterans' benefits and services."

VA's discretionary budget was just under \$75 billion for fiscal 2017, not including some medical care collections accounts and VA Choice Card program funds. The overall budget was just under \$177 billion, almost four times the department's entire budget before the war in Afghanistan started in 2001. That total includes eight years of steady budget increases under President Obama, even as other federal agencies saw their spending curtailed by spending caps approved by Congress and the White House. But conservatives on Capitol Hill in recent weeks have hinted those substantial raises may be at an end. House Veterans' Affairs Committee Chairman Phil Roe (R-TN) has said on several occasions that the problems facing the department aren't because of a lack of funding, but instead because of poor management. Despite that, the Independent Budget recommends substantial hikes in medical spending (8.3 percent), benefits processing funds (9.7 percent) and almost doubling the VA construction budget.

"This report is not meant to suggest that these are the absolute correct answers for funding these services," the report stated. "However, in submitting our recommendations (we) are attempting to produce an honest assessment of need that is not subject to the politics of federal budget development and negotiations that inevitably have led to continuous funding deficits." President Trump has not submitted to Congress his plans for the fiscal 2018 VA budget. That's expected to happen sometime in April. In his speech to Congress last month, Trump promised that his upcoming budget "will also increase funding for our veterans," noting that "our veterans have delivered for this nation, and now we must deliver for them."

VA is one of only a few federal agencies currently working on a full-year budget at the moment. Most other departments, including the Defense Department, will have their partial-year budgets expire at the end of April unless Congress can reach a budget agreement before then. The full-year fiscal 2017 budget for VA passed last fall also includes \$66.4 billion in advance appropriations for fiscal 2018, to ensure that VA medical services and benefits payouts won't be disrupted in case of congressional gridlock. [Source: MilitaryTimes | Leo Shane III | March 7, 2017 ++]

VA Copay Update 14 ► Debt Options

VA offers a wide range of services to support Veterans including financial assistance options to pay copayments associated with VA health care. Veterans are responsible for those copayments and if not paid in a timely manner will be referred to the Department of Treasury for collection. However, if at any time Veterans are unable to make their copayments, VA can help with arrangements to include repayment plans and other debt relief options such as a compromise or waiver. VA will also consider temporary or permanent eligibility changes to accommodate a Veteran's financial situation. Veterans are encouraged to contact VA directly to make payment arrangements within 120 days from the date the charge is applied to the account.



VA's current billing process provides Veterans with three monthly billing statements in an attempt to collect copayments. If a Veteran receives VA benefit payments, VA may use these benefit payments to collect any unpaid delinquent copayment debt. If a Veteran does not have any VA benefit payments, the debt is referred to the Department of the Treasury Debt Management Service at 120 days for collection action. At this point, Treasury will issue an official notification letter to Veterans to make payment arrangements and if arrangements are not made, Treasury will begin collection actions. These collection actions could include any eligible Federal payments including income tax refunds, Social Security benefits, retirement pay, and certain other Federal or State payments. Treasury can also collect the debt from civilian salaries through administrative wage garnishment or they can collect the debt through private collection agencies. Once a debt is referred to Treasury, VA can no longer accept payments for that debt.

VA will work with Veterans to manage their financial responsibilities and assist in making arrangements to avoid collection actions; however, Veterans must contact VA to request assistance. Veterans who have questions about their copayment obligations are encouraged to contact the Facility Revenue Office at their local medical center, or call the Health Resource Center's toll-free number listed at the top of their monthly billing statement. As always, Veterans have the right to dispute a debt and will continue to receive healthcare services from VA regardless of their ability to pay assessed copayment charges. [Source: Vantage Point | February 28, 2017 ++]

VA Health Care Enrollment Update 11 ► Deadline Extension Requested

Lawmakers are asking the Department of Veterans Affairs to extend health care enrollment deadlines for more than 440,000 veterans who may have had their applications rejected because of coding errors made by the bureaucracy. "Given the enormity of the impact on veterans, we urge you to take additional steps to further ensure veterans receive every opportunity to complete their applications and that those applications are not improperly closed due to VA error," top Republicans and Democrats on the House and Senate Veterans' Affairs committees wrote in a letter to VA Secretary David Shulkin on Tuesday. At issue are news reports in recent weeks that tens of thousands of health care applications may have been improperly rejected or stalled in recent years when VA workers switched two codes requesting different information on their financial and military history. As a result, veterans were told to provide information they had already filed, leading to confusion and incomplete files.

The problem was identified last year, and VA officials pledged to resolve the mistakes by this month. But critics have questioned whether that work is complete, and lawmaker said they want to make sure no veterans are left without medical care because of the confusion. The lawmakers are asking for Shulkin to extend deadlines for veterans to provide the missing information on their applications for another year, to ensure they will not have to restart the whole process. They also want “an additional letter to those veterans who were potentially impacted by the coding error, clarifying what information is needed.” The VA Inspector General is also looking into the problem. Shulkin has promised to work to make the department — particularly health care offerings — more customer friendly in the years ahead. [Source: MilitaryTimes | Leo Shane III | March 7, 2017 ++]

VA Cancer Prevention ► Aspirin Study Reveals Tumor Impact

Researchers know of aspirin’s benefits in preventing certain ailments — from cardiovascular disease to most recently colorectal cancer. But while the link to those two conditions was made, researchers also questioned how and if this “wonder drug” could work to ward off other types of cancers. Thanks to a team led by Dr. Vinod Vijayan at the DeBakey Veterans Affairs (VA) Medical Center in Houston and Dr. Lenard Lichtenberger of the University of Texas Health Sciences Center, new studies verify their theory of cancer-prevention benefits based on aspirin’s effects on platelets—blood cells that form clots to stop bleeding. The findings appear in the February 2017 issue of Cancer Prevention Research journal at <https://www.ncbi.nlm.nih.gov/pubmed/27998883>.

“Along with clotting, platelets also play a role in forming new blood vessels,” Vijayan said. “That action is normally beneficial, such as when a new clot forms after a wound, and new vessels are needed to redirect blood flow. But the same action can help tumors grow. It’s this process that aspirin can interrupt.” Their lab tests showed how aspirin blocked the interaction between platelets and cancer cells by shutting down the enzyme COX-1, thereby curbing the number of circulating platelets and their level of activity. Some of their experiments used regular aspirin from a local drug store. In another phase, the researchers used a special preparation of aspirin combined with phosphatidylcholine, a type of lipid, or fat molecule. The molecule is a main ingredient in soy lecithin. The product, known as Aspirin-PC/PL2200, is designed to ease the gastrointestinal risk associated with standard aspirin.

The enhanced aspirin complex was even stronger against cancer than the regular aspirin. Summarizing their findings, the researchers wrote: “These results suggest that aspirin’s chemopreventive effects may be due, in part, to the drug blocking the proneoplastic [supporting new, abnormal growth, as in cancer] action of platelets and [they support] the potential use of Aspirin-PC/PL2200 as an effective and safer chemopreventive agent for colorectal cancer and possibly other cancers.”

In collaboration with researchers at MD Anderson Cancer Center in Houston, the group said they plan to test the lipid-aspirin complex for safety and efficacy in people at high risk for colorectal cancer. Meanwhile, they said their results, so far, “support the use of low-dose aspirin for chemoprevention.” They added that Aspirin-PC/PL2200 has “similar chemopreventive actions to low-dose aspirin and may be more effective.” The research study was supported by the National Institutes of Health. For more information about VA research on cancer, visit www.research.va.gov/topics/cancer. [Source: VA News Release | March 1, 2017 ++]

PTSD Update 227 ► Arkansas VA Marijuana Treatment Policy

Arkansas joins nearly 30 states allowing medical marijuana. For many, that means a new treatment option they are eager to try. For veterans, it’s still an uphill battle. Veterans across the country have heard medical marijuana could

help many conditions including PTSD, but even in states where medical marijuana is legal, vets are struggling to get their hands on it. It's because of federal regulations.

Tom Lee is one of those veterans. He served 19 years in the military, both in the Army and National Guard. He says his most cherished memory while serving was pulling people off the highway during ice storms. "There ain't nothing that makes you feel better than being able to help someone out," he said. But the privilege came with a price. He went through a Gulf War study group that found many veterans had illnesses after various environmental exposures and contact with pollutants overseas. Lee said it likely happened while he spent time on the Kuwaiti border picking up dead animals and digging fox holes in the sand. "We were living in the earth so whatever was there, we were fully exposed to it," he said. The exposure had lasting effects, not only for him but for his team. After he got home from serving in 2003, he says he was allergic to nearly every drug. He couldn't walk and became wheelchair bound. Doctors prescribed morphine as a last resort.

"People don't understand what a dark place morphine can take you," said Lee. "You learn the worst of yourself and feel the worst of your body." While he and his wife, Dawn, were visiting family in California, a friend introduced them to medical marijuana and told them he should try it. He told them worst it could do is nothing; the best it could do is save his life. So, he tried it. Two weeks later, he said his life started to change. "They carried me on a plane to get me out there and I walked coming home after not being able to walk for almost 3 years," said Lee. For the first time in a long time, Tom Lee says he finally had something; hope. He hasn't looked back since his time in California. He's been taking marijuana ever since. He has had to take it illegally knowing he could get caught at any moment. His wife says the whole process is petrifying.

"My husband is a disabled vet who is doing something illegal," she said. "I wasn't raised to break the law." Even with medical marijuana becoming legal in Arkansas, the Lees feel that they're trapped because of the Veteran Affairs policy on marijuana. According to federal VA policy, VA doctors can't prescribe or recommend marijuana because it's still labeled a schedule 1 drug. Tina McClain, Chief of Staff for the Central Arkansas Veterans Healthcare System, said doctors at the Arkansas VA will also not be able to recommend it or prescribe it. She said if a veteran chooses to go to another physician to get the recommendation for medical marijuana, it won't impact their ability to receive other care from the VA. McClain also said that for now, it looks like the policy won't be changing anytime soon. "I am not aware of any group or individual in the VA looking now at changing the policy because we are guided through federal law," said McClain.

Tom and Dawn Lee said their efforts won't change either. They'll continue to fight in hopes the VA and federal government will recommend medical marijuana as an acceptable treatment option. "The most evil thing in the world is a person who would knowingly allow their brother, sister, or neighbor to suffer," said Lee. "I've tried not to do that and I've tried to let everyone know the truth about this plant." If you need medical advice, have a question about your medication, or need to discuss your VA Eligibility, you can call the Central Arkansas Veteran Healthcare System at (501) 257-5655. Go to [file:///C:/Users/User/Downloads/12011004%20\(1\).pdf](file:///C:/Users/User/Downloads/12011004%20(1).pdf) to view the latest federal VHA policy Directive 2011-004 dtd JAN 31, 2011 on medical marijuana. [Source: THV11 CBS KTHV | March 1, 2017 ++]

Vet Toxic Exposure | Lejeune Update 68 ► Claims Accepted as of 14 MAR

The Department of Veterans Affairs' (VA) regulations to establish presumptions for the service connection of eight diseases associated with exposure to contaminants in the water supply at Camp Lejeune, North Carolina, are effective as of 14 MAR 2017. They will begin processing new compensation claims totaling more than \$2.2 billion from veterans exposed to toxic water at Camp Lejeune, North Carolina "Establishing these presumptions is a demonstration of our commitment to care for those who have served our nation and have been exposed to harm as a

result of that service,” said Secretary of Veterans Affairs, Dr. David J. Shulkin. “The Camp Lejeune presumptions will make it easier for those Veterans to receive the care and benefits they earned.” The presumption of service connection applies to active-duty, reserve and National Guard members who served at Camp Lejeune for a minimum of 30 days (cumulative) between Aug. 1, 1953, and Dec. 31, 1987, and are diagnosed with any of the following conditions:

- Adult leukemia
- Aplastic anemia and other myelodysplastic syndromes
- Bladder cancer
- Kidney cancer
- Liver cancer
- Multiple myeloma
- Non-Hodgkin’s lymphoma
- Parkinson’s disease

The area included in this presumption is all of Camp Lejeune and Marine Corps Air Station New River, including satellite camps and housing areas. This presumption complements the health care already provided for 15 illnesses or conditions as part of the Honoring America’s Veterans and Caring for Camp Lejeune Families Act of 2012 (<https://veterans.house.gov/HR1627>). The Camp Lejeune Act requires VA to provide health care to Veterans who served at Camp Lejeune, and to reimburse family members or pay providers for medical expenses for those who resided there for not fewer than 30 days between Aug. 1, 1953 and Dec. 31, 1987. [Source: VA News Release | March 14, 2017 ++]

Medical ID Bracelets & Pendants Update 01 ► How To Get

Medical IDs are an important benefit that veterans can claim, free of charge. It is Veterans Health Administration policy ([file:///C:/Users/User/Downloads/12009007%20\(1\).pdf](file:///C:/Users/User/Downloads/12009007%20(1).pdf)) that medical ID bracelets and pendants are made available for veteran patients at no cost. Medical ID is jewelry that could save your life. Medical conditions like diabetes, heart problems, PTSD, and injuries like embedded metal fragments can be engraved onto the surface of a medical ID bracelet or necklace. A veteran’s medical ID can also include prescribed medicines and emergency contacts. Veterans can choose from the below veterans’ medical alert bracelets and necklaces from American Medical ID, free of charge.



In the event of an emergency, this important information can help first responders and/or doctors in providing veterans with the precise treatment at the right time. Wearing a medical ID protects against potentially harmful

medical errors and eliminates unnecessary trips to the hospital. It is easy to claim your veteran medical ID with the help of your clinician. Follow these simple steps to obtain this benefit:

- Step 1: Download and print the VA information sheet to bring to your VA clinician
<https://www.americanmedical-id.com/media/wysiwyg/PDFs/AMI-VAHandout2016v3.pdf>
- Step 2: Select from the available medical ID styles on the information sheet.
- Step 3: Visit your clinician to discuss the engraving information on your medical alert bracelet or necklace.
- Step 4: Submit the VA information sheet to your clinician who will process your order with a Purchasing Agent.

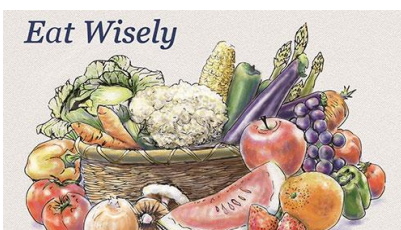
Your medical ID will ship to your desired address once the order is complete. [Source: Veteran Resources | March 3, 2017 ++]

VA In Vitro Fertilization Update 10 ► Available for Eligible Vets

Congress passed Public Law 114-223 on September 29, 2016 as part of a multi-agency continuing appropriations package. In Title II of the Act, Congress authorized VA to pay for assisted reproductive technologies including in-vitro fertilization (IVF), notwithstanding the longstanding ban on VA to pay or provide such care. In addition, Public Law 114-223 authorized VA to reimburse eligible veterans for adoption costs. On January 19, 2017, VA proposed its final rule to allow provision of assisted reproductive technologies, including IVF, to certain eligible veterans and their spouses. In order to be eligible, veterans must be service connected for a condition that makes them unable to procreate without assistance. VA is following guidance established by DOD, which generally limits funding for IVF to 3 completed cycles and 6 attempts. It is estimated that IVF results in pregnancy for about 80% of patients. The regulations for reimbursement for adoption costs have not yet been promulgated.

VA already offers a limited array of diagnostic and treatment options including fertility counseling, lab blood testing, surgical correction of structural pathologies, reversals of vasectomy or tubal ligation, medication and other diagnostic testing and procedures. It is estimated that genitourinary injuries and other conditions such as traumatic brain or spinal cord injuries will make up to 400,000 eligible for such care. Interested veterans should contact their local VA primary care providers to schedule appointments to determine their eligibility for assisted reproductive technologies, including IVF. In addition, women veterans may call the VA Women's Call Center at 1-855-VA-Women (1-855-829-6636). [Source: DAV | David W. Riley | March 8, 2017 ++]

VA MOVE! Program Update 01 ► 10 Tips on Losing Weight



VA's National Center for Health Promotion and Disease Prevention encourages Veterans and their families to jump start the spring season by using the following Eat Wisely tips.

1. Establish regular meal times. Try not to skip any meals because skipping meals leads to over-eating later in the day or evening.
2. Read food labels when you are purchasing food items. Pay attention to the portion size, the number of calories in each portion, and the amount of saturated and trans-fat in each portion.
3. Make small substitutions in your diet to cut calories. For example, drink water or unsweetened iced tea instead of high-calorie drinks. Choose low-calorie versions of salad dressing, cheese, sour cream, and mayonnaise. Go easy on fried foods –bake, broil, poach, or grill your food instead.
4. Plan meals and snacks, and make certain to have healthier food choices on hand. This makes it easier to resist trips to the vending machine and unhealthy, unplanned snacking.
5. Portion your servings to control the amount. For example, plate your meal in the kitchen using portion control. Bag snacks, such as potato chips or cookies into single serving sized containers or zip-lock bags. When you have a craving, eat the serving size only. Remember to pass on seconds.
6. Control calories when dining out. At fast-food restaurants, “down-size” food and drinks instead of “super-sizing” or better yet, try new restaurants that offer interesting healthier food choices. You can always check restaurant websites for nutrition information to select the healthiest options.
7. Share an entrée with a friend or family member. Do order a personal salad or side of vegetables. Ask restaurants to: “Please, “put the sauce on the side” (and try not to use it all), “hold the cheese”, “use low-calorie dressing” and as always, try to avoid fried dishes.
8. Identify your “guilty pleasures” such as ice cream, cake, cookies, or potato chips. Continue to enjoy them by trying the low-calorie versions or by eating less of the regular versions.
9. Avoid places and situations that trigger eating. For example, if walking past the bakery causes donut cravings, try changing your route. Replace candy on your desk with fruit and steer-clear of the office candy bowl. Avoid eating while watching television, reading, working on the computer, or driving. Many people do not recall all they have eaten while doing other things.
10. Be ACTIVE! Try substituting other activities for eating. For example, take a walk, walk with a friend, or dance to some music. Other activities allow you to avoid extra calories and can be more satisfying than eating.

Eating healthier doesn’t mean changing your entire eating pattern overnight. Small changes, made over time, can add up. March is National Nutrition Month. VA’s National Center for Health Promotion and Disease Prevention urges everyone to start small – one forkful at a time. ” Whether you’re planning meals to prepare at home or making selections when dining out, always “Put Your Best Fork Forward” to help find your healthy eating style. Some videos at <http://www.move.va.gov/video/index.asp#nutrition> from VA’s MOVE! Program can help you lose weight. [Source: VAntage Point | Lynn Novorska| February7, 2017 ++]

VA Caregiver Program Update 36 ► Shulkin Supports Expanding

Veterans Affairs Secretary David Shulkin supports expanding his department’s caregiver benefits to families of veterans of all eras, and thinks the move may be far less costly than most critics expect. In testimony before the House Veterans’ Affairs Committee earlier this week, Shulkin said he believes the current restrictions on the caregiver program — which limit many benefits solely to families of post-9/11 veterans — need to be updated. “I do believe it needs to be for all veterans,” he said, “particularly our older veterans who want to stay at home, and then maybe they wouldn’t have to leave their home and into an institution.” He said department officials have begun

a review of the costs and procedures for expanding the program, and will formally approach lawmakers with a plan in the months to come.

Currently, VA caregiver programs provide a monthly stipend, travel expenses, access to health insurance, mental health services, training and respite care for designated caregivers of injured or infirm veterans. But when Congress authorized those services in 2010, they made the the majority them only available to caregivers of post-9/11 veterans. Researchers estimate that covers only about one-fifth of the 5.5 million family members providing home care for veterans. Senate lawmakers included the caregiver expansion in legislation last year that passed out of committee but stalled before the full chamber. That failure was due in large part to concerns from critics and House lawmakers who called the plan too costly, with an estimated expense topping \$10 billion in the next five years. Shulkin estimated the anticipated cost at closer to \$4 billion, but also said that doesn't take into account other savings the expanded benefit could have.

"I believe that's not an accurate reflection on the true cost because I believe we are going to save money by not institutionalizing people," he said. Even a lower cost may not be enough to push the expansion through Congress. While President Trump has promised an increase in the fiscal 2018 VA budget, members of Congress in recent months have warned that the department's budget — which has nearly quadrupled since 2001 — has grown at a concerning rate. Shulkin did not give a timeline for when VA officials will present a new legislative proposal to Congress on the issue. [Source: MilitaryTimes | Leo Shane III, | March 10, 2017 ++]

VA Fraud, Waste & Abuse ► Reported 01 thru 15 MAR 2017



Houston, TX — Two area men have been ordered to federal prison following their convictions of conspiracy and wire fraud, announced U.S. Attorney Kenneth Magidson. A federal jury sitting in Houston convicted **Aaron Matthew Pierce**, 37, of Houston, following a five-day trial Nov. 14, 2016, while **Darrell Demond Arline**, 37, of Pearland, pleaded guilty on the first day of trial to all counts as charged - conspiracy to commit wire fraud and 14 counts of wire fraud. On 2 FEB, U.S. District Judge Alfred H. Bennett, who presided over the trial, handed Arline a 48-month sentence, while Pierce was ordered to serve a sentence of six months in federal prison, each to be followed by three and two years, respectively. Arline was further ordered to pay a \$316,512.13 in restitution and Pierce's restitution amount was set at \$18,016. In handing down the sentence, Judge Bennett noted that the victims of this crime were the military veterans of this country.

Arline was Goodwill's program manager for U.S. Department of Veteran Affairs (VA) Supportive Services for Veteran Families (SSVF) grants. These were multi-million dollar grants which were awarded to Goodwill Industries of Houston to aid Veterans and their families with housing. Arline recruited his friend, Pierce, to cash fraudulently issued SSVF grant checks by allowing his name and a sham sole proprietorship to be used to represent to Goodwill that he was providing emergency housing assistance to veterans and their families who were either homeless or about to become homeless.

Between Jan. 3, 2013, and Aug. 28, 2014, Pierce and Arline entered into a conspiracy to steal money from the grant by submitting fraudulent purchase orders resulting in the theft of grant monies. The SSVF grants were intended to provide supportive services to very low-income military veteran families who were residing in permanent housing,

were homeless and scheduled to become residents of permanent housing within 90 days and after exiting permanent housing or were seeking other housing that was responsive to such very low-income military veteran family's needs. Previously released on bond, Arline was taken into custody following the sentencing where he will remain pending transfer to a U.S. Bureau of Prisons facility to be determined in the near future. Pierce was permitted to remain on bond and voluntarily surrender to a U.S. Bureau of Prisons facility to be determined in the near future. [Source: U.S. Attorneys » Southern District of Texas » News++]

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Las Cruces, NM — **Donah E. Davison**, 54, of Las Cruces, N.M., pled guilty 15 FEB in federal court to theft of government property and forgery charges arising out of a scheme to defraud the Department of Veterans Affairs (VA). Davison was charged on Nov. 9, 2016, in a 36-count indictment. The first 27 counts of the indictment charged Davison with embezzling money belonging to the VA by depositing 27 "surviving-spouse" benefit checks to which she was not entitled into her own bank account. Davison was charged with committing these crimes in Dona Ana County, N.M., between Dec. 2011 and March 2014. The remaining nine counts of the indictment charged Davison with forging the intended payee's name on checks nine times between April 2012 and Jan. 2014. During the proceedings, Davison pled guilty to the 36-count indictment.

In the plea agreement, Davison acknowledged that her mother began receiving "surviving-spouse" benefit checks from the VA in 1970 that were payable to her only. Davison admitted that when her mother died in 1997, she failed to inform the VA of her mother's death and continued to collect and deposit the checks into her own bank account after signing her mother's signature on the back of the checks. Davison further admitted that the VA's records reflect that since 2003, she stole \$147,557.69 from the VA. According to court records, the VA did not maintain records prior to 2003. Under the terms of the plea agreement, Davison will be sentenced to four months in prison followed by four months of home confinement. Davison also will be required to serve a period of supervised release to be determined by the court. Davison will also be required to pay \$147,557.69 in restitution to the VA. A sentencing hearing has yet to be scheduled. [Source: U.S. Attorneys » District of New Mexico » News | February 15, 2017 ++]

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Wichita, KS — An Army veteran from Reno County has been indicted on federal charges of collecting \$63,000 in benefits by pretending to be blind, U.S. attorney Tom Beall said 2 MAR. **Billy J. Alumbaugh**, 61, and his ex-wife, Debra K. Alumbaugh, both of Turon, Kan., are charged with one count of conspiracy to defraud the government and one count of theft of government funds. An indictment unsealed today alleges Alumbaugh fraudulently received a supplemental monthly pension by claiming he was legally blind and needed assistance to perform routine activities. Alumbaugh falsely claimed he was unable to drive and needed assistance with tasks such as reading medication labels, grocery shopping and going to doctor appointments.

The indictment alleges Alumbaugh made periodic trips to the Veterans Administration hospital in Wichita, where specialists were unable to identify medical reasons for his blindness. From 2009 to 2016, while he was receiving supplemental assistance, he maintained a Kansas driver's license that did not require corrective lenses. He routinely drove his car during that time. On October 2016 he was seen with his ex-wife arriving at the VA hospital in Wichita. She was driving and helped him out of the car and into the building. She did the same when the appointment was over. After driving a few blocks, they stopped the car and switched seats so he could drive. If convicted, they face up to five years in federal prison and a fine up to \$250,000 on the conspiracy charge, and up to 10 years and a fine up to \$250,000 on the theft count. [Source: U.S. Attorneys » District of Kansas » News | March 2, 2017 ++]

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Chesapeake, VA — The co-owner of a Chesapeake barber college was sentenced 8 MAR to more than five years in prison on charges he defrauded the Veterans Affairs Department out of more than \$4.5 million. His wife, the other owner, was to be sentenced 10 MAR in U.S. District Court in Norfolk. But what about the more than 350

veterans who collected over \$10.5 million in GI Bill benefits while attending the “sham school,” where the unofficial motto was “We’re here to earn, not to learn”? That remains unclear. To date, no students have been charged, and a spokesman for the U.S. Attorney’s Office for the Eastern District of Virginia declined to comment. Joshua Stueve cited an “ongoing investigation.”

When they finish looking into the College of Beauty and Barber Culture in Chesapeake, prosecutors will have to review each student’s case. But even if they wanted to pursue charges against 350-some students, they probably couldn’t. The Norfolk office secured only 172 federal indictments total in 2016. Chesapeake Commonwealth’s Attorney Nancy Parr said this week that federal authorities had not referred any cases relating to the barber college to her office. **William Grobes IV**, 45, pleaded guilty in November to two felonies: conspiracy to commit wire fraud and engaging in monetary transactions in property derived from specified unlawful activity. His wife, Katherine, pleaded guilty the following month to one count of conspiracy.

The charges against the Grobeses relate to their operation of the school from October 2011 through this past September. According to court documents, the school collected more than \$4.5 million under the Post-9/11 GI Bill, and the veteran students collected \$10.5 million more for housing allowances, books and supplies. The court documents said veterans “rarely, if ever,” received the required hours of instruction. They didn’t take graded tests or complete projects. Some didn’t even have a textbook. During that time, only 11 took the state licensing exam. Seven passed and got a barber or cosmetology license, according to court documents. It was possible because of a change the VA implemented in October 2011 that allowed veterans to use the Post-9/11 GI Bill to pursue noncollege degree programs. The department pays tuition and fees directly to the school on the veterans’ behalf. Other benefits, including housing, are paid to the veterans.

U.S. District Judge Rebecca Beach Smith cast the students of the Grobeses’ school as victims who had been deprived of their educations. But Grobes’ attorney noted that the VA does not require veterans to secure a degree or certification from the schools where they use their GI benefits. According to court documents, the Grobeses provided false information to the department about the number of hours and quality of instruction veterans were receiving at the school, which also serves as a barber shop and hair and nail salon in the Village Square Shopping Center off South Military Highway. Attendance at the school, which remains open, wasn’t mandatory. The Grobeses had veterans sign in and out each day to “create the appearance” of attending for the required number of hours. Students “often merely socialized, ate, or read non course-affiliated materials,” according to court documents. The Grobeses, however, took careful steps to prepare for the VA’s annual compliance surveys, the documents said. They directed students to be present for the inspections, and they hand-selected veterans for the VA staff to interview. They also lied to comply with VA rules, saying nonveteran students were attending the school.

The scam came to light thanks to a student who complained to the VA. Assistant U.S. Attorney V. Kathleen Dougherty argued 8 MAR that William Grobes deserved a sentence of five years and three months. She noted that “on the VA’s dime,” he and his wife quickly paid off a five-bedroom lakefront home in Chesapeake and bought new cars every year for five years straight. There also was a “weeklong international cruise” in May 2015. When investigators searched the Grobeses’ home in September, they found nearly \$200,000 in cash inside a safe in the master bedroom’s walk-in closet, documents said. Defense attorney Jon Babineau asked the court to show mercy. He argued Grobes was a hard worker and a giving person who got “addicted” to the money. Babineau said Grobes was dedicated to paying full restitution. He noted that the government had already received \$1.3 million from his client, and that Grobes was selling his home, furniture and cars. [Source: The Virginian-Pilot | Scott Daugherty | March 9, 2017 ++]

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Rochester, NY — Federal prosecutors say a psychiatrist at a Veterans Affairs hospital in western New York bilked a health care provider out of nearly \$200,000 by charging for private services he didn’t provide. The U.S. Attorney’s Office in Rochester says 52-year-old **Dr. Xingjia Cui**, of Pittsford, has been charged with health care fraud, money

laundering and tax fraud. Prosecutors say Cui is a full-time employee of the Veterans Affairs Medical Center in Canandaigua (kan-an-DAY'-gwuh) and also has a private practice. Officials say through his practice he billed a health care provider \$198,820 for services he didn't conduct. Cui was released after an appearance before a federal judge. He's scheduled to return to court May 24. It couldn't be determined from prosecutors if he has a lawyer who could comment on the charges. [Source: Associated Press | March 10, 2017 ++]

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Rochester, NY — The co-owner of a Chesapeake barber college was sentenced 10 MAR to five years in prison on charges she helped her husband scam the Veterans Affairs Department out of more than \$4.5 million. **Katherine Grobes** learned her fate two days after her husband was sentenced for his role in the conspiracy. William Grobes IV, 45, received three more months than his wife. She, however, must complete 400 hours of community service; he was ordered to complete 150. **William Grobes** pleaded guilty in November to two felonies, and his wife pleaded guilty the following month to one. The charges relate to the couple's operation of the College of Beauty and Barber Culture in Chesapeake from October 2011 through this past September. According to court documents, the school collected more than \$4.5 million under the Post-9/11 GI Bill. More than 350 veteran students collected an additional \$10.5 million for housing allowances, books and supplies.

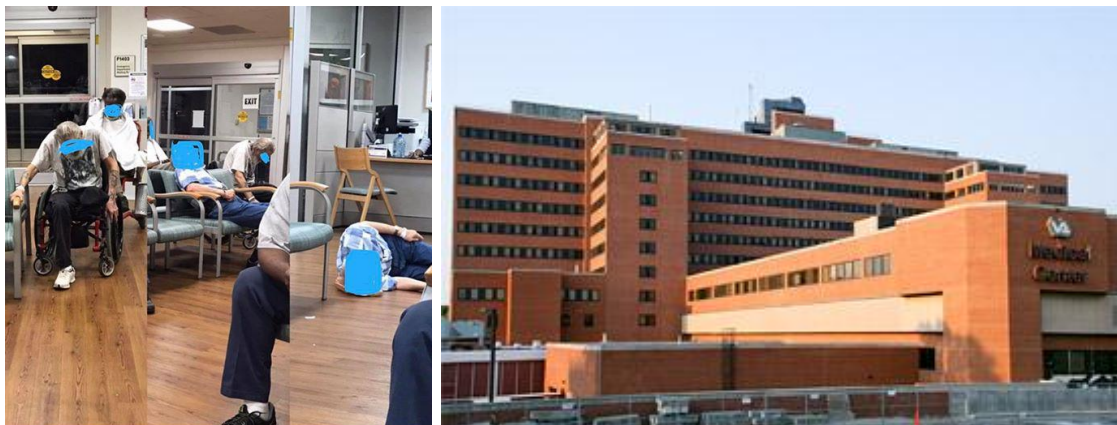
Prosecutors decried the school as a "sham" that most students attended merely to liquidate their GI Bill benefits. Court documents said veterans "rarely, if ever," received the required hours of instruction. They didn't take graded tests or complete projects. Some didn't even have a textbook. During that time, only 11 took the state licensing exam. Seven passed and got a barber or cosmetology license, according to court documents. The Grobeses, however, took careful steps to prepare for the VA's annual compliance surveys, the documents said. They directed students to be present for the inspections, and they hand-selected veterans for the VA staff to interview. They also lied to comply with VA rules, saying nonveteran students were attending the school. The scam came to light after a student complained to the VA. Assistant U.S. Attorney V. Kathleen Dougherty argued for Katherine Grobes to serve at least three years and 10 months. The defense asked for lenience. U.S. District Judge Arenda Wright Allen decided a longer sentence was appropriate. She noted the size of the scam, which was the largest involving VA education benefits to ever come before a court. [Source: The Virginian-Pilot | Scott Daugherty | Mar 10, 2017 ++]

VAMC Durham NC ► Patients Seen Being Ignored

A former Marine and his wife say the scene inside the Veterans Administration hospital in Durham, North Carolina, was so shocking that they felt compelled to take pictures and post them to the wife's Facebook page at <https://www.facebook.com/hanna.dickson/posts/10208647901980267>. Now thousands of people are expressing outrage and the head of the medical center says an employee involved has been removed from patient care pending an internal review. Hanna and Stephen McMenamin posted photos of two veterans who were struggling in the waiting room. They said both older men were ignored for hours despite complaining of severe pain. They said one practically fell out of his wheelchair, and the other finally lay down on the floor after being denied a place to rest.

Jesse Lee, a Vietnam veteran, told WRAL-TV that he's the man in the wheelchair. He said he went to the VA for severe phantom pains after a leg amputation. "Somebody in real bad pain should be seen," Lee said. "It felt like a railroad spike was going through my foot. It's like one of the worst pains you've ever felt in your life." Lee said he was forced to wait for hours before he got medical attention. McMenamin said a particular VA nurse appeared to ignore the pleas from patients. The other man was "very shaky, trembling and he was asking for help. He was getting pretty desperate," Stephen McMenamin said. In her Facebook post, Hanna McMenamin said the man was ignored when he asked multiple times for a place to lie down. Unable to catch his breath, the couple said the man

stretched out on the ground until employees at the Durham VA Medical Center made him get back up. "That's somebody's dad, that's somebody's grandfather," Hanna McMenamin said.



Medical Center Director DeAnne Seekins has thanked the couple for alerting them to the problem, and said disrespecting veterans will not be tolerated. "It is an honor to serve America's heroes and actions that do not align with our core values will not be tolerated," she said in a statement. "We pride ourselves on providing the highest quality care to the Veterans we serve and being responsive to our patient's needs. Veterans deserve nothing less."

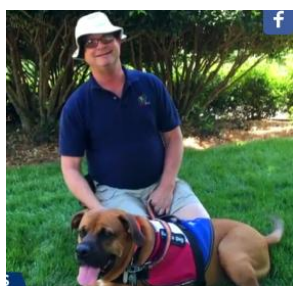
CBS North Carolina Investigates immediately took the concerns to DeAnne Seekins, Director of the Durham VA, for answers. She says the photos don't tell the whole story. Seekins says they checked surveillance video and records from the night and that the patients were helped. She says she believes they were given excellent care. CBS North Carolina asked for copies of that surveillance video but the VA would not provide it. "I feel very, very good because those veterans received high quality care," Seekins said. She says there was a long wait, but it was a busy night at the ER, with 23 veterans being cared for ahead of the ones pictured and 26 more veterans in the waiting room. She says all the veterans were triaged and treated based on the severity of their illness. Two of the veterans, according to Seekins, did not even know their picture was being taken and are asking for the post to be taken down. "One veteran is extremely upset because he said 'I'm a very private person, you know I was here, I was sick, I didn't need someone taking my photograph,'" Seekins said. She says the other veteran even apologized for laying on the floor.

The McMenamins say this is not true, and stand by their post. They say the veteran who was slumped in his wheelchair supports their efforts and was suffering major pain while waiting. Seekins has thanked the couple for alerting them to the problem, and said disrespecting veterans will not be tolerated. "It is an honor to serve America's heroes and actions that do not align with our core values will not be tolerated," she said in a statement. "We pride ourselves on providing the highest quality care to the Veterans we serve and being responsive to our patient's needs. Veterans deserve nothing less." [Source: The Associated Press & CBS WNCN | February 28, 2017 ++]

VAMC Durham NC Update 01 ► Patient Suicide in Parking Garage

Paul Shuping, a 63-year-old Navy veteran, parked his car at the Durham VA Medical Center on 15 FEB and then used an old family .22-caliber rifle to end his life. Shuping, who is among the estimated 20 veterans who commit suicide each day in the U.S., wasn't discovered dead in the parking garage for six days. "I was devastated. We were all devastated when we heard what happened," said Dr. Terry Morris, who became friends with Shuping after her

nonprofit, Vets to Vets, matched him with service dogs. "He seemed like he was thriving, and certain events happened recently that kind of took him in a downward spiral."



James Alston of the Triangle Veterans Outreach Center helped guide Shuping through the red tape at the Department of Veterans Affairs for partial disability benefits, which took two years to obtain. The VA's recent decision to deny Shuping full benefits set him off, Alston said. "His biggest concern when he came in was financial," he said, adding that he thinks Shuping picked the VA hospital's parking garage for his final act for a reason. "I really think he was trying to send a message for all veterans who are crying out for help," he said. Donald Shuping said he also believes the VA's benefits process played a role in his brother's suicide, but he doesn't blame the Durham VA hospital. "To the VA's benefit, I think he received excellent care," Donald Shuping said.

Sharonda Pearson, a spokeswoman for the Durham VA, didn't discuss why the hospital's police officers didn't discover Paul Shuping earlier, saying only that he found inside his car "during one of our many daily patrols." "The loss of one veteran by suicide is one loss too many," Pearson said in a statement. "This veteran volunteered many hours to our animal therapy program and was well known and beloved by Durham VA staff." Paul Shuping first talked about taking his life after a 2013 injury, a bout with MRSA, a coma and a stroke, his brother said. He even discussed his feelings in a video about the Vets to Vets program that a University of North Carolina at Chapel Hill journalism student made weeks before his death. "I actually found myself not wanting to live and had made a plan to commit suicide," Shuping said, talking about how the service dogs gave him purpose and how he used his companions to help other vets.

The VA crisis line for veterans with suicidal thoughts receives more than 200,000 calls a year and is hiring 60 more suicide intervention counselors to meet the need. The agency also has created several apps where veterans can get help at the touch of finger any time they need it. Gary Cunha, the Durham VA hospital's suicide prevention coordinator, said "a community partnership" is needed to convince troubled veterans there's hope and not to take their lives. "Maybe they couldn't find the meaning and purpose in their life, but I'll do my level best to give their life meaning and purpose," Cunha said. Even that might not have been enough for Paul Shuping, however, as his brother said the continual fight for benefits just became too much to bear. "Veterans find themselves disabled and lose whatever they have for care and end up fighting the government for years to get their benefits," Donald Shuping said. "(I believe he wanted) to bring the light to the situation that so many veterans are in to get their rightful benefits." A memorial service for Paul Shuping was set for 11 MAR in Durham. [Source: WRAL.com Investigates | March 6, 2017 ++]

VAMC Hines IL Update 06 ► Vet Concerns Aired

American Legion Fox River Geneva Post 75 was host to more than 80 veterans 3 MAR, who packed the hall's meeting room so a panel of experts could hear their concerns. U.S. Rep. Randy Hultgren, R-Plano, Dr. Steve Braverman, director of the Edward Hines Jr. Veterans Administration Hospital and Hughes Turner, executive

director of the VA Regional Office in Chicago, fielded questions for more than an hour. The Kane County Veterans Assistance Commission hosted the event.

One concern that veterans have is long travel times to get to Veterans Administration hospitals, as explained by Todd Latham, commander of VFW Post 1486 in Sandwich. Latham said the trip to Hines is an hour and a half one way. “I found it very difficult to get vets in there to receive their care,” Latham said. “It takes several hours to receive their care, and then drive an hour and a half home. To me, that is unacceptable.” Latham said a mobile unit in North Aurora is closer, but the care available is limited. Braverman said that Hines was in the process of being upgraded on several levels, from facade improvements – as portions of the brick were falling down – to upgrades to the boiler. It’s also getting a new MRI facility. “We are committed, as best as we can, to get the services, equipment and facilities for what your service has earned you the right to have,” Hultgren said.

To another question about allowing veterans the right to go to “regular” doctors for care instead of traveling to Hines, Hultgren said he could see the process opened up for them to see any doctor. “I think there is a big group of us who support that, but not enough,” Hultgren said. “My hope is we will get there ... [and] allow our veterans to go where they want to go.” Tammy Anderson, superintendent of DeKalb County Veterans Assistance, asked what is being done to address notices of disagreement that are filed when veterans’ claims are denied. “If we file a notice of disagreement on a veteran claim, it’s three years,” Anderson said. “We’re looking at 2020.” Turner said the reality was there is a backlog, and – at the moment – claims from 2014 are currently being dealt with. “We are trying to address that by modernizing the appeals process,” Turner said. “That is the best answer I can give you.”

While the veterans were meeting at the Legion Hall, about 60 protesters from Indivisible Kane County and other groups stood in silence across the street on the sidewalk in front of the Geneva Public Library. Members of the group have sought a town hall with Hultgren at various recent protests. They said, this time, they would be silent out of respect for the veterans. [Source: Northwest Herald | Brenda Schory | March 4, 2017 ++]

VAMC Tampa FL Update 07 ► Dying Wish Wedding

The groom needed help slipping the ring on his bride’s finger, and their first kiss was through an oxygen mask. Not a typical wedding scenario, but this wasn’t a typical wedding. Army Veteran Homer Johnson married long-time friend Jane Gora 2 MAR from his bed in the James A. Haley Veterans’ Hospital Medical Intensive Care Unit (Tampa) while surrounded by a few close friends, family and hospital staff. The couple had originally planned to be married 17 JUN, but 75-year-old Homer fell ill about two weeks ago and was admitted to the hospital. His condition worsened to the point that doctors told the family he would probably not live more than a few more days, so the couple decided to move up the wedding and hold it in the hospital.

In less than 24 hours hospital staff members came together to ensure the day would be a memorable one for the pair. Jane said her first hurdle was getting the marriage license from Hillsborough County since both she and Homer would normally need to apply in person, but with the help of Social Worker Christine Edmond she was able to get it. “Because Homer wasn’t able to be there, I had to have a letter from the doctor saying he wasn’t able to get out of his bed,” Jane said. “The social worker did the letter and the doctor signed it, and then I took it up there. I had to write a note to the judge saying it was important to us to get married and that it was probably not a good idea to wait too long. They OK’d it and I came back here and the wedding happened.”

Nurse Anitha Mathew and acting nurse manager Audriana Pevec also rallied their staff around the couple to ensure their wedding was a memorable one. “We started getting the wheels rolling to see what we could do for this Veteran,” Pevec said. “I think this was a special moment and we wanted to do what we could to make sure this was special for them.” Pevec discovered nobody could recall a wedding like this ever taking place at the Tampa VA hospital. She coordinated with Staff Chaplain Dennis Mathai to ensure the couple’s minister was cleared to perform

the ceremony in the hospital, and even helped arrange for a wedding cake for the ceremony. “Our nurse manager called me and said there was going to be a wedding today, so I quickly called the people in the kitchen who make things happen and, and magically, we had a wedding cake,” said Registered Dietician Lynn Hiller. “I think this is wonderful. I’m happy we were able to be here for them. It is a privilege to be here for them.”



Jane and Homer Johnson hold hands at his bedside after their wedding ceremony at the James A. Haley Veterans' Hospital Medical Intensive Care Unit March 2.

The staff also purchased flowers for the bride, decorations and balloons to brighten up the hospital room, a cake knife that commemorates their special day, and a card filled with congratulations from everyone on the staff. “It all just kind of came together,” Prevec said. “It was really nice to see everyone help. I think it’s one of the least things we can do. It really is an honor.” While Homer had trouble speaking because of his medical problems, he was able to express his appreciation to everyone involved not only in the wedding, but in the care he’s received since being admitted to the hospital two weeks ago. His new bride felt the same way. “I’m thankful for all the support,” Jane said. “You can’t do this without them, without the support of the staff and the people around you. It’s like having a whole hospital of family.” Homer Johnson passed away with his wife by his side 4 MAR. [Source: VAnTage Point | Ed Drohan | March 6, 2017 ++]

VA HCS Phoenix Update 29 ► \$50 Million Malpractice Lawsuit

Closing arguments wrapped up 3 MAR in the malpractice trial initiated 27 FEB against the Phoenix VAMC. The judge announced she would make a ruling on the \$50 million lawsuit the following Monday. Steve Cooper is the U.S. Army veteran who filed the lawsuit. He walked out of Federal Court in Phoenix Friday hoping for justice. The Valley veteran knew that no ruling or amount of money will save his life but he wants the Phoenix VA held accountable for his terminal illness. "Most vets have difficulty getting health care but in Mr. Cooper's case once they get there they're ignored," said Cooper's attorney Greg Cooper and we think hopefully the VA will be held responsible and it will make a difference ." The case is the first major trial stemming from the Phoenix VA scandal a couple years ago, which uncovered excessive delays in care that resulted in the deaths of dozens of Veterans.



Former Air Force Staff Sgt. Ron Valdez was in court 27 FEB supporting his fellow veteran. He is hoping the trial will pave the way for vets to receive health care away from the VA. "I hope it brings awareness and hopefully give vets the choice everybody else has," said Valdez. "Anybody on AHCCCS has the chance to go to their own doctor. Give us that same choice and let us pick what docs we want to see." In the last week of the trial, Cooper's attorneys tried convince a federal judge that Cooper's stage four prostate cancer could have been easily treated if he had received proper medical care. The \$50 million lawsuit accuses the Phoenix VA of medical malpractice, stemming from a nurse practitioner's decision not to recommend further tests after a prostate exam showed some abnormalities. During closing arguments Friday Cooper's attorneys said:

- What the VA provided was below the standard of care.
- Cooper would have been cured if treated properly.
- The VA's delays cost Cooper his life.

Attorneys for the VA said:

- The nurse practitioner complied with the standard of care.
- Cooper has gone out of his way to make the VA look bad.
- Cooper is in remission and looks good.

Patton told the judge that Cooper has less than five years to live. A number of fellow veterans and their families came out to support Cooper during the trial. "I have a son that served, and a nephew that served," said veteran Steven Shockme. "It was important to be here." "I'm hoping it's a win for Steve and a win for other veterans," said Jill Ballion, whose father was a U.S. veteran. It turned out to be a partial win. U.S. Magistrate Judge Michelle Burns said, "There's no question Mr. Cooper has suffered," noting earlier that the nurse practitioner should have recognized the asymmetric quality of Cooper's prostate was a possible sign of cancer. He awarded Cooper \$2.5 million. The U.S. Attorney's Office, which defended the VA in the lawsuit, declined to comment on the verdict. [Source: 3TV/CBS 5 | March 6, 2017 ++]

*** Vets ***



Vet Groups Update 01 ► White House Meeting w/o Trump

Veterans groups had their first major White House meeting of the new administration on 7 MAR, covering a host of priorities in what they called a positive exchange of ideas. But most wished President Trump had been there. The meeting included Veteran Affairs Secretary David Shulkin and several senior White House staffers, but not the president himself. Members of several of the most well-known veterans service organization have been lobbying for a one-on-one with the new commander in chief for months, but so far have not gotten onto his schedule. “This was a great meeting today, and we’re ready for a meeting with the president now, too,” said Verna Jones, executive director at the American Legion. “It’s time for that.” Officials from the Legion, Veterans of Foreign Wars and Disabled American Veterans have testified before Congress in recent weeks that their requests for a sit-down with the president have gone unanswered.

Last month, Trump met with health care officials and Shulkin to discuss possible improvements to department offerings, but no veterans groups were included. White House officials have countered that veterans issues are a priority for the new president, who has been in office less than two months. During his speech to Congress last month, Trump promised an increase in the VA budget and to “deliver” for veterans by improving VA operations. Jones said that she is encouraged by that message, but also thinks a direct conversation with veterans groups is needed for the president to better understand the scope of the challenges ahead. “President Trump ran a campaign on helping veterans,” she said. “When you look at who he has met with since winning, he has to make sure to make veterans a priority still.” Veterans groups involved in the meeting left the White House with praise for the administration’s focus on improving healthcare access, handling accountability issues within the department and looking for ways to help veterans beyond federal programs.

The meeting included representatives from Student Veterans of America, the Travis Manion Foundation, the Military Order of the Purple Heart, Got Your 6, Concerned Veterans for America and Wounded Warrior Project along with the “big six” veterans groups — The Legion, VFW, DAV, Paralyzed Veterans of America, Vietnam Veterans of America and AMVETS. Bill Rausch, executive director at Got Your 6, said White House staffers discussed challenges and goals with each of the advocates and reassured the group that they’re working closely with Shulkin on VA reforms. He also said White House staffers promised regular meetings with the group to gauge progress on both department improvements and larger engagement with community veterans issues. Dan Caldwell, director of policy for CVA, said he was pleased with the response. His group, with ties to conservative funders, was largely shut out of such conversations during President Obama’s time in the White House. “It doesn’t matter how much face time you get with the president,” he said. “What matters is the policy the White House is going to implement. We want to meet directly with the people writing the policy, and that’s what we got to do.” [Source: MilitaryTimes | Leo Shane III | February 7, 2017 ++]

Burn Pit Toxic Exposure Update 41 ► Amie Muller Has Died

National Guard veteran Amie Muller believed deployments to Iraq caused the cancer that killed her. She worked and lived next to burn pits that billowed toxic smoke night and day at an air base in northern Iraq. After returning to Minnesota, she began experiencing health problems usually not seen in a woman in her 30s. Muller died in late February, nine months after being diagnosed with Stage III pancreatic cancer. On 24 FEB, more than 800 of her friends and family gathered at a memorial service in Woodbury to remember the life of the 36-year-old mother of three. A pastor noted her loss was both painful and seemingly incomprehensible. “I wish there was a simple way to explain what has happened to Amie. Why Amie is gone,” said Pastor Lisa Renlund. “Life truly isn’t that simple. It can get messy. It can feel complicated. It can seem unfair.”

But others also are remembering Muller’s battle to win recognition from the U.S. government for victims of the burn pits, which have the potential of becoming the Iraq and Afghanistan wars’ equivalent of the Vietnam War’s Agent Orange. It took nearly three decades for the U.S. government to eventually link the defoliant used in Vietnam to cancer. Muller first told her story in the Star Tribune last year shortly after she was diagnosed. In an interview in August, she spoke about the frustrations of a life put on hold. Fatigued from chemotherapy and complications from

medical procedures, she also talked about getting the word out about what she believed is the burn pits' toxic legacy. "It's kind of like what you'd imagine what hospice would feel like, where you are just waiting and waiting and you don't have any energy," she said. "But I want to make sure other people are getting their voices heard, too."



Julie Tomaska & Amie Muller



June 2016

In 2005 and in 2007, Muller was deployed to Balad, Iraq, with the Minnesota Air National Guard, embedded with a military intelligence squadron. The burn pit near her living quarters there was one of the most notorious of the more than 230 that were constructed at military bases across Iraq and Afghanistan before their use was restricted in 2009. Items ranging from Styrofoam to metals and plastics to electrical equipment to human body parts were incinerated, the flames stoked with jet fuel. Covering more than 10 acres, Balad's burn pit operated at all hours and consumed an estimated 100 to 200 tons of waste a day. It was hastily constructed upwind from the base, and its plumes consistently drifted toward the 25,000 troops stationed there.

Muller fatigued easily after returning home and began to wonder whether a host of ailments from migraines to fibromyalgia were connected to her military service at Balad. She was diagnosed with cancer last May. Julie Tomaska deployed with Muller in 2005 and 2007 and the two lived side by side. Shortly after coming home, Tomaska, too, suffered from chronic fatigue, headaches and digestive problems. Her disability claim with the VA was approved with a diagnosis of "environmental exposures." The two became almost inseparable after Muller was diagnosed. Tomaska helped navigate the paperwork for Muller's disability claims and attended treatments with her at the Mayo Clinic, shooting selfies in the exam room. She was at her friend's bedside when she died. Now, Tomaska and Muller's family hope to establish a foundation for military families affected by pancreatic cancer.

"I promised her that I would make sure that everybody knew about this," she said. "It's hard to be so proud and happy about the military accomplishments you made when you feel like you died because of this, and because we're having friends drop like flies. "When we came home we felt like we were lucky and it just doesn't feel like that anymore." The Department of Veterans Affairs' position on burn pit exposure has not changed. It believes research has not established evidence of long-term health problems. But there has been movement. A registry for service members based on where they were stationed during deployments now includes more than 100,000 people. Go to <https://veteran.mobilehealth.va.gov/AHBurnPitRegistry/index.html#page/about> if you believe you may have been exposed.

VA will determine eligibility for the Airborne Hazards and Open Burn Pit Registry based on deployment information from the Department of Defense (DoD). To be eligible, you must be a Veteran or Servicemember who deployed to contingency operations in the Southwest Asia theater of operations at any time on or after August 2, 1990 (as defined in 38 CFR 3.317(e)(2)), or Afghanistan or Djibouti on or after September 11, 2001. These regions include the following countries, bodies of water, and the airspace above these locations: Iraq -- Afghanistan -- Kuwait -- Saudi Arabia -- Bahrain -- Djibouti -- Gulf of Aden -- Gulf of Oman -- Oman -- Qatar -- United Arab Emirates -- Waters of the Persian Gulf, Arabian Sea, and Red Sea. [Source: Star Tribune | Elizabeth Flores | February 24, 2017 ++]

Wisconsin Veterans Homes Update 06 ► King Home Survey Results

The U.S. Department of Veterans Affairs has found five deficiencies at the state-run King veterans home as part of a review prompted by a request from U.S. Sen. Tammy Baldwin. The report comes as the veterans home has seen its previous five-star ratings decline over the past year. On 3 MAR, new state Department of Veterans Affairs Secretary Daniel Zimmerman announced that he was reassigning facility commandant Jim Knight to another administrative role in the agency. On 6 MAR, Baldwin's office released a copy of an 81-page report based on what is known as a "for-cause survey," which is conducted based on a suspected violation, rather than as part of a regularly scheduled review.

She requested the survey on 4 JAN in response to news accounts of "neglect, staffing shortages and crumbling facilities" and "systematic attempts to cover up and obscure incidents from state and federal oversight." "Our veterans and their families have made incredible sacrifices for our country and they deserve the highest quality of care," Baldwin (D-Madison) said in a statement. "This survey shows that veterans are not receiving the proper care they have earned and that all actions available must be taken to improve safety and care for our veterans at King." The survey conducted Jan. 10-13 found that three federal standards for nursing homes weren't being met and two others were being partially met. The shortcomings included:

- The facility neglected to provide necessary care and services to protect one of 30 sample residents from injury. The resident, a quadriplegic, fell out of a bed and suffered a skull fracture.
- The facility failed to ensure a written comprehensive care plan was developed for a resident — the same one with the skull fracture — with known muscle spasms, history of seizures and to monitor the alternating pressure mattress to prevent a fall.
- Monthly fire service tests on the facility's passenger care elevators routinely were not preformed. The facility was performing quarterly tests in accordance with less stringent state standards.

The partial shortcomings included:

- A resident's care plan was not updated to reflect the measures needed for prevention of aspiration pneumonia.
- In one case a nurse administered the wrong cough medicine to a resident, even after the resident mentioned that the medicine being administered was the wrong color. The nurse acknowledged being distracted and not checking the patient's records.

The Veterans Affairs Medical Center director sent the survey results to the state on 9 FEB requesting a corrective action plan, which was due back on 10 MAR. Veterans nursing homes are funded and ultimately overseen by the federal government, but operated and inspected primarily by state agencies. DVA spokeswoman Carla Vigue said the October "isolated incident" involving the resident who suffered a broken skull was immediately reported to the state Department of Health Services' Office of Quality Assurance and the Federal VA. "We are proud that these veterans have chosen to live with us and we strive to provide them with the highest level of care," Vigue said. "As always, we take very seriously any issues that might arise in our facilities." Vigue said the department has put a correction plan in place. "We use each of these surveys as an opportunity to improve our service to veterans," she said.



It was the second time in less than a year that Baldwin had requested a for-cause survey for King. She previously requested a survey on April 21, 2016, to investigate inadequate staffing levels, infrastructure decay, bacteria discovered in a water heater and the alleged misuse of federal funds for administrative positions. The VA opted not to conduct a for-cause survey at that time and instead conducted its annual survey of the facility in June. As recently as October, Gov. Scott Walker and former DVA Secretary John Scocos countered claims of poor living conditions and management problems at King by touting its four facilities receiving five-star ratings. Since then the ratings have been downgraded at two of the facilities, Olson and MacArthur halls, due to poor care connected to a 94-year-old resident's death and seven citations identified during a September inspection.

The death of a resident resulted in a citation in March, but the facility's federal rating wasn't downgraded until late November, partly because of a clerical error. A potentially hazardous liquid oxygen spill in May went unreported to residents for months, prompting a whistleblower to submit a complaint to state and federal lawmakers. A state inspector found no evidence of a past violation related to the incident during an 10 OCT visit, but was able to determine during a 8 DEC visit that it constituted past non-compliance that had been corrected. The Legislative Audit Bureau is conducting a review of King that is due out this spring. [Source: Wisconsin State Journal | Matthew DeFour | March 7, 2017 ++]

DAV Legislative Presentation ► 28 FEB VA Committee Hearing

On 28 FEB, a disabled Alabama veteran delivered a powerful testimony to the Senate Veterans Affairs Committee. The moving moment came from David Riley, a Mobile native and National Commander of the Disabled American Veterans (DAV). Riley's military career included service with the Army and the Coast Guard, where he contracted septic shock pneumococcus sepsis. After falling into a coma, he awoke to find that all four limbs and some internal organs had been amputated due to his infection.

"As the realization of what had occurred settled over me, I felt despair at the loss of my limbs. I could not imagine how the rest of my life would have any value or happiness," Riley told the committee. "I know that I am not the first person, nor will I be the last, whose life was permanently changed by a traumatic injury or illness incurred in military service; but at the time it was hard to find any perspective or maintain any hope. This pivotal moment is when DAV entered my life."

He has since become a leading advocate for disabled veterans, and used his platform to urge Congress to take further action that would improve care for servicemen and women who have experienced similar health-related hardships. "As long as there is a need for a military, there will be a need for DAV, the VA and other organizations dedicated to caring for those who served. And history shows, sadly, that this need is not likely to go away," he said. The priorities that Riley suggested to the Senate panel for consideration included revamping the current "choice" healthcare program available to vets, streamlining VA processes and budgeting, and reforming accountability and transparency practices.



DAV Cdr. David Riley

Rep. Bradley Byrne was on hand at the meeting to introduce Riley. “It is a distinct honor to represent someone like David Riley, a person who has given so much to his country and is now continuing to serve his fellow veterans,” Rep. Byrne said. Rep. Byrne is sponsoring a bill that would expand private healthcare access to all veterans under the current VA Choice Program, which is currently only available to those who have waited longer than 30 days for care from a VA hospital or live more than 40 miles away from a VA facility. You can watch the DAV’s VA Committee presentation inclusive Riley’s testimony here, which begins around the 33 minute mark at <https://www.veterans.senate.gov/hearings/legislative-presentation-of-disabled-american-veterans-022817>. [Source: Yellow Hammer | Christy Riggins | March 6, 2017 ++]

DAV Transportation Network Update 01 ► Free Travel to VA Medical Facilities

DAV operates a fleet of vehicles around the country to provide free transportation to VA medical facilities for injured and ill veterans. DAV stepped in to help veterans get the care they need when the federal government terminated its program that helped many of them pay for transportation to and from medical facilities. The vans are driven by volunteers, and the rides coordinated by almost 190 Hospital Service Coordinators around the country. DAV Departments and Chapters, along with their long-time partner Ford Motor Company, have purchased 3,286 vehicles at a cost of more than \$73.1 million, that have been donated to Department of Veterans Affairs medical centers nationwide since the program began in 1987 to ensure that injured or ill veterans are able to get to their medical appointments.



To find out whether there is a van near you use the DAV Hospital Service Coordinator Directory to contact your nearest HSC for information or assistance (<https://www.dav.org/wp-content/uploads/HSCDirectory.pdf>). Please remember that the DAV Transportation Network is staffed by volunteers; therefore, it is unable to cover every community but hopefully they can help you. You can also call your nearest VA Medical Center and ask them if transportation services are available. To locate yours go to <https://www.va.gov/directory/guide/home.asp>.

Would you like to volunteer to drive for the DAV? A message in the Watertown Daily Times designed to recruit volunteers to drive veterans to medical appointments says it all: “Our nation’s heroes travel around the globe to protect our freedoms — it’s only right that we return their dedication,” according to this statement posted on the website for the Disabled American Veterans organization. “Volunteering to drive a vet ensures that even those living remotely from VA hospitals can make their appointments and never go without the treatment they need.” Drivers must be at least 21 and have records that are clear of drunken driving or driving under the influence charges.

Prospective volunteers will need to have a background check conducted, attend an orientation session and have their fingerprints taken.

While many of the volunteers are retired individuals, drivers can be younger as long as they have time when rides are required. Transportation is needed Monday through Friday. If you would like to volunteer call (877) I Am A Vet (i.e. (877) 426-2838 or go to the DAV website <https://www.dav.org/contact-us>, complete the form, and click SUBMIT. [Source: Watertown Daily Times | February 27, 2017 ++]

Vet Deportations Update 09 ► Hope for Return Under Trump

After manning a machine gun on a combat helicopter as a U.S. Marine during the liberation of Kuwait, Antonio Romo came back to the United States traumatized by the death and carnage he saw. He says he turned to alcohol and narcotics to try to quiet the nightmares, and made multiple suicide attempts. With addiction, he fell into dealing, and was arrested for selling cocaine. And after getting out of prison, Romo was deported in 2008 to Mexico, from where he had migrated to Lynwood, California, illegally at age 12.



U.S. Marine Corps veteran Antonio Romo (left) holds a picture of himself taken from his days at boot camp. Deported U.S. veteran Hector Barajas (right) at the Deported Veterans Support House, nicknamed "the bunker," in Tijuana, Mexico, works putting U.S. veterans in touch with lawyers who help them receive pensions when possible, psychologists to help them overcome trauma and addiction, and job counseling programs.

Today he's part of a group of dozens of U.S. military veterans, most of them former legal residents but noncitizens, who were deported after criminal convictions and who for years have tried to convince multiple administrations to let them return. They acknowledge committing serious crimes such as felony drug dealing, but argue that they did their time and being kicked out of the country amounts to being punished twice. Now these veterans are pinning their hopes on the new administration of Donald Trump, and their cause presents a sharp conflict for two of the new president's stated priorities: Trump has promised to support the military and veterans; at the same time, he has also moved to ramp up deportations of immigrants in the United States illegally — particularly those convicted of crimes. "President Donald Trump has said that he supports veterans, but ..." the 48-year-old Romo said, his voice trailing off. "We are Mexicans. ... I don't know."

Either congressional legislation or a presidential executive order could open the door for Romo and the others. A White House official declined a request for an official administration comment on the issue. The person, who was not authorized to discuss the matter and spoke on condition of anonymity, said: "The current policy is reflective of those that have transcended administrations from both parties. I do not have any information regarding any changes to that." In September, then-candidate Trump suggested he would be open to letting immigrants who serve stay in the U.S. even if they came illegally. "I think that when you serve in the armed forces, that's a special situation, and I could see myself working that out," Trump said at NBC's Commander-in-Chief Forum. "Absolutely."

The United States has recruited foreign-born soldiers since the mid-19th century, and between 1999 and 2008, more than 70,000 of them enlisted, according to a report by the American Civil Liberties Union. Service has provided an expedited path to citizenship, with more than 109,000 veterans becoming naturalized Americans between 2001 and 2015, according to U.S. government statistics. But that doesn't happen automatically; it's up to the veterans to follow through on the process. Some, like Romo — who was awarded a medal for the liberation of Kuwait, according to a copy of his discharge order he provided to The Associated Press — fall through the cracks. And those who commit felonies, which psychologists say are often linked to post-traumatic stress from battle, risk being kicked out of the country. In 1996, U.S. immigration law was toughened to include around 30 deportable offenses for such cases, including robbery or drug crimes.

The Tijuana-based Deported Veterans Support House says it has documented at least 301 cases of veterans being deported to some 30 countries. More than 60 of them are Mexican. Hector Barajas, a former paratrooper who was born in Zacatecas state, crossed illegally into the United States at age 7 and served in the Army from 1995 to 2001. He recalled the first time he was deported in 2004, after spending a year-and-a-half in prison for shooting at a vehicle, to Nogales, across the border from Arizona. "I remember they took me to the border, opened a door and that was it," Barajas said. "You feel lost." Unaccustomed to speaking Spanish and with no idea of how to make a living, Barajas crossed back into the States six months later. He was deported again in 2010, moved to Tijuana and founded the Support House, nicknamed "the bunker." Many deported vets gravitate to Tijuana to be closer to relatives in Southern California, some of whom are U.S. citizens and can cross the border to visit. Often the first door they knock on is "the bunker," a stone-facade shop decorated with American flags.

Barajas puts the veterans in touch with lawyers who help them receive pensions when possible, with psychologists who help them overcome trauma and addiction, and with job counseling programs. Above all the house is something of a support community. Like many deported Mexicans who spent decades in the United States, some veterans struggle to find work in an unfamiliar country. Others are hired by Mexico-based call centers, prized for their fluent English. Deported veterans have died in Mexico, or been forced to watch from afar as loved ones die on the other side of the border. Still many say they wouldn't hesitate to serve again if given the chance. "I would enlist all over again," Romo said. "Where do I sign up?" said Barajas.

The ACLU and some lawmakers have tried to build bipartisan support for stopping or reducing veteran deportations in the past. But others say they like the current laws just fine. "We owe all the men and women who have fought for our nation an enormous debt of gratitude and respect. Prior military service alone, however, cannot create a blanket exemption from the laws of our country," said John Shimkus, a retired Army lieutenant colonel and Republican congressman from Illinois. "The current policy, which requires senior immigration officials to review each situation in which a green-card-holding veteran faces deportation, allows for the unique circumstances of each case to be considered." California state Assemblywoman Lorena Gonzalez, a San Diego Democrat married to a Marine vet who served in Iraq, has proposed a legal fund to help deported vets apply for readmission.

Regardless of what happens, Barajas hopes to open another "bunker" to serve vets in Ciudad Juarez, across the border from El Paso, Texas, and to lobby both Congress and the executive branch on the issue. Romo had become a legal resident before enlisting in the military and was living in San Diego when his legal troubles began. He was sent to federal prison in Big Spring, Texas, in 2001, convicted of conspiracy to distribute and sell cocaine. He said prison made him feel human again because it was there that he first got psychological help. When he got out, a judge broke the news that he had not automatically become a citizen through his military service, but said he could apply to become one. He began working with a lawyer. But Romo was deported five days before an appointment to settle his immigration status and deposited across the Rio Grande before dawn one day in July 2008 into Tamaulipas, a key smuggling corridor for drug cartels and one of Mexico's most violent states. "I was scared," Romo said.

Today, from his Tijuana apartment decorated with replicas of guns, Romo can see the wall that separates him from family on the other side including his 22-year-old daughter. Darkly, he mused that ultimately he may only go home in a coffin: The U.S. awards posthumous citizenship to combat veterans who have not been convicted of

crimes that carry a possible death penalty or life sentence. "We offered our lives, in exchange for nothing," Romo said. With their hopes on Washington, some still talk of respect for the chain of command. "Donald Trump is the commander in chief, and we have to work with that," Barajas said. "We are soldiers." [Source: The Associated Press | Maria Verza | March 9, 2017 ++]

Duplicate SSN Error ► Mixup Prevents Vet Retirement

A New Mexico veteran takes pride in her service to our country. However, she claims the same government she served failed her in a big way. The major mix-up on the government's part has cost the Navy veteran years of trouble. Growing up in Albuquerque, Barbara Silva knew as a teenager she wanted to serve. "We grew up in New Mexico desert and I wanted something different, so I decided to join the Navy," Silva told KRQE News 13. As the first female from her family to join, her service in the U.S. Navy took her to duty stations all across the ocean. "I loved it," Silva recalled. She planned to make a career out of the military. Then in 1993, her world was turned upside down. Silva was certain someone had stolen her identity. "This other person filed bankruptcy and they attached a lien to my military pay," she explained.



The problem was linked to her social security number. The military couldn't help her. "My military chain of command were very understanding and they were also very empathetic, but there's nothing that they can do." "You don't want to pay someone else's debt," Silva added. "So I had to get out. And I had 13 years in." Silva said the problem was not easily resolved and forced her to leave with seven years left to retire. In response to the problem, she said the government gave her a new social security number. But with the new number, Silva learned her 13 years in the military were effectively wiped clean, still attached to her old social security number. "The military still has not made any corrections on my service records," Silva explained. "So, I don't own my military service." So, who does? Was there a mystery woman with her identity? Silva had no idea. But the problem has cost her years of headaches.

Silva said she and her family members get calls from debt collectors for debt that isn't hers. And for decades, she couldn't connect with veteran benefits or services. "I lost a lot," she said. "I lost my retirement. I lost the job I loved." Silva has piles of letters written back and forth to the Navy, Social Security Administration and government officials. She even wrote President Obama and Governor Susana Martinez, who directed her to Senator Martin Heinrich's office. "It's unfortunately all too common for people to come to us when they have a challenge with a federal agency that they just can't work through, and it's really an important part of what we do in the Senate office," Democratic Senator Martin Heinrich told KRQE News 13.

With the Senator's help, Silva finally received a letter from the Social Security Administration. It states, "On June 23, 1976, we were at fault in assigning you the Social Security number...previously assigned to another individual with the same first and middle names and the same month and day of birth." The letter continues, "We

sincerely regret the error...” Silva was shocked to learn that’s what’s been causing her problems for so many years. “I get this letter and it’s like ‘Ah, that’s really what happened?’ Oh my God, that’s ridiculous,” Silva recalled. “And then they put on the bottom of it, ‘So if you have any changes to make, go ahead and reach out and contact people to make all these changes that you need to make.’”

After the letter, Silva still felt like she was on her own again to make any necessary changes the mix-up has impacted over her life. “The government failed me,” the Navy veteran told KRQE News 13. And it’s still failing her. Silva has tried to re-enlist multiple times, so she can complete a full 20 years of service and retire. Today, she’s 53 years old with seven years left to serve in the military. But the Navy won’t let her back. In a letter sent to her last year, the Navy told her she wouldn’t be able to reach 20 years of active service prior to her 60th birthday. In other words, she’s too old. “I try to stay positive,” she said. “Does it affect my life? Yes.” Silva thinks the Navy still doesn’t recognize she already has 13 years of service on her record. That prior service, she believes, is still associated with her old social security number. Senator Heinrich’s office is still trying to help Silva fix the mess and connect her with veteran services. “It’s especially frustrating when you see people who have really selflessly given a big chunk of their life in service to this country – really struggle to access the services that they’ve really earned,” said Senator Heinrich.

As for the mystery woman with her old social security number, Silva said she doesn’t want to let a stranger know she can access Silva’s information. “I just don’t want to take the chance,” she explained. There has been some progress. After thousands of hours trying to fix a problem she didn’t create, Silva did receive updated discharge papers from the military with her new number. It’s just one more step in regaining her life. Despite the problems she’s run into, Silva has no regrets about joining the Navy. “Absolutely, I’d do it again,” she said. “Regardless of anything, I served our country. I did what I felt was right to be an American citizen, and to stand up and be a part of what makes us free.” She hopes with some help, she’ll finally be able to access the benefits she’s due for her service to the country.

The Social Security Administration told KRQE News 13 via email: *“This is a very uncommon event. SSA has safeguards in place to prevent this from happening, but it does occur rarely. If individuals have general questions about Social Security numbers or if they need to replace their Social Security card, they may do so by visiting our website at socialsecurity.gov. If an individual has reason to believe there may be a problem with their number, they may call SSA at 1-800-772-1213 or visit their local office for assistance.”* Senator Heinrich said his office handles multiple constituent issues regarding federal agencies. Anyone with similar issues may call the Senator’s Albuquerque office at (505) 346-6601. [Source: KRQE News 13 | Gabrielle Burkhardt | March 9, 2016 ++]

USMC Reunions ► Website Established

Marine Corps Commandant Gen. Robert Neller has emphasized that reunions are an important tool in curbing suicides, and now the Corps has launched a website to help currently serving Marines and veterans keep connected. The “Year of the Reunion” website <http://www.usmc-mccs.org/reunion> is meant to help Marines organize reunions and announce upcoming events, Neller said in a recent message to the Corps. “We learn, share, mourn, celebrate, and protect each other by coming together and telling stories,” Neller said in ALMAR 006/17. “Reunions, and the connections strengthened by them, offer an environment in which we are reminded of who we are.” The website is meant to provide a template to help arrange the logistics and planning for reunions, Neller wrote in the message. He also encouraged Marines and veterans to post photographs, anecdotes and after-action reports from their reunions on the website. “I ask all Marines to get connected,” Neller said in the message. “Find your fellow Marines. Reach out, catch up, and when needed, help others. While hosting a reunion may be a complicated undertaking, I know Marines are up to that task.”

Last year, Neller told Marine Corps Times that reunions offer currently serving Marines and veterans an opportunity to share their stories. He praised the April 2016 reunion of 3 rd Battalion, 5 th marines — which lost 25 Marines during its 2011 deployment to Afghanistan — as a model that other units could follow. “Other units have been in tough fights and they’ve come back and they’ve had a significant number of Marines take their lives,” Neller said in a May 17 interview. “This battalion has had two [suicides].” Reunions allow Marines to relive the sense of camaraderie they experienced when they served together, he said. Sharing experiences is an age-old tradition common to warrior cultures. “The old men tell their stories of war — the young warriors listen and they learn and they get ready mentally for what they’re going to face,” Neller said. “History teaches us a lot of things.” [Source: MarineCorpsTimes | Jeff Schogol | February 27, 2017 ++]

Missouri Veteran Homes Update 01 ► Available Care Concerns

Although the chances of a new veterans home being built in Washington Missouri are growing darker, the chances of local vets receiving care in their hometown may be getting brighter. During a meeting 2 MAR with members of the Missouri Press Association and Associated Press at the state Capitol Lt. Gov. Mike Parson said he will push to allow veterans to use their VA benefits at private nursing and care centers throughout the state. Parson said he and Gov. Eric Greitens have met on the issue and he was asked to take over more of the responsibilities on veterans and senior issues. “Every time I have asked for a meeting, we’ve had one,” Parson said. “Being in the second seat I want to make him the best governor I can.” Parson said the main question he is asking regarding veterans care is how to keep a veteran home.

In recent months, the city of Washington and Franklin County have offered to donate a tract of land to the state as a site for a new veterans home. The 20- to 25-acre property is estimated to be valued between \$1.5 and \$1.8 million, or \$75,000 per acre. But even that gesture may not be enough to lure the state into spending more than \$50 million on a new home, and Parson says it still would not be enough to serve all of the veterans needing assisted care. “We have a lot of people willing to donate land,” Parson said. “There are currently 2,200 vets on the waiting list to get into a home. If you build a 200-bed facility, you’re only serving a small portion.” Parson said he also believes vets should have their choice where they receive care and not be handcuffed with where they can go to the doctor or receive long-term assistance. “It’s more expedient to look outside the box,” Parson said.

“There also needs to be more local clinics, so vets don’t have to travel all the way to hospitals and facilities in bigger towns. We need to keep these men and women at home near their families.” Parson gave no time line on when or how exactly he plans to initiate what would most likely be a voucher-type program for veterans to use at private facilities. He did say he is working with the governor on a couple of executive orders, but did not give any hints to their contents. Gov. Greitens himself has championed post military veterans care and started his own charity, The Mission Continues, to assist those injured while in combat.

According to the Missouri Veterans Commission, the construction of a 200-bed facility would cost upward of \$63 million and cost about \$15.5 million to operate annually. A scaled-back design consisting of only 150 beds, would still come with a price tag of \$50 million and have \$12 million in annual operating costs. If a 150-bed veterans home was built here, it could generate 185 jobs with an average salary of \$32,000, which would add \$5,968,583 into the local economy annually. Adversely, the addition of an additional nursing care facility could also increase the call volume of Washington EMS by about 150 calls per year.

Another strike against the construction of a new home in Washington comes from the state itself, which has said before any new homes are built, the Mexico facility needs to be upgraded or a new home built there. As Parson said, there are currently, 2,200 veterans on the waiting list for a bed in a state home. There are seven veterans homes in the state located in Cameron, Cape Girardeau, Mount Vernon, St. James, St. Louis, Mexico and Warrensburg. The

number of veterans who can be served in those homes is limited to 1,257. To add additional veterans or facilities would require legislation in the General Assembly to raise the number of veterans allowed in state homes. [Source: eMissourian | Monte Miller | March 5, 2017 ++]

Obit: Wapner~Joseph ► 26 FEB 2017 | People's Court Host

Joseph Wapner, the original TV courtroom judge who presided over "The People's Court," died from respiratory failure at his Los Angeles home on Sunday, according to the Los Angeles Daily News. He was 97.



Born on Nov. 19, 1919, in Los Angeles, Wapner always called Southern California home. He attended Hollywood High School and the University of Southern California, where he graduated in 1941. While there he dated Lana Turner in high school once, when she was still known as Judy Turner. Following the attack on Pearl Harbor and America's entry into World War II, Wapner joined the U.S. Army, where he saw combat in the Pacific, according to the Washington Post. While on the Philippine island of Cebu, Wapner was wounded by shrapnel from a grenade, but still managed to save a fellow soldier from machine gunfire. He reached the rank of first lieutenant in the Army and was awarded three battle stars, the Bronze Star and a Purple Heart, according to the Daily News. After World War II, Wapner returned to USC where he received a law degree in 1948. Gov. Edmund G. (Pat) Brown appointed him to the Los Angeles Municipal Court in 1961. Two years later, he was appointed to the Los Angeles County Superior Court. After retiring from the court in 1979, Wapner became the judge on "The People's Court," presiding over small claims cases for a syndicated TV audience. Wapner presided over 2,000 episodes of the show from 1981 until 1993. [Source: MilitaryTimes | Christopher Diamond | February 27, 2017 ++]

Obit: Liebenow~William ► 24 FEB 2017 | Kennedy Rescuer

The WWII Navy officer who guided his warship into Japanese territory to rescue future President John F. Kennedy and his crew has died at age 97, his daughter said Sunday. William "Bud" Liebenow died 24 FEB from pneumonia complications, said Susan T. Liebenow of Arlington, Virginia.

Liebenow was born in Fredericksburg, Virginia, and was a new college graduate when the Japanese attacked Pearl Harbor in 1941. He joined the Navy and volunteered for service on the fast, small and heavily armed attack vessels called PT boats. Liebenow and Kennedy were each captains of PT boats in the South Pacific in 1943 when Kennedy's boat was destroyed by a Japanese destroyer. Kennedy and 10 other surviving crew members swam to a small island. Kennedy scratched a note into a coconut that two Solomon Islands natives carried to an American base.

Liebenow guided his boat behind enemy lines to track down the survivors of PT-109 on the island where they were hiding. "Pulled right up to the beach," Liebenow told WRAL-TV in 2015. "Just a part of the job really."



Sen. Jack Kennedy & Liebenow Oct 1962

But Liebenow's naval career didn't end with that rescue. The following year, Liebenow commanded a PT boat that was part of the D-Day invasion of northern France. His PT-199 was tasked with zooming around the waters off Normandy and rescuing men whose boats had been blown up by Nazi defenders. Liebenow's boat helped rescue about 60 crew members from the destroyer USS Corry, which was sunk during the invasion struggle. "We went in to pick up survivors and do what we could," Liebenow told the Mount Airy News in 2014. "We spent most of that day picking up guys out of the water." After the war, Liebenow worked as a chemist for the Chesapeake and Ohio Railway and retired after 30 years, his family said. In addition to his daughter, he is survived by his wife, Lucy, and a son. [Source: The Associated Press | February 26, 2017 ++]

Stolen Valor Update 102 ► Reported 170301 thru 170315

Ryan Patrick Morris of Great Falls, Montana received a beefed-up sentence for felony burglary last week after authorities discovered he lied about being a battle-hardened combat veteran in hopes of garnering sympathy from a local judge. And he almost got away with it, too. In April 2016, Morris was arrested after he was accused of stealing \$1,500 worth of stuff from his own landlord and pawning the items. He also told a judge that he had completed seven combat deployments to Iraq and Afghanistan. Not only did Morris claim to suffer from post-traumatic stress disorder (he had been in the shit, he said), but that he had endured a hip replacement after being wounded by an improvised explosive device while serving his country.



Ryan Patrick Morris

PTSD and IEDs. That's about as veteran as it gets. Morris' case was then assigned to a Veterans Treatment Court, where a judge would take Morris' extraordinary military service into account as he weighed how to punish him for his crime after Morris pleaded guilty to a charge of burglary in January 2017. But here's the thing: Morris never served in Iraq or Afghanistan, or anywhere for that matter. The revelation came courtesy of Morris' father,

who informed a Veterans Court coordinator that while his son had tried to enlist in the military several times, he never actually served. Thank you, Mr. Morris, for helping protect the great people of Montana from your good-for-nothing son.

Stolen valor in itself is not a crime, but falsifying a military record for personal gain is. Still, Morris' lie wasn't enough to draw a charge under the Stolen Valor Act. The judge did, however, find Morris in contempt of court and decided to get creative with the punishment. In addition to being ordered to pay \$1,231 restitution to the victim of his burglary, Morris was ordered to serve 30 days in jail, pay a \$500 fine, and serve 441 hours of community service — one hour for each of the 441 Montanans who died in uniform since the Korean War. [Source: Task & Purpose | Adam Linehan | March 6, 2017 ++]

Vet Cemetery South Dakota Update 01 ► Black Hills Research Project

A nearly \$74,000 contract has been awarded to a South Dakota university to research stories of veterans buried at the Black Hills National Cemetery. Staff and students at Black Hills State University will research the veterans' history and the circumstances of their service, the Black Hills Pioneer (<http://bit.ly/2mYqaHw>) reported. Thousands of people are buried at the sprawling cemetery near Sturgis that opened in 1948. The contract from the Department of Veterans Affairs' National Cemetery Administration is part of the Veterans Legacy Program. The program has awarded similar research contracts to San Francisco State University and the University of Central Florida.

At Black Hills State, professor Cody Lawson said he hopes the 15 education students he's supervising will help develop a history curriculum for elementary school students based on the research. "Some have family members interred at the cemetery," he said. "One of the objectives of the research is to find living relatives." Cemetery director Adrienne Benton said more than 27,500 people are buried at the Black Hills National Cemetery, including veterans and their spouses and dependents. She said the research at the cemetery, which covers about 106 acres, is part of an effort to "get the community involved with the nation's cemeteries." Ronald Walters, the VA's interim undersecretary for Memorial Affairs, said the contract will enhance memorialization of veterans at the national cemeteries. "We want to empower communities of young learners to see themselves as agents of their own history, researching, writing and sharing their local history through the lens of veterans." [Source: Associated Press | March 8, 2017 ++]

Navy Seal Monument ► Virginia Beach Boardwalk

Capt. Rick Woolard's office is filling up with sand, and he couldn't be happier. There's sand from Hawaii, Vietnam, Normandy — places where Navy SEALs have fought or trained. The sand will form a "living beach" at the base of a new Navy SEAL "Naked Warrior" statue on the Boardwalk at 38th Street, said Woolard, a retired SEAL and Virginia Beach resident who is spearheading the project. The City Council on 7 MAR voted to allow the UDT/SEAL Museum Association to build the monument, which honors the origins of the Navy SEALs in Virginia Beach dating back 75 years. It will feature a life-size bronze statue of a WWII Navy combat swimmer standing on top of a horned scully, an enemy obstacle used to sink American landing craft. A stone wall capped with granite and inscribed with the history of SEALs and their predecessors would surround the statue. A star for every SEAL, and a paw print for every SEAL war dog killed in the line of duty would be embedded in the wall



VIEW FROM BOARDWALK

Woolard expects construction to begin in about two weeks. He hopes it will be dedicated to the city on May 29, Memorial Day. The project, which will cost hundreds of thousands of dollars, will be paid for through donations. “We’re still accepting donations,” Woolard said. The city will pay for a lighted, inclined walk next to the monument, not to exceed \$18,000, and general upkeep of the site once it is dedicated. The SEAL association will be responsible for any future repairs. [Source: The Virginian-Pilot | Stacy Parker | March 8, 2017 ++]

Gulf War Memorial Update 01 ► Authorized Under S. J. RES. 1

The Senate passed a joint resolution on 8 MAR which would authorize a national memorial dedicated to those who served in the campaign that liberated Kuwait from an Iraqi invasion to be built on the National Mall. The House passed its version of the language in January and the VFW has committed \$500,000 to support the construction. Refer to <https://www.congress.gov/bill/115th-congress/senate-joint-resolution/1/text> to read the Senate's joint resolution. The establishment of the memorial was authorized in the 2015 NDAA. [Source: VFW Actin corps Weekly | March 10, 2017 ++]

Retiree Appreciation Days ► As of 15 MAR 2017

Retiree Appreciation Days (RADs) are designed with all veterans in mind. They're a great source of the latest information for retirees and Family members in your area. RADs vary from installation to installation, but, in general, they provide an opportunity to renew acquaintances, listen to guest speakers, renew ID Cards, get medical checkups, and various other services. Some RADs include special events such as dinners or golf tournaments. Due to budget constraints, some RADs may be cancelled or rescheduled. Also, scheduled appearances of DFAS representatives may not be possible. If you plan to travel long distances to attend a RAD, before traveling, you should call the sponsoring RSO to ensure the RAD will held as scheduled and, if applicable, whether or not DFAS reps will be available. The current updated schedule for 2017 is available at:

== HTML: http://www.hostmtb.org/RADs_and_Other_Retiree-Veterans_Events.html

== PDF: http://www.hostmtb.org/RADs_and_Other_Retiree-Veterans_Events.pdf

== Word: http://www.hostmtb.org/RADs_and_Other_Retiree-Veterans_Events.doc

This schedule has been expanded to include dates for retiree\veterans activity related events such as Seminars, Veterans Town Hall Meetings, Stand Downs, Resource\Career Fairs and Other Military Retiree & Veterans Related Events for all military services. To get more info about a particular event, mouseover or click on the event under Event Location. Please report comments, changes, corrections, new RADs and other military retiree\veterans related events to the Events Schedule Manager at milton.bell126@gmail.com.

(NOTE: Attendance at some events may require military ID, VA enrollment or DD214. "@" indicates event requires registration\RSVP.)For more information call the phone numbers indicated on the schedule of the Retirement Services Officer (RSO) sponsoring the RAD.

To quickly locate events in your geographic area just click on the appropriate State\Territory\Country listed at the top of the schedule. They will look like this:

**AK AL AR AS AZ CA CO CT DC DE FL GA GU HI IA ID IL IN KS KY LA MA
MD ME MI MN MO MS MT NC ND NE NH NJ NM NV NY OH OK OR PA PR RI
SC SD TN TX UT VA VI VT WA WI WV WY Belgium Germany Italy Japan Korea
Netherlands Thailand**

[Source: RAD List Manager | Milton Bell | March 15, 2017 ++]

Vet Jobs Update 216 ► Unemployment Rate Drops to 4/6%

The unemployment rate for veterans who served in the military after 9/11 dropped to 4.6 percent in February – the most significant month-to-month dip in nearly a year, and a rate lower than non-veteran civilians. Federal data released by the U.S. Bureau of Labor Statistics on 10 MAR also show a decreasing unemployment rate for all veterans, who fared better in the workforce than non-veterans for the third month in a row. The annual unemployment rate for post-9/11 veterans was 5.1 percent last year, the lowest on record for the youngest generation of veterans. But critics of the Bureau of Labor Statistics data say the figures don't accurately capture veteran employment trends, as the veteran rate is based on a much smaller sample size in the monthly Current Population Survey than the overall rate. The U.S. added 235,000 jobs last month overall, as national unemployment decreased slightly to 4.7 percent, down from 4.8 percent in January. Among post-9/11 veterans, the unemployment rate dropped from 6.3 percent in the first month of the year -- the widest margin since last April. According to the data, approximately 83,000 veterans in this group remain without work. For all veterans, the February unemployment rate was 3.9 percent, the lowest in nine months. [Source: MilitaryTimes | Natalie Gross | March 10, 2017 ++]

Vet Hiring Fairs ► 15 MAR thru 14 APR 2017

The U.S. Chamber of Commerce's (USCC) Hiring Our Heroes program employment workshops are available in conjunction with hundreds of their hiring fairs. These workshops are designed to help veterans and military spouses and include resume writing, interview skills, and one-on-one mentoring. For details of each you should click on the city next to the date in the below list. To participate, sign up for the workshop in addition to registering (if indicated) for the hiring fairs which are shown below for the next month. For more information about the USCC Hiring Our Heroes Program, Military Spouse Program, Transition Assistance, GE Employment Workshops, Resume Engine, etc. visit the U.S. Chamber of Commerce's website at <http://www.hiringourheroes.org/hiringourheroes/events> . Vet Job Fairs being conducted in the next 30 days in state order include:



Recruit Military Listings *Note: Click on site for details*

| | |
|---|----------------|
| New Orleans LA Veterans Job Fair | March 23, 2017 |
| Pittsburgh PA Veterans Job Fair | March 23, 2017 |
| Kansas City MO Veterans Job Fair | March 23, 2017 |
| Huntsville AL Veterans Job Fair | March 29, 2017 |
| Columbus OH Veterans Job Fair | March 30, 2017 |
| Philadelphia PA Veterans Job Fair | March 30, 2017 |

U.S. Chamber of Commerce Foundation Listings

- [Detroit Hiring Fair](#) March 18 -10:00 am to 3:00 pm
Detroit, MI [Details](#) [Register](#)
- [Houston Hiring Expo with the Houston Rockets](#) March 20 -9:30 am to 2:00 pm
Houston, TX [Details](#) [Register](#)
- [Fort Bliss Transition Summit](#) March 22 - 9:00 am to March 23 - 4:00 pm
Fort Bliss, TX [Details](#) [Register](#)
- [Lake Charles Hiring Fair](#) March 22 - 10:30 am to 1:30 pm
Lake Charles, LA [Details](#) [Register](#)
- [Philadelphia Hiring Expo with the Philadelphia Flyers](#) March 28 - 9:30 am to 2:00 pm
Philadelphia, PA [Details](#) [Register](#)
- [Little Rock Hiring Fair](#) March 30 - 10:30 am to 4:00 pm
Little Rock, AR [Details](#) [Register](#)

Veteran Career/Job Fairs

- [Detroit, MI](#) March 18, 2017, 10:30am - 1:30pm [More information](#)
Detroit VA Healthcare System, 4646 John R Street, Detroit, MI 48201
- [Houston, TX](#) March 20, 2017, 11am - 2pm [More information](#)

Toyota Center, 1510 Polk Street, Houston, TX 77002

[Lake Charles, LA](#) March 22, 2017, 10:30am - 1:30pm [More information](#)
Lake Charles Civic Center Exhibition Hall, 900 Lakeshore Drive, Lake Charles, LA 70601

[Philadelphia, PA](#) March 28, 2017, 11am - 2pm [More information](#)
Wells Fargo Center, 3601 South Broad Street, Philadelphia, PA 19148

[King George, VA](#) March 30, 2017, 3pm - 7pm [More information](#)
University of Mary Washington-Dahlgren Campus, 4224 University Dr., University Hall/Rm 110, King George, VA 22485

[Little Rock, AR](#) March 30, 2017, 1pm - 4pm [More information](#)
Walters Community Support Center, Arnold Drive, Building 940, Little Rock, AR 72099

[Chicago, IL](#) April 12, 2017, 11am - 2pm [More information](#)
United Center, 1901 W Madison Street, Chicago, IL 60612

[Farmingdale, NY](#) April 13, 2017, 10:30am - 1:30pm [More information](#)
Farmingdale Armed Forces Reserve Center, 25 Baiting Place Road, Farmingdale, NY 11735

[Patrick Air Force Base, FL](#) April 13, 2017, 10am - 1pm [More information](#)
The Tides Club, 1001 North Highway, A1A S Atlantic Ave, Patrick Air Force Base, FL 32925

[Source: Recruit Military <https://events.recruitmilitary.com> & <https://www.uschamberfoundation.org/events/hiringfairs>
& <https://www.legion.org/careers/jobfairs> | March 15, 2017 ++]

State Veteran's Benefits & Discounts ► Washington 2017

The state of Washington provides several benefits to veterans as indicated below. To obtain information on these plus discounts listed on the Military and Veterans Discount Center (MCVDC) website, refer to the attachment to this Bulletin titled, “**Vet State Benefits & Discounts – WA**” for an overview of the below benefits. Benefits are available to veterans who are residents of the state. For a more detailed explanation of each of the below refer to <http://www.dva.wa.gov> & <http://militaryandveteransdiscounts.com/location/washington.html> .

- Veteran Housing Benefits
- Veteran Financial Assistance Benefits
- Employment Benefits
- Recreation Benefits
- Other State Veteran Benefits

[Source: <http://www.military.com/benefits/veteran-state-benefits/washington-state-veterans-benefits.html> Mar 2017 ++]

* Vet Legislation *



Note: To check status on any veteran related legislation go to <https://www.congress.gov/bill/115th-congress> for any House or Senate bill introduced in the 115th Congress. Bills are listed in reverse numerical order for House and then Senate.

BEST Practices Act ► Live Animal Use for Battlefield Training

A bipartisan group of lawmakers is trying to stop the Defense Department from killing about 8,500 goats and pigs a year in medical training exercises designed to prepare troops for combat. Congressmen Hank Johnson (GA-04), Tom Marino (PA-10), and Senator Ron Wyden (D-OR) have teamed up to reintroduce a bipartisan, bicameral bill 2 MAR that would require the military to phase out the use of live animals and instead use the advanced medical technology in combat trauma courses. **H.R. 1243, the Battlefield Excellence through Superior Training Practices Act of 2017** (BEST Practices Act), phases out the use of animals in live combat trauma training courses over a five year period.

"The BEST Practices Act ensures that our military does not unnecessarily cause animals to suffer in its combat trauma training," said Rep. Johnson. "By transitioning over a five year period to artificial simulators, which better mimic human anatomy, our service members will receive superior training, while reducing costs of training programs, saving taxpayers' money, and modernizing our military." Johnson also added, "This bill is more humane, fiscally more responsible, and provides a better-quality training program for our service men and women who receive life-saving combat trauma training." "It is past time we put an end to the use of live animals for combat trauma training. This outdated method causes too many animals to suffer when they can be replaced, just as effectively, by human-based simulator technologies," said Rep. Marino. "I have seen these simulators in action and I believe that our men and women in uniform will be better suited to deal with battlefield injuries after using them. This is a common-sense bill and will improve the training of our service men and women while saving the American taxpayers money."

Johnson told the *Washington Examiner* he intends to raise the issue during debate on the fiscal 2018 National Defense Authorization Act and hopes to use the must-pass bill as a vehicle to ban live-tissue training. He said simulators offer better combat training than live animals, are more humane and are ultimately more cost-effective. "It may cost more for a simulator than for a live animal in terms of initial outlay, but you can only use that animal once, you can use the simulator repeatedly. So over the course of time, it's better," he said. The military already has transitioned many of its medical training courses to use human-based simulators, which advocates say are realistic and better prepare troops to handle combat injuries since the simulators have the same anatomy as a human. But for some training, the military continues to use live goats and pigs that are anesthetized, injured, treated and then euthanized.

The Defense Department is not onboard with completely ending its use of animals in combat trauma medical training – at least not yet. Lt. Col. Roger Cabiness, a department spokesman, said the military is "actively working to refine, reduce, and, when appropriate, replace the use of live animals in medical education and training. "Therefore, we would ask Congress to work with us until there are validated alternatives, and that experience and confidence gained by current training methods in teaching life-saving procedures improve before they consider passing that legislation," Cabiness said. Outside groups also believe the bipartisan support will give the effort a better chance this time. "I believe it's been gaining momentum over the last few years," said Kathy Guillermo, a senior vice president at PETA. "We have released video tapes showing what goes on in these trainings, (<https://youtu.be/e04Wc7o92XU>). The simulators now are so sophisticated. ... It's getting very difficult for the military to excuse stabbing and shooting pigs and goats."

PETA will also be sending representatives to Capitol Hill to lobby for the bill, Guillermo said, and is "very hopeful" that a new administration and some new staff at the Pentagon will help the bill's passage. However, Tom Spoehr, the director of the Center for National Defense at the Heritage Foundation, said he's not optimistic the bill will pass this year. "This has been an agenda item for PETA and some physician groups since at least early '90s,"

Spoehr said. "I don't think it stands any reasonable change of being passed this year either." [Source: The Washington Examiner | Jacqueline Klimas | March 4, 2017 ++]

PTSD & TBI Update 04 ► No Hero Left Untreated Act

U.S. Senators Gary Peters (D-MI) and David Perdue (R-GA) have reintroduced the No Hero Left Untreated Act to enhance medical care for America's heroes. The bipartisan legislation would create a pilot program to test an innovative treatment called Magnetic e-Resonance Therapy for veterans to help treat post-traumatic stress disorder (PTSD), traumatic brain injury (TBI) and other mental health issues. Peters and Perdue are both members of the Senate Armed Services Committee, and Peters is a former Lt. Commander in the U.S. Navy Reserve.

- "Veterans suffering from the devastating effects of PTSD, traumatic brain injury and military sexual trauma deserve to have the best, most cutting-edge treatment available," said Senator Peters, a former Lt. Commander in the U.S. Navy Reserve. "Incorporating innovative new treatment options like Magnetic e-Resonance Therapy technology into VA medical centers has the potential to improve treatment for veterans and create meaningful change in their lives."
- "We must honor and care for the women and men who have courageously served our country," said Senator Perdue, a member of the Armed Services Committee. "This pilot program would provide our veterans with access to additional medical treatment options for neurological injuries and has earned the support of several veterans organizations. I am proud to work alongside Senator Peters to increase access to innovative therapy options and give our veterans the care they deserve."

The No Hero Left Untreated Act would establish a pilot program at two medical centers within the VA network and enroll up to 50 veterans in Magnetic EEG/ECG-Guided Resonance Therapy (MeRT) for a one-year period. This is an individualized non-pharmaceutical, non-invasive neuromodulation procedure that applies magnetic stimulation to help facilitate neurorestoration of proper brain function. Over 400 veterans treated with MeRT have reported a marked improvement in symptoms associated with PTSD, traumatic brain injury, military sexual trauma, chronic pain, and opiate addiction. The bill is companion legislation to Congressman Steve Knight's No Hero Left Untreated Act, which was reintroduced in the U.S. House of Representatives on February 16, 2017.

The bill has earned the support of American Legion, AMVETS, Association of the United States Navy, U.S. Special Operations Command, Blue Star Families, Vietnam Veterans of America, Veterans Advantage, 12th Cavalry Regiment Association, Patriot Project, Rally Point 6, SEALink Inc., Association of Mature American Citizens, Washington State Department of Veterans Affairs West Care, Orange County Sheriffs' Department, and Orange County Fire Authority. [Source: UPMatters.com | March 9, 2017 ++]

PTSD & TBI Update 05 ► Connecticut House Bill 5580

Supporters of a proposal, which would enable certain veterans with post-traumatic stress disorder or a traumatic brain injury to receive Connecticut state benefits, are discouraged by changes made to the proposed bill that, they say, effectively kill the) in its originally proposed form, would've allowed vets, who received an "other than honorable discharge" as a result of being diagnosed with PTSD or TBI, to qualify for state veterans' benefits. The Veterans Affairs' Committee, to which the bill was assigned, changed the language so that it now calls for a study of how many of these vets exist, how much it would cost to provide benefits to them and how that process would be executed. Rep. Jack Hennessy (D-Bridgeport), co-chair of the veterans committee, said members were concerned

that the original proposal would've put the state in a position of making a connection between a vets' diagnosis of PTSD or TBI and his or her so-called "bad paper" discharge.

The revised language was incorporated into a different bill, House Bill 7177, which seeks a more generalized study of the mental health needs of veterans and members of the military. The bill now goes to the House floor for consideration. "We decided to keep it alive as a study and to move it forward without putting the state government in the middle of this against the federal government," Hennessy said. State Department of Veterans Affairs Commissioner Sean Connolly put out a statement in early February about the original bill, saying, "It is a highly involved process to determine whether a discharge was based on conduct resulting from undiagnosed or untreated PTS or TBI. Thus such a determination should remain at the federal level as the state does not have the specialized boards of review to make such a determination and also has no authority to alter the character of discharge leaving the Veteran still to go through the federal process."

But those who worked on the original bill don't think a study will do much, and say they are not asking the state to make a determination as to whether a veterans' diagnosis of PTSD or TBI was the reason for their other than honorable discharge. "I appreciate the fact that they are at least addressing the issue," said Harding, who introduced the original bill. "We have enough knowledge to know that there is a problem here and generally I don't think a study is going to be helpful. A study is going to simply flesh out what we already know." He said he was hopeful he can still work with the committee and the legislature as a whole to see through substantive changes to what he originally proposed.

Thomas Burke, a former Marine who served in Iraq and Afghanistan, has advocated for this issue on the national level and brought it to Harding's attention. "I'm very upset because honestly a year of research is going to waste taxpayer money and we're going to come back and be in the same place," Burke said. Burke, who himself received an other than honorable discharge for smoking marijuana while stationed in Afghanistan, said that despite his discharge status, he has been able to receive certain federal veterans benefits. He later was diagnosed with PTSD. "My ability to receive benefits allowed me to go to school. It allowed me to find a community, and reminded me of the mission of why I went to fight for this country in the first place," he said. But according to Connecticut, Burke said, he's not a veteran. Although eligibility varies by program, most veterans' benefits in Connecticut are only available to a veteran who was honorably discharged or released under honorable conditions from active duty in the armed forces.

In Connecticut, veterans who served at least 90 cumulative days on active duty in the U.S. armed forces during a time of war are eligible for certain benefits not available to veterans without wartime service, such as local property tax exemptions. "If you are a veteran who fought in Iraq or Afghanistan and came home to Connecticut and saw your legislators had an opportunity to pass a bill to help you and they don't do it, that's going to alienate you even more from this society you're trying to reintegrate into," Burke said. About one-third of veterans who served in Iraq and Afghanistan have suffered from PTSD or TBI in the line of service, said Jonathan Petkun, a Juris Doctor candidate at Yale Law School and a member of Yale's Veterans Legal Services Clinic. Petkun is also a former Marine officer who served in Iraq and Afghanistan. "We also know that PTSD and TBI, in many cases, directly leads to behavior that leads to bad paper discharges," Petkun said. "Victims of both conditions can suffer from extreme emotional, mental and physical behaviors ranging from going AWOL to self-medicating with drugs and alcohol," he testified at a public hearing of the veterans committee last month.

Petkun and Jonathan Cohen, also a Juris Doctor candidate at Yale and member of the clinic, conducted research into the impact of Rep. Harding's bill and wrote the draft language that was submitted to the veterans committee. They found that nearly 800 veterans could be affected by the bill. Cohen emphasized the significant impact that this bill could have for "one of Connecticut's most vulnerable populations," and said the bill would not result in a huge cost to the state, which is facing a \$1.7 billion deficit. As bills go through the legislative process, a fiscal analysis is done. As far as implementation, they say that a veteran, when applying for state benefits, would have to provide paperwork from the federal Veterans Administration showing a diagnosis of PTSD or TBI. The bill was not

intended to discourage veterans from going through the appeal process to upgrade their discharge, Petkun said, and he and Cohen hope veterans continue to do so. The Yale clinic has helped veterans in this pursuit.

Veterans can apply to upgrade their discharge status with military record correction boards. In 2014, then-Defense Secretary Chuck Hagel directed those boards to give "liberal consideration" to discharges that can be linked to PTSD and related conditions. However, the Yale clinic has found the process remains slow, unpredictable and difficult to navigate. "A big part of this bill was to correct that," said Steve Kennedy, Connecticut team leader for Iraq and Afghanistan Veterans of America, which also worked on the bill. Kennedy, a U.S. Army infantryman who served in Iraq, said there's enough evidence connecting PTSD and TBI with actions that lead to bad paper discharges that the state should give veterans the benefit of the doubt in awarding benefits in these cases. "You're already dealing with people with an elevated risk of suicide. You're cutting them off from benefits and resources that could help them," Kennedy said. [Source: The Day | Julia Bergman | March 3, 2017 ++]

VA Records Update 02 ► Vet Connect Act of 2017

U.S. Senator Joe Manchin (D-WV) introduced the Vet Connect Act of 2017, which would streamline health records sharing between the Department of Veterans Affairs and community healthcare providers, on 6 MAR. The house version of the bill is H.R.1371. Under current law, veterans being treated for drug abuse, alcoholism or alcohol abuse, infection with the human immunodeficiency virus (HIV), or sickle cell anemia must provide written consent to the VA in order to share their health records with their community providers. This onerous statutory requirement is the chief impediment to effective record sharing among VA healthcare providers.

"We have a responsibility to our veterans to provide safe and effective pain management services and end the scourge of prescription drug addiction that too often overcomes them," Senator Manchin said. "More than half a million VA patients are abusing opioids and VA patients overdose on prescription pain medication double the national average. While the VA has implemented programs to reduce opioid prescriptions and instituted some safety measures, it is obvious that more needs to be done. This commonsense legislation will help remove red tape that is preventing veterans from receiving the care they need." Without this consent, 97% of Veterans' records are not available to the community providers that care for them.

It's important to note that this bill still requires the Veterans Health Administration (VHA) to comply with HIPPA which prohibits the unauthorized sharing of sensitive patient medical records with outside parties. HIPPA is the federal law that establishes important safeguards for patient privacy including ensuring that a non-VA care provider has a right to and need for the information, applying minimum necessary principles, disclosing the information in a secure manner, informing the recipient of any re-disclosures restrictions and accounting or tracking the disclosure in a log. This commonsense legislation ensures that community providers are able to make well-informed clinical decisions based on a Veteran's holistic medical history without violating federal patient privacy protections. This type of targeted information sharing is a crucial component in stemming the opioid epidemic by preventing overprescribing. [Source: WDTV (CBS-5) | Nicole Porter | March 6, 2017 ++]

VA Burial Benefits Update 41 ► H.R.1390 | Transportation Reimbursement Bill

Congressman Jim Banks (IN-03) introduced a bill that would authorize the Department of Veterans Affairs (VA) to pay for the transportation of a deceased veteran's remains to a state-owned or tribal-owned veterans cemetery. The VA is currently only authorized to transport such remains to a national veterans cemetery. "These men and women stood ready to answer their country's call with their lives, and we should treat their deaths with dignity," said Banks.

"If the VA is authorized to spend the money necessary to send a deceased veteran to a national cemetery, then it makes sense for it also to pay to send these heroes to a state-owned veterans cemetery closer to home. My legislation would also decrease the burden on distraught families of deceased veterans that may be forced to travel to a far-away internment in a national cemetery." The text of Congressman Banks' bill is available can be accessed at https://banks.house.gov/sites/banks.house.gov/files/wysiwyg_uploaded/Transportation%20of%20Deceased%20Veterans%20to%20Veterans%27%20Cemeteries%20Bill%20Text.pdf. [Source: 1340 AM WBIW | March 9, 2017 ++]

Vet Gun Control Update 12 ► H.R.1181 | 2nd Amendment Protection Act

Lawmakers have proposed a bill that would reverse the Department of Veterans Affairs' practice of reporting veterans to the FBI's National Instant Criminal Background Check system. The measure, introduced last month, would prohibit the VA from considering any beneficiary assigned a fiduciary trustee to act on their behalf as being declared "mentally defective" without a hearing. "The freedoms granted by the Constitution should apply to all Americans—especially the men and women who have been willing to risk their lives to protect those freedoms," said sponsor, House Committee on Veterans' Affairs Chairman Phil Roe, R-Tenn., in a statement. "This commonsense bill would ensure no veteran or beneficiary is declared 'mentally defective' simply because they utilize a fiduciary."

Roe's bill, H.R. 1181, the Veterans 2nd Amendment Protection Act, would require a federal magistrate or judicial authority ruling that a VA beneficiary is a danger to themselves or others before the agency would forward their information to the FBI. Currently, the VA automatically sends the veteran's name if they meet a certain list of guidelines, effectively making them prohibited firearms possessors under the law. Last year, as the number of veterans reported to NICS topped 260,000, Senate Republicans penned a letter to VA Secretary Robert McDonald and another to the subcommittee over the agency's funding, questioning the practice. Since then, the number of active files in the FBI's system forwarded from the department has drastically declined. As of December 31, 2016, the VA has reported 167,824 individuals to NICS.

However, gun control advocates are opposed to the legislation, especially on the heels of a repeal of a similar reporting practice set to take effect at the Social Security Administration. "This gun lobby-backed proposal turns a blind eye to our country's suicide crisis in which, on average, 20 veterans take their lives every day – and two-thirds of those suicides are carried out with firearms," said Everytown President John Feinblatt in a statement. "This bill would put more veterans in danger by allowing vets suffering from severe mental illness who are prohibited from purchasing guns to buy them again. But the gun lobby isn't concerned about that – they care about advancing their extremist 'guns for everyone' agenda." In addressing Feinblatt's remarks, it should be noted that the 20 veterans per day figure, drawn from a VA study and often cited, has been disputed as being far too high by some in the veteran advocacy community. Roe's bill has been referred to the House Committee on Veterans' Affairs and is co-sponsored by Reps. Brad Wenstrup, DPM (R-OH) and Mike Conaway (R-TX). [Source: Guns.com | Chris Eger | March 9, 2017 ++]

VA Caregiver Program Update 35 ► H.R.1472/S.591 | Pre-911 Vets

Legislation was introduced this week in both chambers of Congress that would expand caregiver benefits to veterans who served before September 11, 2001. **The Military and Veteran Caregiver Services Improvement Act** has received bipartisan support in the Senate from sponsors Senators Susan Collins (R-ME) and Patty Murray (D-WA), both of whom have received the VFW's Congressional Award. The bill has already received 25 bipartisan co-

sponsors in the House. This legislation is a major priority for the VFW and its Auxiliary who will continue to monitor this legislation closely.

Veterans Affairs Secretary David Shulkin supports expanding his department's caregiver benefits to families of veterans of all eras, and thinks the move may be far less costly than most critics expect. In testimony before the House Veterans' Affairs Committee earlier this week, Shulkin said he believes the current restrictions on the caregiver program — which limit many benefits solely to families of post-9/11 veterans — need to be updated. "I do believe it needs to be for all veterans," he said, "particularly our older veterans who want to stay at home, and then maybe they wouldn't have to leave their home and into an institution." He said department officials have begun a review of the costs and procedures for expanding the program, and will formally approach lawmakers with a plan in the months to come.

Currently, VA caregiver programs provide a monthly stipend, travel expenses, access to health insurance, mental health services, training and respite care for designated caregivers of injured or infirm veterans. But when Congress authorized those services in 2010, they made the the majority them only available to caregivers of post-9/11 veterans. Researchers estimate that covers only about one-fifth of the 5.5 million family members providing home care for veterans. Senate lawmakers included the caregiver expansion in legislation last year that passed out of committee but stalled before the full chamber. That failure was due in large part to concerns from critics and House lawmakers who called the plan too costly, with an estimated expense topping \$10 billion in the next five years. Shulkin estimated the anticipated cost at closer to \$4 billion, but also said that doesn't take into account other savings the expanded benefit could have. "I believe that's not an accurate reflection on the true cost because I believe we are going to save money by not institutionalizing people," he said.

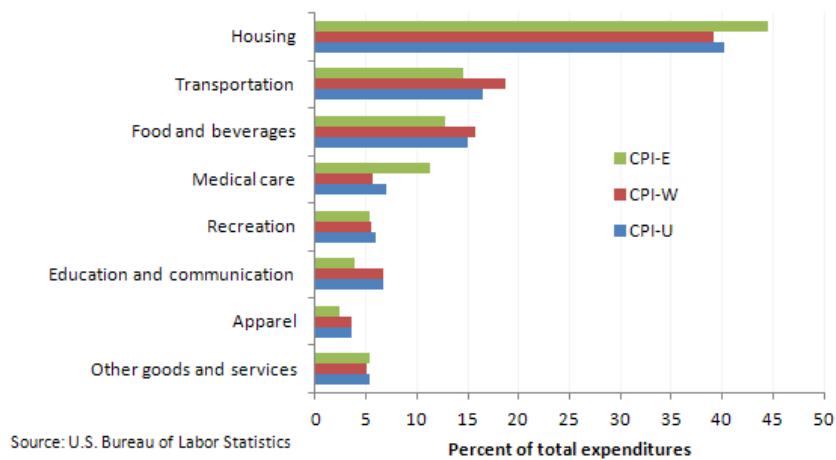
Even a lower cost may not be enough to push the expansion through Congress. While President Trump has promised an increase in the fiscal 2018 VA budget, members of Congress in recent months have warned that the department's budget — which has nearly quadrupled since 2001 — has grown at a concerning rate. Shulkin did not give a timeline for when VA officials will present a new legislative proposal to Congress on the issue. [Source: VFW Action Corps Weekly & MilitaryTimes | Leo Shane | March 10, 2017 ++]

SSA COLA Update 02 ► H.R.1251 | CPI-E Act of 2017

Congressman John Garamendi (D-CA) last week introduced the CPI-E Act of 2017 (HR 1251) -- a bill that would require the Social Security program to use the Consumer Price Index for the Elderly (CPI-E) to calculate cost of living adjustments (COLAs) for retirement benefits. Proponents of the bill -- similar to another bill proposed in 2015 -- say the CPI-E would increase benefits and better ensure that cost of living adjustments in Social Security actually reflect the real rising costs for seniors and disabled people in America. According to the Bureau of Labor Statistics (BLS), from 1982 to 2011, CPI-E rose at an annual average rate of 3.1 percent, compared with 2.9 percent for the methods that are currently used, such as the Consumer Price Index for Urban Wage Earners and Clerical Workers (CPI-W).

"There are several reasons that older Americans faced slightly higher inflation rates over the past 29 years," a BLS report describes. "First, older Americans devote a substantially larger share of their total budgets to medical care. The share of expenditures on medical care by the CPI-E population is roughly double that of either the CPI-U population or the CPI-W population. In addition, over the 1983–2011 period, medical care inflation increased significantly more than inflation for most other goods and services (5.1 percent annually for medical care, compared with 2.8 percent for all items less medical care). Second, older Americans spend relatively more on shelter, and during the last 29 years shelter costs have modestly outpaced overall inflation."

**Relative importance of expenditure categories in Consumer Price Indexes
for three population groups, December 2011**



“Our senior and disabled citizens rely on Social Security benefits for a large portion of their income, and it's about time for Social Security benefits to reflect their lifestyles,” said Garamendi. “Using a Consumer Price Index that actually reflects how retirees spend their money – especially in health care – is a no-brainer that will increase benefits and make Social Security work better for the people it serves.” The legislation has already earned broad support, with 24 original co-sponsorships and key support from leading advocacy groups and labor organizations. The National Active and Retired Federal Employees Association (NARFE) supports a switch to the CPI-E believing it would result in higher COLAs, and opposes a switch to the Chained CPI, which it believes would result in lower COLAs. [Source: My Federal Retirement | March 8, 2017 ++]

GI Bill Update 219 ► H.R.1379 | Post-911 Purple Heart Recipient Benefit

On 9 MAR the House Committee on Veterans Affairs passed U.S. Congressman Scott Peters’ (D-CA-52) bipartisan bill H.R.1379, which extends benefits under the Department of Veterans Affairs’ Post-9/11 Educational Assistance Program to all honorably discharged, Purple Heart recipients regardless of duration of service. Currently, Post-9/11 GI Bill education benefits are only available if a veteran completes at least 36 months of active duty service or is medically retired; however, some Purple Heart recipients are honorably discharged before either of those qualifications are attained, making them ineligible for full payments. The Congressional Budget Office estimates that each year, between 1,200 and 1,500 Purple Heart recipients are unable to receive full educational benefits because of the 36-month active duty service requirement. This bill would allow Purple Heart recipients to access the benefits they earned.

“Purple Heart recipients have made some of the most tremendous sacrifices in service to our nation. They earned these benefits through their service and this critical fix helps us fulfill our promise to our nation’s heroes,” said Rep. Peters. “Whether veterans use these benefits to fund college classes, vocational school, or on-the-job training, this bill will make it easier for them to get the skills and training they need to transition to civilian life.”

This is Rep. Peters’ first bill to pass the Veterans Committee since he joined the committee earlier this year. H.R. 1379 was cosponsored by Purple Heart recipient Rep. Brian Mast (R-FL-18), and fellow House Veterans Affairs Committee members Ranking Member Rep. Tim Walz (D-MN-01), and O&I Subcommittee Chairman Jack Bergman (R-MI-01).

- “When my tour of duty was cut short following my injuries, I was fortunate to be able to use funding from the Post-9/11 GI Bill to get my degree at Harvard. Without it, I may not be a Member of Congress right now. But there are still Purple Heart recipients that aren’t able to take advantage of this critical program for our veterans,” said Rep. Mast, a U.S. Army veteran and Purple Heart recipient. “If you’ve risked life and limb for our country, and come home with the scars to prove it, our country owes you a debt of gratitude that can never be fully repaid. Providing a high-quality education to these heroes is the least we can do, which is why I’m proud to lead this effort to ensure that every single Purple Heart recipient who is honorably discharged is eligible for Post-9/11 GI Bill funding.”
- “This legislation is a key victory in the effort to ensure our veterans get the benefits they deserve,” said Ranking Member Walz. “For far too long, veterans who received a Purple Heart have been denied full access to GI Bill benefits. Providing them with every opportunity for an education is the least we can do for these brave men and women who have sacrificed so much for us.”
- “Purple Heart recipients know sacrifice better than anyone,” said Rep. Bergman “and we owe them a debt beyond gratitude. That’s what this bill is about—it’s about making sure our Veterans have the tools to make the successful transition from military to civilian life. These are benefits hard-earned, not benefits freely-given. It’s time we give our Purple Heart recipients the opportunities that they deserve. They’ve led on the water, in the air, and on the battlefield, and I have no doubt that this legislation will give them the tools they need to lead as civilians.”
- “Military Order of the Purple Heart (MOPH) strongly believes that when a servicemember sheds his or her blood on a Post-9/11 battlefield, they ought to be automatically entitled to the full benefit of the GI Bill that bears the name of the conflict in which they served,” said Hershel Gober, National Commander of Military Order of the Purple Heart. “MOPH deeply thanks Representative Peters for introducing this important bill to extend those benefits to all Post-9/11 Purple Heart recipients, and we are delighted that the House Veterans Affairs Committee has advanced it to the full House so swiftly.”

This bill follows Rep. Peters’ support of expanded GI Bill benefits, and leadership in the launch of zero8hundred, which is becoming a national model for helping veterans successfully transition to civilian life. Having passed the Veterans Affairs Committee, the bill will be considered for passage by the House of Representatives. [Source: UPMatters.com | March 8, 2017 ++]

Other Vet Legislation ► Recently Introduced As of 170315

The following vet related legislation has been introduced since the last Bulletin:

S.544: A bill to amend Veterans Access, Choice, and Accountability Act of 2014 to modify the termination date for the Veterans Choice Program, and for other purposes.

Sponsor: Sen. Tester, Jon [D-MT]

S.521: A bill to make the National Parks and Federal Recreational Lands Pass available at a discount to veterans.

Sponsor: Sen. Jon Tester (D-MT)

Bill Title: Recreational Lands Pass available at a discount to veterans. Read twice and referred to the Committee on Veterans' Affairs.

S.514: A bill to direct the Secretary of Veterans Affairs to carry out a pilot program to provide access to magnetic EEG/EKG-guided resonance therapy to veterans.

Sponsor: Sen. David Perdue (R-GA)

Bill Title: A bill to direct the Secretary of Veterans Affairs to carry out a pilot program to provide access to magnetic EEG/EKG-guided resonance therapy to veterans. Read twice and referred to the Committee on Veterans' Affairs.

S.493: A bill to amend title 38, United States Code, to provide for the removal or demotion of employees of the Department of Veterans Affairs based on performance or misconduct, and for other purposes.

Sponsor: Sen. Marco Rubio (R-FL) Read twice and referred to the Committee on Veterans' Affairs.

H.R.1359: To provide for the reconsideration of claims for disability compensation for veterans who were the subjects of experiments by the Department of Defense during World War II that were conducted to assess the effects of mustard gas or lewisite on people, and for other purposes.

Sponsor: Rep. Jackie Walorski (R-IN-02)

Bill Title: reconsideration of claims for disability compensation for veterans who were the subjects of experiments by the Department of Defense.

H.R.1331: To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to provide educational and vocational counseling for veterans on campuses of institutions of higher learning, and for other purposes.

Sponsor: Rep. Jim Banks (R-IN-03)

Bill Title: Secretary of Veterans Affairs to provide educational and vocational counseling for veterans on campuses
Referred to the House Committee on Veterans' Affairs.

H.R.1329: To increase, effective as of December 1, 2017, the rates of compensation for veterans with service-connected disabilities and the rates of dependency and indemnity compensation for the survivors of certain disabled veterans, to amend title 38, United States Code, to improve the United States Court of Appeals for Veterans Claims, to improve the processing of claims by the Secretary of Veterans Affairs, and for other purposes.

Sponsor: Rep. Mike Bost (R-IL-12)

Bill Title: December 1, 2017, the rates of compensation for veterans with service-connected disabilities and the rates compensation for the survivors of certain disabled veterans, to amend title 38, United States Code, to improve appeals for Veterans Claims, to improve the processing of claims by the Secretary of Veterans Affairs.

Referred to the House Committee on Veterans' Affairs.

H.R.1328: To amend title 38, United States Code, to provide for annual cost-of-living adjustments to be made automatically by law each year in the rates of disability compensation for veterans with service-connected disabilities and the rates of dependency and indemnity compensation for survivors of certain service-connected disabled veterans, and for other purposes.

Sponsor: Rep. Mike Bost (R-IL-12)

Bill Title: year in the rates of disability compensation for veterans with service-connected disabilities and the rates survivors of certain service-connected disabled veterans, and for other purposes.

Referred to the House Committee on Veterans' Affairs.

[Source: TREA Washington Update | March 7, 2017 ++]

*** Military ***



USMC Photo Scandal ► Commandant Addresses Issue

The American people are proud of their Marine Corps and hold us in high regard. They also expect their Marines to keep our honor clean. There have been allegations recently that include disgusting and unacceptable behavior by individuals who claim association with the Marine Corps. The alleged actions were perpetrated on social media and included attacks against female Marines — valuable members of our team. In the strongest possible terms, I denounce these attacks. There is no place in our Marine Corps for bullying, predatory sharing of private and explicit photographs, making sexually violent and derogatory comments, or generally dis-respecting a fellow Marine, regardless of gender, race, religion or creed. Such behavior has a corrosive and negative effect on good order and discipline.

Marines are still Marines, even on social media. We must always be honorable in our actions. Trust is vital to our team. It is impossible to trust each other on the battlefield if our fellow Marines tear us down openly or in the dark corners of the Internet. We are responding to these allegations as Marines do — with decisive action. Our initial focus is to provide support to any victims of this behavior. We are investigating these attacks aggressively. Where we find criminal behavior, we will take appropriate judicial or administrative action.

The assistant commandant of the Marine Corps will lead a task force to address the attitudes that contribute to this behavior. This task force will be informed by insights from our Marines and address those aspects of our training and leadership where corrective action is required. Through every level of leadership, we will address the conditions that allowed this cancer to grow. Every Marine has a role to play in reinvigorating and living our ethos of Honor, Courage, and Commitment. I am the senior Marine responsible for the conduct of all Marines. I intend to fix this problem because our Marines past and present and the American people expect it — and because it's the right thing to do. [Source: USA TODAY | Robert B. Neller | March 9, 2017 ++]

National Security Cutter Program ► Trump Budget's Impact

President Donald Trump's budget would eliminate a \$600 million-plus state-of-the-art Coast Guard cutter that's a priority of the powerful Republican chairman of the Senate Appropriations Committee. The proposal by Office of Management and Budget Director Mick Mulvaney is included in draft documents of the White House budget request. The documents, obtained by The Associated Press, ask the Department of Homeland Security to cancel its contract with Ingalls Shipbuilding, which is to construct the national security cutter (NSC) at its shipyard in Pascagoula, Mississippi. The move is a direct slap at Appropriations Committee Chairman Thad Cochran, who added \$640 million to build the ship to a catchall spending bill that passed in December 2015. The ship was not requested by the Coast Guard. And there's an added twist: Cochran had publicly wavered last month about supporting Mulvaney's nomination and had been a critic of the former tea party congressman from South Carolina. Cochran ended up voting for Mulvaney, which saved Vice President Mike Pence from having to alter travel plans to cast a tie-breaking vote.

The largest and most technologically advanced of the Coast Guard's newest classes of cutters, the NSCs replace the aging 378-foot high endurance cutters, which have been in service since the 1960s. Compared to legacy cutters, the NSCs' design provides better sea-keeping and higher sustained transit speeds, greater endurance and range, and the ability to launch and recover small boats from astern, as well as aviation support facilities and a flight deck for helicopters and unmanned aerial vehicles. The NSC program began under the Deepwater Program as an eight-ship class intended to replace the aging 378-foot high endurance cutters. The first three NSCs — Bertholf, Waesche and Stratton — were acquired under contract with the Integrated Coast Guard Systems industry consortium. As part of the Integrated Deepwater System contract, the NSCs initially were built under a cost-plus-award fee contract. NSCs

No. 7-9 are in production at Ingalls Shipbuilding in Pascagoula, Mississippi, under fixed-price, incentive-type production contracts.



USCGC *Hamilton* (WMSL-753)

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The documents say at least \$500 million could be saved by canceling the contract and the money would be spent elsewhere in the homeland security budget for next year. Cochran (R-MS) who also chairs the subcommittee that oversees defense spending, is certain to fight the cut. "There are responsible ways to reduce spending," said Cochran spokesman Stephen Worley. "Weakening our nation's first line of defense against drug cartels and human trafficking isn't one of them."

Ingalls spokeswoman Beci Branton said in an email that "the impact of OMB's direction to the Coast Guard is unknown at this time. We have already purchased long-lead materials and have begun production." The national security cutter program is part of an expensive and delay-plagued program to replace the Coast Guard's older fleet. The ships are more than 400 feet long and have a helipad and modern Century weapons systems. For years, Cochran was among the most prolific sponsor of so-called earmarks — pet projects for one's state or congressional district — before they were banned in 2011 after Republicans took back the House. The cutter doesn't fit the official definition of an earmark but is widely seen as one. [Source: Associated Press | Andrew Taylor | March 1, 2017 ++]

Navy Readiness Update 02 ► Proposed Ships Procurements

The day after the Trump administration said it would cut from its budget a Coast Guard cutter project championed by Sen. Thad Cochran and set to be built in Pascagoula, the senior senator from Mississippi released a list of ships included in the latest Defense appropriations bill. Cochran chairs the Appropriations Committee, which put billions of dollars in new shipbuilding in the bill. Cochran, as chairman of the committee and its Subcommittee on Defense, said there is agreement between the Senate and House on the bill. "I am optimistic that Congress will approve this

agreement and give the Department of Defense what it requires to keep our nation safe and meet the needs of our servicemen and women,” Cochran said in a press release.

The Associated Press on 1 MAR reported documents from Office of Management and Budget Director Mick Mulvaney said the administration would cancel a contract to build the \$640 million cutter at Ingalls Shipbuilding in Pascagoula. During Mulvaney’s confirmation, Cochran had said he was unsure whether he would support the OMB pick because Mulvaney had opposed defense spending. Cochran eventually voted for the South Carolina congressman. Cochran said the spending would modernize the U.S. Navy fleet. “We’ve tried to make the best decisions possible, within funding limitations, to support national security priorities, which includes modernizing the Navy’s aging fleet,” he said in the release. “We’re funding 10 new ships, three of which were not requested by the previous administration. I’m pleased that our shipbuilders in Mississippi will play an important role in this process.”

The bill would include \$1.8 billion for the 13th San Antonio–class LPD amphibious warship built for the Navy. The measure would also provide \$1.6 billion in the budget request for advance procurement of the LHA-8 amphibious assault ship, and \$3.6 billion for the construction of three DDG-51 destroyers, one of which would be built in Pascagoula. Ingalls builds the LPD, DDG 51 and LHA vessels for the Navy. Overall, the bill would provide \$21.2 billion for Navy shipbuilding programs, an increase of \$2.8 billion and three ships above the budget request, according to the press release. The agreement would fund construction of two Virginia-class submarines, three DDG-51 destroyers, three Littoral Combat Ships, one LHA amphibious assault ship and one LPD amphibious transport dock. It also provides advance procurement activities for the Ohio replacement submarine and aircraft carrier replacement programs, as well as advanced procurement funding to accelerate construction of a polar icebreaker ship.

The House could take up the defense-funding measure in early MAR, with Senate consideration to follow, Cochran’s office said in the release. The Defense Department is funded through a continuing resolution that expires April 28. [Source: Sun Herald | Paul Hampton | March 2, 2017 ++]

Beards In Uniform ► Army Study Could Change Policy

The old adage is true: Ask (and ask and ask and ask) and you shall receive. The Army is in the midst of a study to determine whether it can safely allow soldiers to wear beards, multiple officials have confirmed to Army Times. Soldiers have been discussing the idea behind closed doors and in open forums for years, but the push to research the possibilities and make a decision really picked up earlier this year, according to the Army G-1 uniform policy sergeant major. "It's more driven from the religious accommodations group," said Sgt. Maj. Anthony Moore, referring to a working group that made the recommendations that informed the Army's authorization of beards for Sikh men in uniform. "Soldiers would ask here and there, but it's gained traction since the Army directive for religious accommodations," he said in a 28 FEB phone interview.

When the working group convened last year to talk beards and turbans, officials expanded the conversation to include hijabs and dreadlocks, Sergeant Major of the Army Dan Dailey told Army Times earlier this year. Those accommodations were all later authorized in a new directive. "They said, okay, if we're going to do religious accommodations, we have to be inclusive," Dailey said in a January interview. That discussion led to the idea of allowing beards in general. "I'm not opposed to having a beard," Dailey said. "I've socialized this with several people, including [Army Chief of Staff Gen. Mark Milley] - how do we do that to maintain standards? I think that we have to continue that study." Once the study is complete, the results will be discussed by Dailey's senior enlisted counsel and briefed to the chief of staff of the Army.

If leadership decides to go forward, an update to AR 670-1 would eventually have to be signed off by the secretary of the Army. "Authorizing the wear of beards in the Army, in addition to approved religious

accommodations policy, is a topic that soldiers have inquired about recently across the force," Dailey said 2 MAR in a follow-up statement. "As of now, there are no plans to change the policy. Army leaders and researchers are currently reviewing the wear of beards by soldiers in the Army. Any potential change in policy will be made with careful consideration to the professionalism, standards, discipline, readiness and safety of all of our soldiers."

WHY, OR WHY NOT? Dailey likened the popularity of beards to tattoos, jokingly calling it "a trending phenomenon." Tattoos, along with women's hairstyles, have been at the center of major uniform shifts in the past few years, largely based on demand from soldiers themselves. Beards, the next frontier, have been banned in all but a few corners of the military since the dawn of chemical warfare and issued gas masks during World War I. For most of the 20th century, clean-shaven faces were preferred in the civilian world as well, so it wasn't much of an issue. When facial hair made a comeback in the 1970s, then-Chief of Naval Operations Adm. Elmo Zumwalt changed the Navy's regulations to reflect the times. The other services held fast, however. In fact, the Army went in the opposite direction, doing away with its facial hair exemption for Sikh soldiers in 1984, the same year the Navy re-banned beards.



A U.S. special operations forces team leader meets with a local Afghan Local Police checkpoint commander in Kandahar province, Afghanistan. A new Army study could potentially reverse the service's long-standing ban on beards across the force.

That was that until the Global War on Terror, when leadership discovered that special operations forces could blend in better with the local population while deployed to Iraq and Afghanistan if they sported full beards. But as that image of the terrorist-crushing operator took hold in a big way, popular culture in the civilian world once again also embraced a full face of hair. Both Dailey and his predecessor routinely fielded questions at town hall meetings about bringing back the beard, but there was always a catch - the gas mask. "A lot of it has been driven by the fact that the mask has been shown, through tests, not to seal properly with facial hair," Moore said. "Right now they're still running more tests to see how much facial hair an individual can have before the mask gets impeded for safety."

The other piece is tradition, or, specifically, the iconic image of the clean-shaven American service member. "I'm not against beards, but I do have what I believe should be the perception of the American people of the United States Army soldier," Dailey said. "I believe we should represent, in their eyes, what they think their soldiers should represent." That feeling is shared among a lot of old school soldiers.

THE RESEARCH. The Army has studied beards and gas masks more than once in recent years, but the test last fall for the religious accommodations working group came to the same conclusion as its predecessors. "Our findings were that the articles of faith degraded the negative pressure respirators," said Lamar Garrett, field element chief at the Army Research Laboratory. "When the mask is designed, it's designed to fit the individual without any obstruction." Back in October, ARL gathered up 90 men and women - mostly civilians, with a few airmen - and divided them into five groups for testing. One group wore personal protective gear with their hair in regs, while another did a wear test with a beard, with long hair tied up in an under-turban, with a hijab, and with hair that had more than two inches of bulk when measured from the scalp. The tests included wearing the standard issue M50

Joint Service General Purpose Mask and the Army Combat Helmet, as well as the top from the Joint Service Lightweight Integrated Suit Technology kit. They also tested out the Level A protection equipment worn by chemical, biological, radiological, nuclear and explosives soldiers. In the end, no one with a beard could get a good seal, Garrett said.

"The baseline folks passed," he said. "Everyone else degraded in some form or another." But the religious accommodations group still pushed through with the Sikh beard exemption, with the caveat that soldiers will have to be clean shaven if they want to serve in a CBRNE unit. "If we really wanted to do some serious analysis, we could look at what was the degradation of an individual with a beard that's an inch-and-a-half, two inches, etc.," Garrett said. Now, that research has moved on to the Natick Soldier Research Development & Engineering Center, where a team is testing beards and religious headgear as well. "We are investigating the feasibility of wearing the Advanced Combat Helmet with beards, along with hijabs, bulk hair, and turbans, in the context of religious accommodation," said Shalli Sherman, who manages Integrated Protection Test Methods at NSRDEC.

The team is currently testing the helmet's fit to determine whether its inner padding needs to be altered for a good fit, then test that new configuration for performance under impact. "The helmet fit assessment is nearly complete, and the blunt/ballistic testing is set to begin within the next few weeks and expected to run through June," Sherman said. There's also a possibility that the Army could field new masks that work better with some facial hair. A mask like that is currently issued to Army special operators, Moore said, but its high cost isn't feasible for issuing to conventional troops. "The assistant secretary of the Army (acquisition, logistics and technology) will conduct additional testing of existing equipment to determine whether any product alternative exists and provide a plan to acquire protective masks for bearded individuals," Army spokesman Wayne Hall told Army Times.

WHAT IF. In his travels, Dailey said, he's asked members of scruffier militaries how they reconcile gas masks and beards. The top enlisted soldier in Norway had a bit of a hack. "I said, 'so what do you do?' He said, 'I have to be able to seal my mask. So if you look at my beard, it's all shaved under here,'" Dailey said, explaining that the soldier kept his beard closely shaven to his jawline to leave enough bare skin for the mask to cling to. He asked the same question of an Israeli soldier. "He said, 'I'm required to shave it when I go into combat,'" Dailey recalled.

If leadership approves of the weartest results, the next steps would be to determine length, bulk and shape of facial hair, along with - for example - whether it would need to be shaved on deployment. "That's a probability," Moore said. "While they're doing the test, they're also looking at some of those options. If you decided to allow beards, could we have people shave them if we needed to? All that's under review right now." No decisions are imminent, he added, but beards are on a list of soldier requests the uniform office is considering right now, along with nail polish and earrings in the Army Combat Uniform. "There's a large desire for soldiers now to want to grow beards," Dailey said. "And we're not avoiding the conversation. I think we're going to get to it." [Source: ArmyTimes | Meghann Myers | March 13, 2017 ++]

USS Enterprise (CVN-65) Update 02 ► Disposal Options

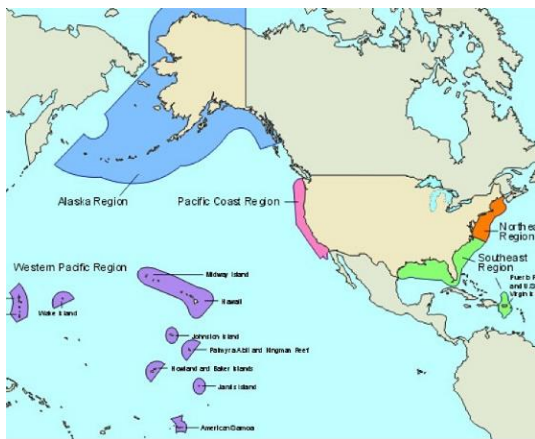
The Navy says it needs more information before it can decide how to dispose of the world's first nuclear-powered aircraft carrier. As a result, it has canceled a 2016 request for proposals for "non-nuclear" portions of the ex-USS Enterprise, according to a news release Monday from Naval Sea Systems Command. The Enterprise, also known as The Big "E," operated for more than five decades before being decommissioned during a ceremony at Newport News Shipbuilding earlier this month. The Navy on 27 FEB said it seeks further information on "more technically executable, environmentally responsible" approaches to disposing of the aircraft carrier, which will be put in storage after its inactivation is completed in August. One option under consideration would entail having a private shipyard dispose of the ship's non-nuclear portions and dismantle its eight defueled reactor plants. A second option would involve having the Puget Sound Naval Shipyard in Bremerton, Wash., handle the reactors. A third includes storing

the Enterprise and deferring disposal. The Navy originally planned to have the Enterprise towed to the Puget Sound shipyard, where it would be dismantled, but decided that plan would have too big an impact on the yard's maintenance workload. The Navy said it will prepare environmental impact statements for each of the three options and solicit public comment. [Source: The Virginian-Pilot | Courtney Mabeus | February 27, 2017 ++]

USCG Budget ► Doing the Most with the Least Dilemma

No other service over the last decade has been hit harder by budget cuts and sequestration than the U.S. Coast Guard. In a time when our maritime services have been asked to do more with less, the Coast Guard has been engaging increased maritime threats with its leanest force in decades. While today's focus is being steered towards the U.S. Navy's 2016 Force Structure Assessment (FSA), which called for a 355-ship Navy, there has been relatively little discussion about increasing the size of the U.S. Coast Guard. "We are depleted of resources." Coast Guard commandant Adm. Paul Zukunft recently stated to a packed audience at the annual West 2017 conference in San Diego. "When you add both transnational criminal organizations, plus the Arctic...we need to move from being a bantam-weight fighter to being a welter-weight fighter."

The mission requirements for the Coast Guard are mind-boggling. Today, the Coast Guard protects and defends more than 100,000 miles of U.S. coastline and inland waterways. Additionally, it has the imposing requirement to safeguard an Exclusive Economic Zone (EEZ) encompassing 4.5 million square miles stretching from the far reaches of the Arctic Circle to the South Pacific and from the Caribbean/Atlantic to Guam in the Western Pacific. This U.S. EEZ is a vast area that includes nine time zones and is one of the largest EEZs in the world.



In President Donald Trump's recent address to Congress, he said, "We've defended the borders of other nations, while leaving our own borders wide open, for anyone to cross – and for drugs to pour in at a now unprecedented rate." The salient point here is that a majority of illegal drugs, cocaine in particular, come into this country via the maritime routes – where the drugs are in their most concentrated and in their most vulnerable form. A critical asset in the campaign to combat this illicit trade is the Coast Guard's Legend-class National Security Cutter. During the Surface Navy Association symposium in January, Zukunft listed the accomplishment of the crew of latest NSC cutter USCGC Hamilton (WMSL-753) that included response to Hurricane Matthew and the interdiction of more than 52,000 tons in cocaine.

A significant shortfall in the force structure of the Coast Guard fleet is the current shortage of High-Endurance Cutters. During the height of the U.S. drug interdiction efforts, the Coast Guard had a fleet of 12 Secretary-class 378-foot High-Endurance Cutters. Today, only five remain in service and the cost to maintain these 50-year old

ships has become an unsustainable burden on the Coast Guard's budget. In 2008, to start the replacement of the aging High-Endurance Cutters, the Coast Guard commissioned the USCGC Bertholf (WMSL-750), first of the Legend class. Shortly after commissioning in 2009, Bertholf completed an extended operational deployment and exceeded all operational expectations of a "first-of-a-class" vessel.

The major concern with the current planned Coast Guard force structure is that it calls for only eight (now nine) National Security Cutters to replace 12 High-Endurance Cutters. Since the commissioning of the Hamilton-Class High-Endurance Cutters in the 1960's and 1970's, the maritime security landscape for our nation has changed dramatically. With the Department of Defense heavily involved overseas, the Coast Guard has taken the lead, appropriately so, in protecting and securing America's homeland and our own backyard, as illustrated in the Commandant's Western Hemisphere Strategy (September 2014).

"If you look at DoD's statement of key priorities, they are not focused on the Western Hemisphere. We have the responsibility by default and design," Zukunft stated. Stressing the Coast Guard's force structure deficiency to combat illegal drugs and illegal migrants in the southern approaches to the U.S., Zukunft went on to say, "The Navy's Perry-class frigates have gone away. On the best of days, you have three Coast Guard ships in the Caribbean. That is your entire force to deal with threats in that region." The Coast Guard's focus on the Western Hemisphere also includes the Arctic, as illustrated in the Commandant's Arctic Strategy. In fact, increasing activity from cruise ships, eco-tourism, oil exploration, fishing vessels, and commercial cargo vessels seeking a shorter route between Asia and Europe have necessitated the need for the National Security Cutters to go where they never planned to go before: the unforgiving, icy waters of the Arctic.

In addition, with China's expansion in the South China Sea and the U.S. Navy's shortage of assets in the region, there has been discussion of the Coast Guard providing a more persistent presence in the area. The Coast Guard would be the perfect service to work with our allies in the region. If assigned, the National Security Cutter – with its 12,000-nautical-mile range and its 60-day endurance – would be the ideal ship to perform this mission.

In summary, as the new administration strives to enhance our overall national security posture, there should be serious consideration given to building at least 12 National Security Cutters to replace the 12 retiring ships in the High-Endurance Cutter program. A "one-for-one" NSC for HEC replacement strategy would better secure our nation and help the U.S. Coast Guard combat a host of emerging national security threats on multiple flanks [Source: USBI News | Rear Adm. Terry McKnight, USN (Retired) | March 9, 2017 ++]

USCG Budget Update 01 ► Opposition to Cuts Growing

House Republicans and the nation's largest association of retired military officers have called on the Trump administration to scrap a reported plan for a major cut in the Coast Guard budget, in part to pay for the proposed wall on the Mexican border. "We cannot defend our homeland and continue critical security missions without the U.S. Coast Guard. It is as simple as that," Rep. Frank LoBiondo, a New Jersey Republican and member of the House Coast Guard and Maritime Transportation Subcommittee, said in a statement. "Whomever is advising President Trump that the service could do more with even less is detached from the facts and reality on the ground," he said.

LoBiondo and Rep. Duncan Hunter, a California Republican and member of the House Armed Services Committee, said the proposed cuts to the already under-resourced spending plan would devastate the service's drug interdiction efforts. They were responding to reports that the White House Office of Management and Budget is considering a \$1.3 billion cut in the Coast Guard's proposed fiscal 2017 budget of \$10.3 billion, forcing the cancellation of a contract for a new National Security Cutter. A Coast Guard statement 8 MAR said the service, which is part of the Department of Homeland Security, is engaged in discussions "as part of the normal process to

finalize the president's budget request to Congress. As these discussions are pre-decisional, we do not comment on these deliberations."

However, Commandant Adm. Paul Zukunft has been outspoken in calling for more resources for a service struggling to maintain more than 50-year-old cutters amid increasing demands to cut off the flow of drugs from South America. "Last year, we removed more cocaine than any other year in history — well over 200 metric tons — and by all accounts, it looks like this year we are on target to at least reach, if not exceed, last year's total," Zukunft told Business Insider. DHS Secretary John Kelly, a retired Marine general, has also been a major booster of more resources for the Coast Guard. In his last post as commander of U.S. Southern Command, Kelly routinely heaped praise on the service for aiding his efforts at drug interdiction.

A draft of the proposed budget by OMB obtained by The Washington Post indicates the Coast Guard, the Federal Emergency Management Agency and the Transportation Security Administration could face cuts. "The budget prioritizes DHS law enforcement operations, proposes critical investments in frontline border security and funds continued development of robust cybersecurity defenses," the draft said. In addition, "The budget aggressively implements the president's commitment to construct a physical wall along the southern border," the draft said. Trump has said that Mexico eventually will pay for the wall — though Mexico has adamantly refused — but the initial costs will be picked up by the U.S. Senate Majority Leader Mitch McConnell, a Kentucky Republican, has estimated the wall will cost \$12 billion to 15 billion, but other estimates put the cost at more than \$21 billion.

In a statement 8 MAR, retired Air Force Lt. Gen. Dana Atkins, president of the 390,000-member Military Officers Association of America, said, "We believe a billion-dollar reduction from the USCG budget will significantly reduce the capabilities of our nation's armed maritime security force, which handles critical domestic safety, drug interdiction and rescue operations." Atkins said MOAA also opposes cuts to the National Oceanic and Atmospheric Administration, which would "severely limit important weather monitoring services that keep citizens, businesses, and the military safe from extreme weather." He said MOAA appreciates Trump's proposed increase of \$54 billion for the Department of Defense but, "We respectfully request the USCG and NOAA not be discounted as non-defense agencies. Rather, consider them critical enablers to defense missions with commensurate budgets to support those missions." [Source: DoD Buzz | Richard Sisk | March 8, 2017 ++]

Pizza MRE ► Delayed Indefinitely

A problem with mass production has delayed the new meal offering, and it's unclear when or if the issue can be resolved. All Meals Ready-to-Eat must have a shelf-life of at least three years when stored at 80 degrees or below, explained Jeremy Whitsitt, deputy director of the combat feeding directorate at the Natick Soldier Research, Development and Engineering Center. To test this, MREs are placed in a 100-degree box for six months, simulating the 3-year span. When the pizza MRE underwent this test it became too brown, Whitsitt said. "We're disappointed," he acknowledged but quickly added that roadblocks are not unexpected, especially "when developing something brand new and novel." It was not a safety issue, but "more a quality issue," he added. In other words, you could eat the brown pizza, but it's not something we really want to ship to our warfighters. Initial forecasts called for a 2018 launch of the pizza MREs, which were to come in both pepperoni and cheese varieties. Whitsitt declined to provide a new timeline. He said Natick has internal goals, but that he was hesitant to commit at this time. He noted that the lab-made pizza could withstand the life cycle, but that farming the production out to industry at a larger scale triggered the current dilemma and delay. For those bummed readers out there, here are three words to cheer you up: caffeinated beef sticks. Yes, they're truly on the agenda and coming soon to an MRE near you, Whitsitt said. [Source: Defense News | Tony Lombardo | March 13, 2017 ++]



WWII Aleut's Internment ► **Executive Order 9066**

The infamous Executive Order 9066, which singled out "resident enemy aliens" in the United States during World War II, forced 120,000 Americans of Japanese background into relocation camps like Manzanar. The EO targeted Americans of Italian and German ancestry, too, but also deeply affected another group of Americans—not because they were viewed as potential enemies of the state, but rather because indigenous Aleuts in Alaska were in a combat zone.



Aleutian people stand on the deck of a ship forcibly evacuating them to southeastern Alaska

As John Smelcer explains for NPR's Code Switch, in 1942, Japanese troops began to bomb the Aleutian Islands, a long chain of islands that stretch between Alaska and Japan in the Pacific Ocean. They seized and occupied parts of the islands—the first time since the War of 1812 that American territory had been occupied. The islands were of strategic value to the United States and Japan. From a strategic perspective, Japan wanted to close what they perceived as America's back door to the Far East. For thousands of years, the islands have been inhabited by a resourceful indigenous people called Aleuts. During the Russian-American Period (1733 to 1867), when Alaska was a colonial possession of Russia, Russian fur-seekers decimated Aleut populations through warfare, disease, and slavery.

Following Japan's aggression, the U.S. military decided to forcibly evacuate indigenous people from their homes to get them to safer locations, then destroy their villages with a scorched-earth policy to prevent invading Japanese troops from using their housing. All in all, 881 Aleuts were forcibly relocated and interned, transported to unsanitary camps in southeast Alaska, and held there throughout the war. They were not consulted and, as Christopher Cueva writes for the Alaska Humanities Forum, the evacuation itself was hasty and traumatic. As one Fish & Wildlife Service member recalled, nobody was allowed to bring more than one suitcase of possessions. Troops then set fire to

the villages that had been inhabited just days before rather than leave them to the Japanese invaders. Aleuts were shoved onto crowded boats with no idea where they were headed, Smelcer reports.

"The irony was that the Aleuts were prepared to evacuate before a Japanese attack, and they could have been given time to take their belongings before the village was destroyed," the report of the Commission on Wartime Relocation and Internment of Civilians later noted. As the National Park Service writes, the internment camps the Aleut evacuees were forced to live in were "abandoned canneries, a herring saltery, and gold mine camp-robbing facilities with no plumbing, electricity or toilets." There, they had little potable water, no warm winter clothing, and sub-par food. Nearly 10 percent (118) of the evacuees died in the camps. They perished from lack of warmth, food, and medical care. Smaller Aleut villages lost as much as a quarter of their pre-internment population. The Aleut deaths were avoidable. Medical supplies that had been allocated for the internment camps were instead taken by the military.

Those who lived struggled with the unfamiliar landscape. "The trees, more than anything, represented the strangeness and terror of their sudden relocation," writes Eva Holland for the Alaska Dispatch News. The Aleutians are barren, treeless islands; Southeastern Alaska's trees led the detainees to feel claustrophobic and depressed. Some of the men were even enslaved during their detainment, forced to harvest fur seals and threatened with continued detainment if they refused. Ironically, less than 30 miles away, over 700 Nazis who had been captured in North Africa were imprisoned at a POW camp at Excursion Bay. The Nazis, sworn enemies of America and our allies, were treated far better than the Aleuts, so much so that military historian Stan Cohen later wrote in *The Forgotten War*, "All in all, the German imprisonment in Alaska was quite pleasant."

The Japanese invasion of Alaska never made it very far beyond the westernmost Aleutian Islands of Kiska and Attu. Over a period of 15 months, American soldiers eventually recaptured the mountainous islands in a series of battles which came to be known as the Forgotten War. In all, half a million soldiers — American, Canadian, Russian, and Japanese — were involved in the conflict, one of the least known yet toughest-fought battles in WWII, as explained by Brian Garfield in *The Thousand Mile War*. Some of the most horrific accounts of hand-to-hand combat in World War II happened at the end, when over 500 Japanese soldiers, unwilling to surrender or to be taken alive after a desperate *banzai* (suicide) attack, blew themselves up en masse with hand grenades at the foot of Engineer Hill. The war in the Aleutians gave America its first theater-wide victory over Japan and the first experience at amphibious assaults in the war.

Aleuts were kept in camps as late as 1945—two full years after Japanese troops left the Aleutian Islands. Those who survived the war went home to find their villages burned and destroyed. It took 40 years for the Federal Government's Commission on Wartime Relocation and Internment of Civilians to investigate the treatment of Aleut citizens during World War II. In a New York Times op-ed published when the first hearings into EO 9066 began, David Oyama wrote that the Aleut relocation and detention was done "under conditions that are as shocking as any in the long, sad history of the Government's relations with its Native-American citizens." As Debra McKinney of Anchorage News writes, Aleuts stayed silent about their ordeal for years, suppressing the story out of both grief and fear that they would be considered unpatriotic for speaking up about their traumatic treatment. Though the United States ultimately issued a formal apology in 1988 and provided some reparations to the people detained there, the legacy of the Aleut people's forcible relocation and harsh treatment endures. [Source: <http://www.smithsonianmag.com> | Erin Blakemore | February 22, 2017 ++]

Fallen Soldier Battle Cross Memorial ► Rosenberg OR VAMC

As the blasts of the 21-gun salute faded across the dry gray sky, a military musician began to play Taps on the bugle. A crowd of 240 veterans and Douglas County community members raised their hands to cover their hearts, salute and wipe tears as Chapter 805 of the Vietnam Veterans of America unveiled the Fallen Soldier Battle Cross

memorial 4 MAR in front of the Roseburg VA Medical Center. The dedication ceremony honored the 57,439 soldiers who were killed in action during the Vietnam War, and the black box-shaped monument decorated with insignia and quotations is accompanied by a statue of a Battlefield Cross.



As the monument explains on one side, “When a service man or woman is lost on the battlefield, it has become customary to arrange their boots, rifle and helmet in the configuration you see before you. The surviving members of their squad will gather around this Battlefield Cross to memorialize their fallen comrades.” “This Battlefield Cross is for all those brave men and women who never came home,” Mike Eakin, one of the speakers, said to the crowd. “My hope is that the same Battlefield Cross would be out in the national cemetery where it belongs to pay tribute to those people.”

A Battle Cross is a symbolic replacement of a cross, or marker appropriate to an individual service-member's religion, on the battlefield or at the base camp for a soldier who has been killed. It is made up of the soldier's rifle stuck into the ground or into the soldier's boots, with helmet on top. Dog tags are sometimes placed on the rifle, and the boots of the dead soldier can be placed next to the rifle. The purpose is to show honor and respect for the dead at the battle site. The practice started during or prior to the American Civil War, as a means of identifying the bodies on the battleground before removal. Today, it is a means of showing respect for the dead amongst the still living members of the troop. It is commonly seen in the field or base camp after a battle, especially among American troops in Afghanistan or Iraq. While it is used less today as a means of identification, it still serves as a method of mourning among the living, as attending the funeral is not always possible for soldiers still in combat.

Terry Mooney, president of the local chapter of the Vietnam Veterans of America, said the memorial is inspiring. He told the story of a veteran who was contemplating suicide, but changed her mind when fellow veterans treated her with kindness and respect. Mooney said the chapter would like to support the VA in helping with suicide prevention and connecting veterans with one another. Robert Van Norman, a Vietnam Veteran and member of the Cow Creek Band of Umpqua Tribe of Indians, came to the ceremony to show his support. Wearing a hat that read, “Native Veteran,” Van Norman was holding a sacred eagle wing and burning sage. “We’re honoring a lot of brothers and sisters that aren’t with us anymore that didn’t get to come home,” Van Norman said. “They are truly missed but not forgotten.”

Douglas Paxton, the VA medical center director, said it means a lot to have the memorial at the VA, as it’s a place where veterans find camaraderie. Paxton also said it’s important to honor Vietnam veterans specifically “There’s a special place for Vietnam veterans in history. When they came home, they were treated poorly, they didn’t get many of the benefits and they were not thanked,” Paxton said. He said the memorial is a chance to respect and honor the veterans and recognize the sacrifices they made while serving the country. “It’s a daily reminder of their sacrifice,” Paxton said. After “Amazing Grace” sounded from the bagpipes, the veterans and members of the public placed flowers on the Battlefield Cross memorial to pay their respects. [Source: The News-Review | Emily Hoard | March 5, 2017 ++]

Battle of Hampton Roads ► March 8-9, 1862 | Facts

March 8-9 marked the 155th anniversary of the historic Battle of Hampton Roads. It was here at Hampton Roads that the true power of ironclad warships would be discovered. And it was here that the revolutionary USS Monitor, with its armored rotating turret would first enter combat. Following are ten interesting facts will help expand your knowledge and appreciation of this important Civil War naval battle.

Fact #1: The CSS Virginia and USS Monitor were not the first ironclad warships, but they were the first ironclads to battle against one another. In November 1859, the French navy had launched La Glorie, the first ironclad battleship. The Royal Navy, in response to the new French warship, had launched HMS Warrior, an iron-hulled frigate, in October of 1861. Even in the American Civil War, the Virginia and Monitor were not the first ironclads. To support Union naval operations on the rivers in the western theater, ironclad river gunboats (City Class gunboats) had been built, launched, and deployed by January 1862. These gunboats played an important role in the battles for Fort Henry and Fort Donelson in February of 1862.

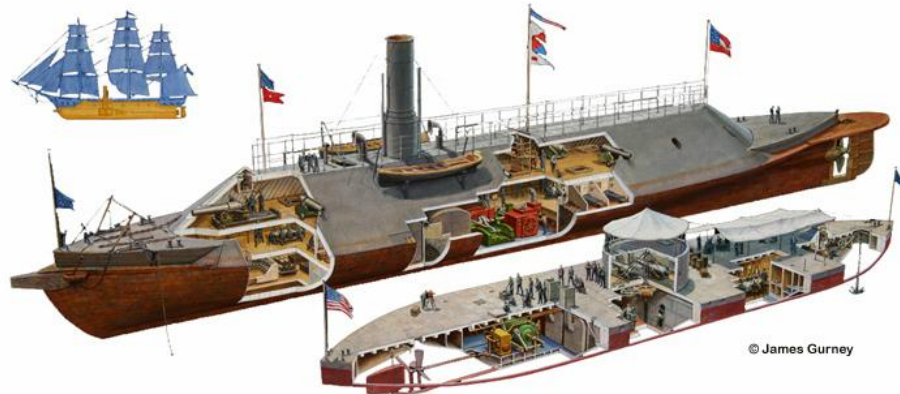
Fact#2: The Confederacy had great difficulty in sourcing the iron plating needed for the CSS Virginia. In October of 1861 it was determined that the CSS Virginia (the converted ex-USS Merrimack) would require two layers of two inch iron armor plate covering its entire casement. Requiring upwards of 800 tons of iron, there simply was not that much iron available. To make up for this painful shortage, the Confederacy was reduced to scavenging old scrap iron, melting down old smoothbore cannon and iron tools, and even ripping up hundreds of miles of railroad track. The delays in obtaining and shaping these iron plates gave the Union more time to construct their counters to the growing menace of the CSS Virginia.

Fact #3: The first “trial run” of the CSS Virginia was its combat debut against the US Navy at Hampton Roads on March 8, 1862. On the morning of March 8, 1862, the CSS Virginia made steam and moved slowly out into the Elizabeth River for its inaugural voyage. The Virginia's engines had not been fully tested and the armored shields for its broadside gun ports had not been installed, but these "minor details" did not greatly concern the ship's new captain, Franklin Buchanan. Buchanan, who had been selected by Confederate Secretary of the Navy Stephen Mallory for his aggressive tendencies, was determined to make the Virginia's first voyage an attack on the nearby Union navy.

Fact #4: Despite carrying twelve large caliber guns, one of the CSS Virginia's most lethal weapons was a simple 1,500lb iron ram projecting from its bow. This simple weapon, altogether similar to what one would have found on a Roman Trireme or Ottoman Galley, devastated the USS Cumberland. The Virginia steamed straight for the Cumberland and punched through its starboard bow with its mighty ram. Ironically, the mortal blow delivered by the Virginia's ram almost led to its own destruction. With its ram stuck fast inside the Cumberland, the Virginia risked being carried under by the sinking Federal ship. After some effort the Virginia was able to separate and back away, but its lethal ram had broken free. During its battle with the USS Monitor the next day, the CSS Virginia sought to employ its ram, not knowing that this weapon now lay at the bottom of Hampton Roads.

Fact #5: The March 8, 1862 battle that pitted the Virginia against wooden US Naval vessels was the worst defeat in the history of the United States Navy until the Japanese attack on Pearl Harbor. While much attention has been focused on the near bloodless duel between the USS Monitor and CSS Virginia on March 9, 1862, the action between the Virginia and the US Navy on the preceding day was a far bloodier affair. The CSS Virginia's attack on the USS Cumberland killed 121 out of 376 onboard and the subsequent attack on the USS Congress killed 27% of its crew – 120 out of 434. The CSS Virginia, on the other hand, suffered just two killed and a dozen wounded in its fight with the Union navy. Over the two day battle, the Federal navy suffered 261 killed and 108 wounded in its struggle with the Virginia – more killed and wounded than any other sea battle in American

history at that time. And March 8, 1862 would remain the bloodiest day in American naval history until December 7, 1941, when the Japanese navy struck the American fleet at Pearl Harbor.



The above comparison of the CSS Virginia (above) and USS Monitor (below) shows the significant size differential between these two famous combatants. Where the Virginia was built on the hull of the Merrimack, the USS Monitor was built from the keel up.

Fact #6: The CSS Virginia's commander, Franklin Buchanan, was seriously wounded by musket ball on March 8 and did not participate in the Virginia's famous March 9 duel with the USS Monitor. Per the well-established norms formed during the Age of Sail, it was customary for a defeated ship and its captain to formally surrender to their victorious counterparts. After viewing a white flag above the stricken USS Congress, Franklin Buchanan ordered that the Congress be taken as a prize. Unfortunately for the Confederates, Union soldiers on shore nearby knew or cared little for naval tradition and fired upon the exposed officers and men. Franklin Buchanan, who had gone on deck to supervise this surrender, was struck in the upper thigh by a bullet and was hastily taken back into the interior of the Virginia. Removed to shore that evening, Buchanan turned over command of the CSS Virginia to his executive officer, Lieutenant Catesby ap Roger Jones who would command the famous ironclad during its fight with the USS Monitor the next day. Buchanan, who would recover from his wound, captained the CSS Tennessee in its battle with Rear Admiral David Farragut's squadron in the Battle of Mobile Bay. During that battle, Buchanan would suffer a broken leg and would surrender with his ship on August 5, 1864.

Fact #7: Sensing that their shells could do little damage, even at close range, the CSS Virginia ceased firing at the Monitor during the battle. Two hours of close-range naval gunfire finally convinced the Confederates of the futility of wasting shell and powder on the USS Monitor. Lieutenant John Eggleston onboard the CSS Virginia, when asked why his gun crews had stopped firing at the Monitor, stated that “after two hours of incessant firing I find that I can do her [the Monitor] about as much damage by snapping my thumbs at her every two minutes and a half.” The CSS Virginia's armor penetrating capabilities were further reduced by its carrying only explosive shells, rather than solid shot. At one point in the battle, crew members aboard the Virginia resorted to attempting to fire muskets into the open gun ports of the Monitor.

Fact #8: If the USS Monitor had used larger gunpowder charges in its 11-inch guns, it's likely that it would have holed and sunk the CSS Virginia. The USS Monitor had been hurried down to Hampton Roads shortly after its launch and little time had been set aside for testing this new, radical weapon system. Despite being designed to carry two 12-inch Dahlgren naval guns, the Monitor launched with two smaller 11-inch Dahlgrens within its armored, rotating turret. To prevent any catastrophic gun bursting within the confined turret, each of the 11-inch guns was restricted to using 15-lb gunpowder charges. Even with this lower gunpowder charge, the 165lb solid shot projectiles did much to dent and disfigure the armor plating on the Virginia. Later tests conducted after the battle showed that if the Monitor had used 25lb or 30lb gunpowder charges that its 11-inch guns would have punctured the Virginia's hull with relative ease at close ranges.

Fact #9: Ironically, as the CSS Virginia fired more of its onboard ordnance, the ship became more vulnerable to attack. Unlike the USS Monitor, whose belt of armor descended well below its waterline, the CSS Virginia's iron plating extended barely to its waterline when fully loaded. With each broadside, the Virginia would expend 350lbs of ordnance. And after two hours of firing upon the Monitor and other nearby ships, the Virginia had lightened its load by 5 tons. Ironically, as the ship became lighter it also became more vulnerable. As the ship lightened, its unarmored sides, below the iron casemate, were visible above water and could have been more easily punctured.

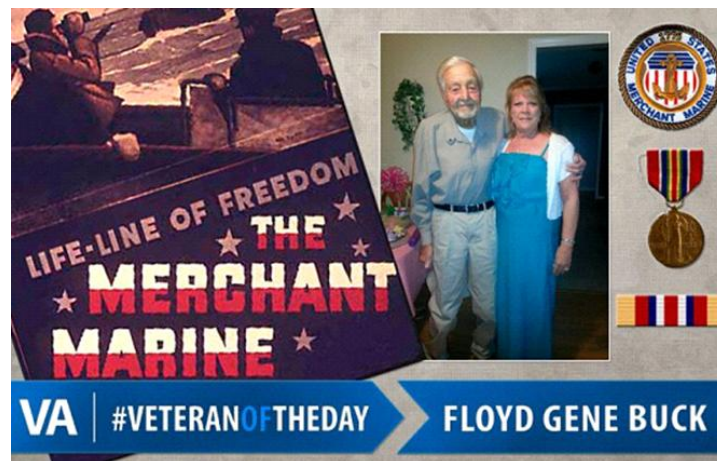
Fact #10 Franklin Buchanan and John L. Worden both became superintendents of the United States Naval Academy in Annapolis, Maryland. John L. Worden, promoted to rear admiral after the war, was the commandant of the United States Naval Academy between 1869 and 1874. A drill field at the Academy is named for Worden. Prior to the Civil War, Franklin Buchanan was the first superintendent of the United States Naval Academy (1845 - 1847). The stately Buchanan House, current residence of Academy superintendents, is named after this famous Confederate admiral.

[Source: Today in Naval History | Patrick Warley | March 8, 2017 ++]

Military History Anniversaries ► 16 thru 31 MAR

Significant events in U.S. Military History over the next 15 days are listed in the attachment to this Bulletin titled, **“Military History Anniversaries 16 thru 31 MAR”**. [Source: This Day in History <http://www.history.com/this-day-in-history> | February 2017 ++]

WWII Vets 131 ► Floyd Gene Buck | Merchant Marine Messman



Floyd Buck served as a Messman in the US Merchant Marines during World War II. He grew up in Colorado, graduated from high school, and immediately enlisted in the Merchant Marines in 1945. He was pulled from basic training and put aboard the SS Denali. While he was oceangoing toward Siberia, the war ended and he returned home. He was awarded the Pacific War Zone Bar and was honorably discharged. Buck and thousands of others like him who fought in World War II and their fellow merchant sailors died in it at a higher rate than either Army or Navy forces.

In 1988, the Department of Defense yielding to pressure from a federal court ruling and four decades of appeals from World War II oceangoing merchant marines, determined that the service of the American Merchant Marine in Oceangoing Service during the period December 7, 1941, to August 15, 1945, is considered “active duty” for the purposes of all laws administered by the VA.

Thank you for your service, Floyd! [Source: VAntage Point | January 5, 2017++]

WWII Vets 132 ► Carl Davis | USS Nehenta Bay Sailor

Carl Lee Davis grew up in a very small rural community in Kentucky, later finding himself on a ship chasing submarines in the Pacific during World War II. The house that Davis, 92, grew up in was made from logs cut from trees on the family farm. There was nothing in Kentucky to prepare him for "a huge wall of water" from a typhoon nearly swamping his ship. He also survived a kamikaze attack as the Japanese became more desperate to protect their homeland. Though the Navy was not his first choice, he enlisted and reported for service on March 10, 1943, and was sent to Great Lakes Naval Training Station north of Chicago. That same day, his first big assignment: guard the laundry room from 3 a.m. to 6 a.m. Real danger came in July 1944.



In this Jan. 24, 2017 photo, Carl Davis holds a book he wrote about his U.S. Navy experiences during WWII at his home in Savoy, Ill.

Davis served on the escort carrier USS Nehenta Bay in the Pacific campaign. The ship joined the USS Midway in anti-submarine patrols. Next, it escorted tankers carrying fuel for the larger carriers. On Oct. 24, the USS Nehenta Bay crossed the Equator and, after an unpleasant ceremony, Davis went from being a "polliwog" to being a "shellback." He'd "never experienced anything so horrible in my life." It started with a bad haircut, and the series of unfortunate events continued with a crawl through a 40-foot tube jammed with 3-day-old garbage, the kissing of a fat belly, a nasty drink, a spinning around and a splash into the water — a big tub, not the sea.

The drama moved into real life shortly later with an early morning call to man battle stations. A torpedo had just missed the ship's bow, near where he slept. A few hours later, planes left the carrier to spot the sub, and destroyers laid down a barrage of depth charges. "We knew we'd caught him in a cove when we saw the slick of engine oil floating to the surface," Davis recalled. Ending 1944 was the Halsey Typhoon, a tropical cyclone that hit the Pacific fleet in December. In the Philippine Sea, the fleet was performing refueling operations when, based on faulty weather information, it sailed into the typhoon — killing 790 and capsizing three destroyers. Davis had picked a good spot as the USS Nehenta Bay rolled through a valley in the storm. "I found a corner just below the flight deck," he said. He lashed himself to a wall, cushioned by life jackets. Two planes on the flight deck were lost.

Next was a kamikaze attack that the ship escaped only by shooting down a Japanese plane. A second typhoon was smaller but did more damage, he said, and the ship had to return to San Diego for repairs in February 1945. The USS Nehenta Bay was back in action in May off Okinawa, launching planes that dropped bombs on Japanese caves

on the island. With a mission to the Aleutian Islands, the ship was heading toward Alaska when news came on Aug. 15: the Japanese surrendered. En route to Pearl Harbor, Davis celebrated his 21st birthday. After the war, Davis returned to work on the family farm. Within a year of his service ending, he was married to Beulah Witt. They had five children. Davis didn't stay on the farm. He used the G.I. Bill to go to college, and started graduate school at the University of Illinois in 1955, later becoming an internationally known UI professor of dairy science. [Source: The (Illinois) News-Gazette | Paul Wood via AP | February 14, 2017 ++]

Medal Of Honor Story ► Donlon~Roger | Vietnam



Go to <http://www.legionemail.com/t/33044704/973730703/73272775/0/84772/?x=cb07e7e0> to listen to MOH awardee Roger Donlon, the first recipient of the Medal of Honor in Vietnam, talk about his time in Nam Dong. [Source: The American Legion | March 2017 ++]

Medal of Honor Citations ► Everhart, Forest E | WWII



*The President of the United States in the name of The Congress
takes pleasure in presenting the
Medal of Honor
to*

Forest E Everhart

Rank and organization: Technical Sergeant, U.S. Army, Company H, 359th Infantry, 90th Infantry Division

Place and date: Near Kerling, France, 12 November 1944

Entered service: Texas City, Tex.. 1940

Born: August 28, 1922, Bainbridge Ohio

Citation

He commanded a platoon that bore the brunt of a desperate enemy counterattack near Korling, France, before dawn on 12 November 1944. When German tanks and self-propelled guns penetrated his left flank and overwhelming infantry forces threatened to overrun the one remaining machinegun in that section, he ran 400 yards through woods churned by artillery and mortar concentrations to strengthen the defense. With the one remaining gunner, he directed furious fire into the advancing hordes until they swarmed close to the position. He left the gun, boldly charged the attackers and, after a 15-minute exchange of hand grenades, forced them to withdraw leaving 30 dead behind. He re-crossed the fire-swept terrain to his then threatened right flank, exhorted his men and directed murderous fire from the single machinegun at that position. There, in the light of bursting mortar shells, he again closed with the enemy in a hand grenade duel and, after a fierce 30-minute battle, forced the Germans to withdraw leaving another 20 dead. The gallantry and intrepidity of T/Sgt. Everhart in rallying his men and refusing to fall back in the face of terrible odds were highly instrumental in repelling the fanatical enemy counterattack directed at the American bridgehead across the Moselle River.



Everhart was injured on November 15, still near Kerling, and was evacuated to England before being moved back to the U.S. for continued medical treatment. After receiving the Medal of Honor at the White House in August of 1945, Everhart was given a parade in his hometown of Bainbridge. There he was presented with a jar containing \$307, which the small town collected dollar by dollar to show its appreciation. Everhart left the Army while still a technical sergeant.

In 1946, he began a 37 year career with the Veterans Administration in Cincinnati and after retirement was honored with the Distinguished Career award. At age 64 Everhart died at a hospital in Philadelphia on August 30, 1986, after years of fighting lung cancer. He was survived by his wife and six children and is buried at Arlington National Cemetery. The Forrest E. Everhart Memorial Golf Course Located on the Chillicothe VA Medical Center campus in Ohio is named in his honor.

[Source: <http://www.history.army.mil/moh> | March 2017 ++]

*** Health Care ***



Cancer Diagnostic Tools Update 01 ► Colonoscopy

Colorectal cancer kills around 50,000 people each year in the U.S., but these deaths could be prevented if everyone were screened appropriately, enabling early diagnosis and treatment. Colonoscopy is one of several procedures to screen for colorectal cancer - others include testing fecal matter for blood (currently the subject of a VA study), fecal DNA testing (under the trade name Cologuard), flexible sigmoidoscopy, and “virtual” colonoscopy (computed tomographic colonography). For most people, initial screening is recommended at age 50, continuing until age 75. Talk with your primary health care provider to determine what the most appropriate screening schedule and procedures are for you. If you're covered by TRICARE, find out what TRICARE will cover. If a colonoscopy is recommended, the step-by-step guide below will help you through the process.



Step 1: Work with your primary care provider to identify a gastroenterologist (the physician specialist who will do the colonoscopy).

Step 2: Contact your insurance company to make sure you understand any physician network issues and what your insurance will pay. (For TRICARE refer to <http://www.tricare.mil/CoveredServices/IsItCovered/Colonoscopy>)

Step 3: Schedule an appointment for the procedure. Choose a day when you have nothing else scheduled. It's also easiest if you can spend most of the previous day relaxing at home, to facilitate your colonoscopy prep.

Step 4: Plan for a friend or family member to drive you home from the procedure. Driving yourself (or taking a taxi) isn't permissible.

Step 5: A few days before the procedure, read the instructions provided by your gastroenterology (GI) clinic. Be sure to read all of them, and read them again the day before the procedure. These instructions will tell you how to take the bowel prep the day before the procedure and what to do the day of the procedure. Foods and most fluids are restricted the day of the procedure. If you take regular medications, talk with your health care provider about when to take them.

Step 6: Two days before the procedure, reduce your food intake. This will make your bowel easier to clean.

Step 7: The day before your colonoscopy is scheduled, begin the bowel prep as directed by your GI clinic. Typically, you either will be prescribed a liquid laxative to drink or pills to swallow. If you have other medical problems or sensitivity to aspartame, let your GI clinic know; that can affect which bowel prep your clinic prescribes. The bowel must be perfectly clean so your gastroenterologist can examine the walls of the entire area.

Step 8: The day of the procedure, after you arrive at the clinic, you will be asked to change into a hospital gown. A sedative will be administered by IV, so you are relaxed and comfortable during the procedure. The procedure itself usually takes about 30 minutes and includes inserting a small tube with light and camera attached through the anus and into the rectum and colon. The area will be examined carefully. If small polyps are found, they might be removed during the procedure. If there are larger growths, a biopsy might be taken for further examination. The tube is removed and the procedure is over.

Step 9: A short time after the procedure, you'll start to wake up. When you are fully awake, it's time to return home. There usually are no eating restrictions for the rest of the day.

[Source: MOAA News Exchange | Rear Adm. Joyce Johnson, USPHS (Ret), D.O., M.A. | March 1, 2017++]

Compensatory Reserve Index ► New Circulatory Shock Indicator

Army researchers have developed a device that can tell when a wounded person is in danger of going into shock or dying from blood loss. The life-saving device fits on a fingertip, and it's the first technology that gives early warning that a trauma patient is close to circulatory shock, the researchers say. The device, called the Compensatory Reserve Index, can save lives, including soldiers wounded on the battlefield, by showing medics when a patient is about to go into hemorrhagic shock, according to a release from the Military Health System. Hemorrhagic shock is the leading cause of death among trauma victims. Now, the CRI has been cleared by the U.S. Food and Drug Administration to be used in hospital settings and in treatment before a patient gets to the hospital.

Researchers at the U.S. Army Institute of Surgical Research at Joint Base San Antonio-Fort Sam Houston, Texas, collaborated with scientists and engineers at the University of Colorado and Flashback Technologies, Inc. Their research found the compensatory reserve “is the single most important indicator for early and accurate assessment of imminent shock,” Dr. Victor Convertino, USAISR senior scientist for U.S. Army Medical Research and Materiel Command’s Combat Casualty Care Research Program, said in the release. The device received FDA approval in December, paving the way for it to be fielded to combat medics on the battlefield, and also for emergency medical technicians treating civilians, Convertino said. Measuring compensatory reserve in real time will “revolutionize medical monitoring” from diagnosis to guiding fluid resuscitation to providing feedback on how effective the intervention was, he said.



How it works. CRI uses an algorithm to gauge the patient’s ability to adjust to the loss of oxygen in body tissues because of blood loss, and indicates the point at which the patient may go into hemorrhagic shock or die. The research team found that a patient’s arterial waveforms, picked up from a standard pulse oximeter, which is carried

by combat medics, could be used to generate the CRI. By analyzing individual arterial waveforms, the algorithm gains accuracy in predicting the body's ability to compensate for lack of oxygen in body tissues. "Shock is deadly and unpredictable if it is not recognized and treated in early stages of hemorrhage," the researchers wrote in an article about the project, with Convertino, Dr. Michael Wirt, Dr. John Glenn and Dr. Brian Lein cited as the authors. "One of the most challenging aspects of providing effective treatment of shock is our inability to recognize its early onset."

To use the device, a standard pulse oximeter is placed on the patient's finger. The CRI uses the algorithm to determine whether the information from the oximeter indicates the patient needs resuscitation or immediate medical attention. Medics on the battlefield, especially those with limited experience, will benefit by seeing when a wounded warrior needs immediate priority, the researchers said. Medics can see the early marker of the patient's status "well in advance of changes in standard vital signs," buying more time for intervention. The CRI monitor is designed with a color bar graph indicator similar to a fuel gauge in a car. This shows the patient's level of compensation for blood loss. Green shows an adequate level, amber indicates "compromised," and red shows the patient is unstable.

The measurement of compensatory reserve can be integrated into current medical monitors or a pulse oximeter, displaying a "fuel gauge" reading that can be easily used and understood by combat medics as well as civilian medics, the researchers wrote. The time it takes for paramedics and emergency medical technicians to diagnose an unstable bleeding patient was reduced by more than 40 percent when they saw and responded to the "fuel gauge" indicator, compared to reading vital signs alone, the researchers noted from data collected in studies. They see the CRI as becoming a diagnostic tool that can be routinely used, one that can pick up what vital signs miss. Taking a patient's vital signs using current methods may not be "smart" enough to reveal the danger because the vital signs may change very little during the early stages of hemorrhage, they say. "Too often the use of standard vital signs does not allow us to distinguish those trauma patients with severe hemorrhage who are at greatest risks of poor outcomes in the early stages of blood loss prior to cardiovascular collapse when interventions and triage decisions would be most effective," the researchers wrote.

What's next. Data on the use of CRI is being collected in research studies involving patients with trauma, injury, Dengue hemorrhagic fever, renal dialysis and other conditions. "More specifically to addressing the needs of military medical prehospital care is the ongoing data collection during air ambulance transport of battlefield casualties by the Israeli Defense Force," the researchers wrote. The CRI will be an important tool for triage amid the stress of the battlefield, Convertino said. "There's lots of noise, lots of adrenaline and not much equipment, which can make diagnosis especially hard for medics on the battlefield," Convertino said. "This device will help medics save lives on the battlefield."

[Source: ArmyTimes | Kathleen Curthoys | March 4, 2017 ++]

TRICARE TBI Treatment ► Know Signs & Symptoms

When it comes to traumatic brain injury (TBI), you can't have too much information. Traumatic brain injuries affect millions of Americans each year, and each TBI experience is unique. Be sure to know the signs and symptoms of TBI as well as how you can prevent yourself and your loved ones from experiencing it. TBI is caused by an external force, such as blows to the head, gunshot wounds, or the head being shaken violently. Concussion, also called mild TBI, is the most common type of brain injury and can sometimes be difficult to diagnose because a person may or may not become unconscious and the damage may or may not show up on a diagnostic imaging test, such as a CAT scan. A contusion, or a bruise on your brain, can result from a direct blow to the head and can also cause TBI.

When it comes to TBI, the signs — things that you, or others, observe — can be subtle and may not appear immediately. Symptoms — something you experience — can last for days, weeks or longer. Amnesia can also occur, typically involving the loss of memory of the event that caused the injury. No one should return to vigorous physical activity after any type of brain injury, even a concussion, without the approval of a medical professional. It's important to know that not everyone experiences all of the possible symptoms, and not everyone experiences them to the same degree. For example, if you collide with your teammate at a pickup basketball game and you both hit your heads, you might get a mild headache or feel dizzy; your teammate may have blurred vision or feel confused. Both of you have symptoms of TBI, and both of you need to get checked out. After an incident always check for:

- Headache or a sensation of pressure in the head — the most common symptom of TBI
- Loss of or alteration of consciousness
- Blurred eyesight or other vision problems, such as dilated or uneven pupils
- Confusion
- Dizziness, feeling off-balance or the sensation of spinning
- Ringing in the ears
- Nausea or vomiting
- Slurred speech
- Delayed response to questions
- Memory loss
- Fatigue

Some signs and symptoms may not appear for hours or days, such as:

- Trouble concentrating
- Continued or persistent memory loss
- Irritability and other personality changes
- Sensitivity to light and noise
- Sleep problems
- Mood swings, stress, anxiety or depression
- Disorders of taste and smell

According to the Centers for Disease Control and Prevention, the leading cause of traumatic brain injury is falls. Because the brain is soft and jello-like in consistency and “floats” in cerebral-spinal fluid in our skulls, when the head is struck or shaken violently it can cause brain injury. You can help prevent your child from getting a TBI by:

- Always using age and size-appropriate car seats, and by making sure they are properly installed.
- Making sure your child always wears the right helmet for activities such as riding a bicycle or playing sports and make sure it fits right. Wearing a helmet is a must to help lower the risk of serious brain injury and skull fracture. While helmets promote safety, please know that there's no such thing as a “concussion-proof” helmet.
- Making sure to have gates at the tops and bottoms of stairs to prevent your baby from falling down them.
- Making sure when you take your child to the playground that there is soft material under the play equipment, like mulch or sand rather than grass or dirt.

TRICARE offers TBI treatment through a robust rehabilitation benefit that includes occupational therapy (OT), physical therapy (PT), speech therapy and behavioral health services when ordered by a physician as part of a comprehensive individual rehabilitation treatment plan. Though TRICARE does not cover Cognitive Rehabilitation Therapy as a stand-alone therapy, many physical therapists, occupational therapists and speech therapists use CRT techniques in their covered therapies and treatments for TBI. For more information, visit the Cognitive Rehabilitation Therapy page on the TRICARE website. For specific coverage details, contact your regional contractor. [Source: TRICARE Communication | March 1, 2017 ++]

Heart Health for Women Update 01 ► Leading Cause of Death in U.S

Heart disease accounts for about one in every four deaths in women each year, making it the leading cause of death for females in the United States, according to the Centers for Disease Control and Prevention. But there's good news: women can take steps to reduce the risk. The Military Health System works to lower the odds by educating women – and those who love them – to recognize the range of symptoms of heart disease, know when to take action when symptoms arise, and know what to do to take responsibility for their own health. “While heart disease is a common problem for all Americans, it's more of a problem for women because the typical symptoms associated with heart ailments are not always easy to recognize for women,” said Dr. Manju Goyal, a cardiologist at Fort Belvoir Community Hospital.

Some symptoms of heart disease, such as chest pain, pressure or discomfort, may not be as severe in women; therefore they may not recognize they are having a heart attack and don't seek proper care, said Goyal. Women might experience symptoms that seem unrelated to heart disease, such as sweating, unusual fatigue, nausea or vomiting, shortness of breath, lightheadedness, or pain in one or both arms. Women can also experience discomfort in the neck, jaw, shoulder, upper back, or abdomen. Because these symptoms can be mistaken for other medical conditions, women may wait to seek help or misunderstand what's really going on.

The term “heart disease” covers a range of conditions, including coronary artery disease, heart failure and heart rhythm problems. According to the National Institutes of Health, the most common cause for heart disease for both men and women is the loss of blood supply to the heart when arteries and blood vessels get blocked, or become narrow. This occurrence can lead to a heart attack or stroke. “The risk for women over the age of 55 for heart disease becomes equivalent to that of men,” said Goyal. “It's not a cause-and-effect relationship, but something we've observed through studies.” Smoking, high blood pressure, and high cholesterol are key risk factors for heart disease. Other possible influences include family history, diabetes, excessive alcohol consumption, obesity, and physical inactivity. Women face additional risk with pregnancy complications and menopause.

Women can take major steps to reduce their risk for heart disease by making lifestyle changes, such as limiting alcohol consumption, not smoking, eating healthy, reducing stress, and exercising. Any type of physical activity can improve health, according to Army Col. Robert Oh, chief medical officer at Martin Army Community Hospital, Fort Benning, Georgia. Even so, exercise is about more than weight and fitness, he added. “It's really about health for life,” said Oh, adding that about 150 minutes of moderate-intensity exercise a week or 75 minutes of vigorous-intensity exercise a week, is recommended. “A new study suggests that even if you did less than 150 minutes a week, but you did one or two sessions per week, [you] could have some significant health benefits.”

Service women get regular health check-ups, but once they leave the military, they need to keep track of their health, just as dependents of service members do, said Goyal. “Women need to ask their doctor, ‘Hey, do I need to worry about this?’ and, ‘Do I need to take an aspirin a day to reduce the risk of heart disease?’” said Goyal. “Knowing that heart disease is so prevalent, it's really more of a public health issue for everyone.” [Source: Helath.mil | March 9, 2017 ++]

Drug Cost Increases Update 04 ► Trump Jumps Back Into Debate

President Donald Trump jumped back into the debate over drug pricing on 7 MAR, sending pharmaceutical stocks down again with a tweet promising to lower medicine costs for American people. In a tweet shortly before 9 a.m.

New York time, Trump said he's working on a "new system where there will be competition in the drug industry." Mylan NV, the maker of the EpiPen allergy shot that was at the center of the public outrage over drug prices last year, declined 1.5 percent to \$43.36 at 12:18 p.m. in New York, while Perrigo Co. dropped 2.5 percent and Allergan Plc fell 1.5 percent.

Trump sent his tweet the morning after House Republicans unveiled their long-awaited legislation to repeal and replace the Affordable Care Act late Monday, which he also touted 7 MAR, adding that competition will come later in the health-care rollout. "We are intrigued by the timing of President Trump's tweet this morning as it followed rapidly behind the House health-care reform bill, and we believe shows the administration's continued focus on drug pricing," Vamil Divan, an analyst at Credit Suisse AG, said in a note to clients. The 25-member Standard & Poor's 500 Pharmaceuticals, Biotechnology & Life Sciences Index dropped as much as 1.3 percent, the most since Jan. 11, when Trump said the pharmaceutical industry is "getting away with murder." The president has promised to lower drug costs multiple times -- and threatened to use the government's buying power to force prices down -- but so far has not unveiled any specifics about how to do so.

The Tuesday tweet left analysts struggling to figure out what the president meant, especially because Trump has alluded to bidding in the past. Unlike most countries in the world, the U.S. doesn't directly regulate medicine prices, and drugmakers have strongly resisted it. There already is competition between branded drugs and generic drugs, which also face intense pricing wars among themselves, Umer Raffat, an analyst at Evercore ISI, said in a note to clients. Medicare Part D, the prescription drug part of the government program for the elderly, already includes multiple formulary tiers with branded drugs that are interchangeable, meaning they can generally compete against each other, Raffat wrote. That's not the case for Medicare Part B, which covers doctor visits, outpatient treatments and lab tests, Raffat wrote. "Reality is, we just don't know until something definitive is put out," he wrote.

Lowering co-payments is a short-term possible way of lowering drug costs, according to Divan, the Credit Suisse analyst. He wrote he's unclear how Part D could be reformed since pharmacy benefit managers -- middlemen who negotiate drug prices in secret -- already providing "some competition." There could be some potential changes to Part B policies, he said. Trump is "committed to making drugs more affordable while promoting innovation, and cutting regulations to encourage drug companies to bring back operations and jobs to the United States," the White House said in an emailed statement, without elaborating on the meaning of the tweet.

Drugmakers are under intense pressure to come up with ways to reduce prices amid outcry from members of Congress and U.S. customers. Some companies, including Allergan and Swiss giant Novartis AG, have responded with voluntary actions to cap price increases. Johnson & Johnson and Merck & Co. have taken steps to increase transparency about their prices. J&J reversed earlier losses and was up 0.1 percent, and Merck dropped 0.5 percent. Drug wholesalers also fell, with McKesson Corp. down 2.3 percent, Cardinal Health Inc. dropping 0.7 percent, and AmerisourceBergen Corp. declining 1.6 percent. Trump met with top industry executives in January, and his comments to the media suggested backing off a worst-case scenario where the U.S. government would set drug prices. The industry's lobbying group has started a media campaign to highlight the science behind its medicines. It has also been joined by drugmakers in pushing outcome-based pricing programs, which is when companies refund some of the money to insurers if a medicine doesn't work as expected.

Representative Elijah Cummings from Maryland, a critic of high drug prices who is the highest-ranking Democrat on the House Committee on Oversight and Government Reform, was set to discuss lowering drug prices with Trump on 8 MAR, his office said in a statement. Also attending will be Representative Peter Welch, a Democrat from Vermont, and Redonda Miller, a physician and president of Johns Hopkins Hospital in Baltimore. "The President promised -- both during the campaign and after -- that he would support efforts to stem the skyrocketing prices of prescription drugs, so I am looking forward to discussing ideas he said he supports," Cummings said in the statement. [Source: Bloomberg Markets | Jared S Hopkins | March 7, 2017 ++]

Drug Cost Increases Update 05 ► Change Demanded in Rip-Off Prices

Morning Consult, a nonpartisan digital media and research company, has published an op-ed, The RX Rip-off, by Prescription Justice's Executive Director, Jodi Dart. The op-ed highlights Prescription Justice's recent poll by Zogby analytics that reveals roughly 79 percent of Americans believe prescription drug prices are too high, and nearly 52% believe that pharmaceutical companies engage in price gouging and put profits over patients. The poll also shows that overwhelming majorities support changes that will bring down drug prices, which comes hard on the heels of new Prescription Justice analysis showing 45 million Americans did not fill a prescription last year due to cost (<http://pjag.us14.list-manage.com/track/click?u=e5b546c8672a7feee5738e3a0&id=1de9e758ec&e=f2d5038402>).

Ms. Dart writes that there are concrete steps that members of Congress and the Trump administration should take to help the millions of Americans who struggle with the high cost of prescription medications. These include allowing Medicare to negotiate with pharmaceutical manufacturers to lower prices, ending pay to delay to increase access to generic drugs and importing less expensive drugs from other countries, and, finally, making personal drug importation legal. Ms. Dart also emphasizes that President Trump could immediately help Americans through executive actions to expressly permit the safe use of international online pharmacies on which orders are placed to import medication for personal use.

- Go to <https://morningconsult.com/opinions/rx-rip-off> to read Ms. Dart's full op-ed, click here.
- Go to <http://prescriptionjustice.org/policy-recommendations-personal-importation-trump-executive-authorities.pdf> to read the policy report, click here.
- Go to [http://prescriptionjustice.org/Prescription Justice Zogby Poll Data Feb 2017.pdf](http://prescriptionjustice.org/Prescription_Justice_Zogby_Poll_Data_Feb_2017.pdf) to see the Zogby poll on drug prices, click here.

[Source: Prescription Justice | March 8, 2017 ++]

Vitamin Supplements Update 06 ► 'D' | Natural Ways to Boost It

A lack of vitamin D has been linked to everything from infertility to premature bone aging. If those long-term health concerns don't prompt you to look for ways to boost your vitamin D intake, consider the recent NPR report citing research based on 25 medical studies that found vitamin D intake may help prevent colds and flu. So, yes, a healthy dose of vitamin D can help you in the short term, too. But just how do you make sure you have adequate vitamin D intake? That's 600 IU (international units) per day for most adults, according to the National Academy of Medicine. Those over 70 years old are advised to get 800 IU per day. Sure you can take multivitamins to help meet reach that threshold. Most of them have about 400 IU of vitamin D, reports NPR. But there are plenty of natural ways to easily boost your vitamin D intake as well. Consider these 11 suggestions from experts:

1. Eat fatty fish -- Fish are naturally rich in vitamin D. Here's how some of them measure up, according to a report by the National Institutes of Health:

- Cod liver oil, 1 tablespoon: 1,360 IU
- Cooked swordfish, 3 ounces: 566 IU
- Cooked sockeye salmon, 3 ounces: 447 IU
- Canned tuna in water, drained, 3 ounces: 154 IU
- Two sardines, canned in oil, drained: 46 IU

2. Choose foods fortified with vitamin D -- The NIH reports the following IU tallies for specific foods (check labels to verify amounts in individual brands):

- Orange juice, 1 cup: 137 IU

- Nonfat, reduced fat or whole milk, 1 cup: 115-124 IU
- Yogurt, 6 ounces: 80 IU
- Margarine, 1 tablespoon: 60 IU
- Ready-to-eat cereal, ¾ to 1 cup: 40 IU

3. Cook up beef liver -- This is not everyone's cup of tea, but the NIH reports 3 ounces of cooked beef liver delivers a luscious 42 IU of vitamin D.

4. Enjoy a slice of Swiss cheese -- The NIH reports that 1 ounce of this cheesy goodness contains 6 IU.

5. Eat your eggs -- One large egg yolk has 41 IU, reports the NIH.

6. Toss in some mushrooms -- Various types of mushrooms – especially those exposed to ultraviolet light – deliver megadoses of vitamin D, reports the U.S. Department of Agriculture. For example, 1 cup of brown, Italian or crimini mushrooms has up to 1,110 IU. Portobellos contain close to 1,000 IU.

7. Think kid stuff -- Remember the old commercials urging kids to drink their Ovaltine? (There's a spoof of it in the classic 1983 holiday movie "A Christmas Story.") Well, it turns out that's not bad advice. One cup of Ovaltine powder (about four 4-tablespoon servings) has 284 IU, an amount comparable with one ready-to-drink bottle of Nestle Boost Plus, which has 218 IU, according to the USDA.

8. Serve some ham -- Non-fish lovers may enjoy a slice of extra lean canned cured ham (140 grams or 1 cup by volume). That amount has about 130 IU of vitamin D, according to the USDA.

9. Dish out yogurt -- A container of Silk plain soy yogurt has 120 IU of vitamin D, reports the USDA. (Many of the other ordinary yogurts contained 80-85 IU of vitamin D per container, while the Greek varieties hovered closer to 50. Be sure to check the label to be sure of what you're getting.)

10. Grab some turkey or pork sausage -- Include links or patties with your breakfast. A serving of about 1 cup of these sausages delivers 103 IU, reports the USDA.

11. Get a little sun -- The days of sunbathing without sunscreen passed years ago due to revelations about the skin cancer risk. You don't need to go overboard — 20 to 25 minutes of daily sun exposure can prompt your body to manufacture more vitamin D, according to Stephen Honig, director of the Osteoporosis Center at NYU Langone Hospital for Joint Diseases, speaking to Shape magazine. It's important to go out into the sun, not catch rays through a window. To trigger maximum vitamin D production, expose as much skin as safely possible to receive the maximum benefit, taking into consideration your skin tone, the time of day and the intensity of the sun where you live. Check out the website <https://www.vitaminCouncil.org/about-vitamin-d/how-do-i-get-the-vitamin-d-my-body-needs> of the California-based nonprofit Vitamin D Council for more information.

[Source: MoneyTalksNews | Nancy Dunham | March 9, 2017 ++]

Flashbacks ► Strategies for Coping With Them

Flashbacks happen when you feel like you are reliving a traumatic experience or memory. They can occur day or night, and can occur recently or even years after the event. You may remember the entire event or only details such as sounds and smells. Flashbacks can occur in veterans who have experienced a traumatic event. While not always, flashbacks are often a symptom of posttraumatic stress disorder (PTSD). They can occur as a result of combat, a training accident, sexual trauma or other traumatic events. If you are having flashbacks, know you are not alone. Help is available.

It is important to talk to your health care provider if you have flashbacks. Flashbacks, as well as other PTSD symptoms, can eventually limit your ability to enjoy life and affect how you act in social settings. This includes at work or in your family life. A provider can explain why flashbacks may be occurring and help you work through them with an effective treatment. Potential treatments include:

- Prolonged exposure therapy <http://www.realwarriors.net/go/Prolonged-exposure-therapy>: Repeatedly talking about the traumatic event in memory and describing the event aloud in detail until your memories of it no longer feel upsetting.
- Eye movement desensitization and reprocessing (EMDR) <http://www.realwarriors.net/go/Eye-movement-desensitization-and-reprocessing> : While thinking about or discussing your memories, you are taught to shift your focus away from the memories. For example, you may focus on eye movements or tapping instead. This can help change how you react to memories of your trauma.
- Cognitive processing therapy <http://www.realwarriors.net/go/Cognitive-processing-therapy>: This type of therapy teaches you skills to change your negative thoughts and beliefs associated with trauma so they become less distressing. You can then begin to change how you feel and your behavior.

Take Control

While the occurrence of flashbacks usually improves as your PTSD treatment progresses, there are strategies (<http://www.ptsd.va.gov/public/treatment/cope/coping-traumatic-stress.asp>) you can use to better manage flashbacks in between your appointments. They can help you safely cope and prevent flashbacks from affecting your daily life. If you are experiencing flashbacks, try these tips on your own during or right after a flashback.

- Tell yourself you are having a flashback. Talk to yourself (literally) and note where you are now and that you are safe.
- Remind yourself that the traumatic event is over. It happened in the past and you are in the present.
- Help yourself stay present by using your five senses. Look around you. Walk into another room and drink a glass of water. Speak with a loved one you trust.
- Know what makes you feel secure. For example, wrapping a warm blanket around yourself, practicing breathing or relaxation exercises (<http://www.realwarriors.net/active/treatment/relaxation.php>) , or calling a friend.
- Learn the triggers that lead to your flashback. After a flashback, use a notebook to write down what happened right before, what you heard and how you felt.

If you are having flashbacks as the result of military service or other life stress, know that reaching out is a sign of strength. Contact the DCoE Outreach Center to confidentially speak with a trained health resource consultant 24/7, call 866-966-1020 or use the Real Warriors Live Chat. You can also visit their “Seek Help, Find Care” page at <http://www.realwarriors.net/seek-help.php> to see a list of key psychological health resources. [Source: DCOE | Sidney R. Hinds III | March 9, 2017 ++]

TRICARE Podcast 386 ► Donors | Physical Activity | Sleep Habits

Blood & Organ Donors -- Medical donations, including blood, platelets, organ, eye, body tissue and bone marrow, are a constant need. Blood and blood products are used for patients of every age and for a variety of reasons. Those with cancer, those having surgery, and military members with battlefield injuries all depend on a daily supply of blood donations. A blood donor can give whole blood every eight weeks, or blood platelets every two weeks. Potential donors are always screened before donating. There are four blood donation groups, A, B, AB, and O. You may have heard type O Negative donors referred to as “universal donors” because anyone can receive their blood and it’s often used in emergencies if there’s not enough time to learn a patient’s blood type.

To learn more about blood and platelet donation visit the Armed Services Blood Program at www.militaryblood.dod.mil. There's also a shortage of those signed up for the bone marrow and organ donor registries. More than twelve thousand people are diagnosed each year with diseases that require bone marrow transplants. And more than seventy percent of these people can't find a match in their family and need an unrelated donor. About twenty-two people a day die waiting for organ transplants. You can register to be an organ donor at your local Department of Motor Vehicles by choosing "yes" for organ donation on your driver's license application.

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Physical Activity -- Do you spend your day sitting either at your desk, in the car, at the dinner table, or on the couch? All of this sedentary time puts you at greater risk for chronic diseases, such as heart disease, diabetes, and cancer. Even if you spend thirty minutes every day exercising, it may not be enough. The "active couch potato" phenomenon shows that even people who meet the minimum requirements for daily exercise still have risk factors for chronic diseases as their sitting time increases. Here are some ideas for working more physical activity into your work day. First, bike or walk to work if you can. If that's not possible, try parking further from your building or choosing a higher level in the parking garage. Take walking breaks. Instead of calling or emailing a coworker, try walking to their desk. Walk to a cafeteria or park before eating your lunch. And take the stairs instead of the elevator. Experts say even two minutes of walking per hour is beneficial, so set your timer and go. Finally, take small standing breaks, such as standing while on the phone or when engaged in conversation with someone at your desk. You could also consider switching to a standing desk in your office. Taking these simple steps to stand more often will improve your chances of a longer and healthier life!

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Healthy Sleep Habits -- Too much screen time can affect your dream time. Do you cuddle with your smartphone or tablet before going to sleep? It may be the reason you feel like you didn't sleep a wink. Electronic devices have blue light, which can disrupt your natural sleep cycle and keep your body from secreting melatonin, a powerful sleep hormone. To prevent this from happening, you should stop using all electronic devices including televisions about two hours before bedtime. If for some reason you can't avoid using electronic devices before bed, there are some tools that can help offset blue-light exposure. Check to see if your mobile device has a blue-light reducing function already installed. You can also buy special glasses with amber lenses that block blue light, or download software that adjusts the light on your screen depending on the time of day and where you are.

Remember, not all light exposure is bad. Make sure to head outside into natural sunlight, especially when it's early to help you sleep better at night. If you understand the effects blue light can have on sleep then you can make the best use of technology while also getting a full night's rest. The Mayo Clinic offers some helpful tips and resources to getting a better night's sleep. Visit www.mayoclinic.org/healthy-lifestyle for more information.

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The above is from the TRICARE Beneficiary Bulletin, an update on the latest news to help you make the best use of your TRICARE benefit. [Source: <http://www.tricare.mil/podcast> | February 23, 2017 ++]

TRICARE Podcast 387 ► Nutrition Awareness | MHS Genesis | TBIs

Nutrition Awareness Month -- Are you ready to put your best fork forward? The Academy of Nutrition and Dietetics celebrates National Nutrition Month® each March to teach people of all ages how good nutrition can lead to a healthier lifestyle. Did you know poor nutrition can lead to a higher risk for lung, esophageal, stomach, colorectal and prostate cancers? According to the Centers for Disease Control and Prevention, poor nutrition also leads to a higher risk of obesity and malnutrition. In children, this can negatively affect overall health, cognitive

development, and school performance. The Academy offers several tips to help you have better nutrition. Make sure to eat breakfast every day, and to fill half your plate with fruits and vegetables at every meal. Watch your portion sizes and keep healthy snacks on hand. Finally, get educated on food labels and food safety guidelines so that you'll know how to make the best nutrition decisions for yourself and your family. Visit the Academy's website at www.eatright.org for fun and educational resources, including tip sheets, videos, and games. You can also find healthy living tips and resources at www.TRICARE.mil/livewell.

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MHS Genesis -- Last month, Fairchild's 92nd Medical Group became the first military hospital to use MHS GENESIS, a single integrated electronic inpatient and outpatient health record. MHS Genesis transforms health care delivery within the Defense Department's Military Health System and in its first few weeks has gotten positive reviews from healthcare providers using the program. MHS Genesis brings cutting-edge technology to patients and health care providers. It allows the Department of Veterans Affairs and private-sector health care partners access the data necessary to collaborate and make the best possible health care decisions. The TOL patient portal at www.tricareonline.com has been redesigned to allow for access to MHS GENESIS by patients and health care providers. Patient safety and the security of data is of great importance in the new streamlined and intuitive system. Within the year, MHS GENESIS will deploy at three other military medical facilities in Washington State including Naval Hospital Bremerton, Madigan Army Medical Center and Naval Hospital Oak Harbor. MHS Genesis will be fully deployed worldwide by 2022. Learn more about this exciting new program at www.health.mil/MHSGenesis.

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Traumatic Brain Injuries -- Traumatic brain injuries affect millions of Americans each year, and no two brain injuries are exactly alike. Be sure to know the signs and symptoms of TBI as well as how you can prevent yourself and your loved ones from experiencing it. According to the Centers for Disease Control and Prevention, the leading cause of traumatic brain injury is falls. Because the brain is soft and jello-like in consistency and "floats" in cerebral-spinal fluid in our skulls, when the head is struck or shaken violently it can cause brain injury. You can help prevent TBI by always having your child use age and size-appropriate car seats, and by making sure they are properly installed. Also, make sure your child always wears the right helmet for their activity and that it fits right. Wearing a helmet is a must to help lower the risk of serious brain injury and skull fracture. But remember, there's no such thing as a "concussion-proof" helmet. And if you have a toddler, make sure to have gates at the tops and bottoms of stairs to prevent your toddler from falling down them. If you take your child to the playground, make sure that there is soft material under the play equipment, like mulch or sand rather than grass or dirt.

TRICARE offers a comprehensive rehabilitation benefit that includes occupational therapy, physical therapy, speech therapy and behavioral health services when ordered by a physician as part of a comprehensive individual rehabilitation treatment plan. Learn more at www.TRICARE.mil/CRT.

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The above is from the TRICARE Beneficiary Bulletin, an update on the latest news to help you make the best use of your TRICARE benefit. [Source: <http://www.tricare.mil/podcast> | March 3, 2017 ++]

TRICARE Podcast 388 ► Speech Disorders | Privacy | Patient Safety

Speech & Language Disorders -- According to the American Speech Language Hearing Association, development of communication skills begins in infancy, before children even say their first word. Did you know newborns can express pleasure sounds and cry for different needs? As babies get older, they babble and make more speech-like sounds. You can keep track of developmental milestones to understand your child's speech capabilities by following

your child's progress in their ability to speak, listen, and understand. By four or five years old, a child can typically hold a conversation and tell short stories. If you have concerns about your child's progress, then you may discuss them with your primary care provider. Their doctor may make a referral to an audiologist or speech-language pathologist to evaluate causes for your child's speech and language difficulties. Children usually get their first hearing screening before one month to give a good baseline for speech and language development.

TRICARE covers speech therapy to treat speech, language and voice dysfunctions from birth defects, disease, injury, hearing loss, and pervasive developmental disorders. You will need a referral or prescription before getting speech therapy services. Contact your primary care manager or family provider. For more information on speech therapy visit www.tricare.mil/speechtherapy.

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Privacy Practices -- You may have heard that TRICARE will have two new managed care contractors starting October first: Humana Military in the East region and Health Net Federal Services in the West Region.. The Department of Defense wants to make sure that TRICARE beneficiaries continue to receive quality health care during this transition. DOD will be monitoring seven critical performance areas: provider networks, enrollment, customer service, management, referral management, claims processing, and medical management. Through these quality assurance measures, DOD will know the managed care support contractors are performing to the standard you deserve. DOD doesn't tell contractors how to get network providers or which providers to include, but it does charge the contractors with supplying enough qualified providers to meet the demand for care.

What can you do now to prepare for these changes? First, make sure you and all of your family members are enrolled in the Defense Eligibility Enrollment System or DEERS, and review the information to make sure it's accurate, especially your contact information so that your primary care manager who might be new, can reach you. Next, though you used to get some materials mailed to you such as claim forms and your Explanation of benefits statements, under the new contract you will only be able to get that information online, so make sure you sign up for a milConnect account at www.dmdc.osd.mil/identitymanagement. Finally, stay tuned for updates between now and October first.

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Patient Safety -- More than half of adults age 65 and older have three or more chronic medical problems, such as heart disease, diabetes, cancer, or arthritis. Sometimes older adults may have multiple health problems and not know whether they need to see a doctor. The Nurse Advice line is here to help. The Nurse Advice Line was designed to increase patient safety and further ensure a positive patient experience. Military Helath System Patient Centered Medical Home team members can access live Nurse Advice Line information so they are aware of their patients' situation and can provided follow-up if needed. Whether you are suffering from a rash, a sinus infection, or just a common cold, experts are waiting to take your call. When you call the Nurse Advice Line, a registered nurse will help you figure out whether you can handle your health concern with self-care or if you need to see a medical professional. Call the NAL at 1-800-TRICARE and select option 1. Get more information on the Nurse Advice line at www.tricare.mil/nal.

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The above is from the TRICARE Beneficiary Bulletin, an update on the latest news to help you make the best use of your TRICARE benefit. [Source: <http://www.tricare.mil/podcast> | March 10, 2017 ++]

* Finances *



SBP DIC Offset Update 48 ► MOAA to Storm The Hill in APR

The Military Officers Association of America (MOAA) will “Storm the Hill” in April 2017 on several issues including repeal of the SBP-DIC offset, often referred to as the “Widows Tax.” The offset is truly unfair and we have been working to repeal it for more than 15 years. Outright repeal would cost approximately \$8 billion at this juncture and budget dollars are very tight right now. In 2007, Congress recognized the “unfairness” of the offset and authorized the Special Survivor Indemnity Allowance (SSIA) as a vehicle to repeal the offset gradually, in a manner similar to concurrent receipt of disability pay. However, SSIA will expire in May 2018 - unless Congress extends the allowance.

MOAA Government Relations Vice President Col. Dan Merry, USAF (Ret); Director of Survivor, Tax, and Social Security Issues Col. Phil Odom, USAF (Ret); and Director of Policy and Advocacy for Currently Serving and Retired Affairs Col. Mike Barron, USA (Ret), met on 9 MAR with professional staff of the House Armed Services Committee about securing funding to extend SSIA beyond its scheduled expiration date of May 2018. Most of the discussion centered on securing support from senior leadership in the House and Senate to make this a priority issue. [Source: MOAA Leg Up | March 10, 2017 ++]

Mortgage Update 05 ► Which is Best - 15 or 30 Year Term

According to The Motley Fool (<https://www.fool.com/mortgages/2017/03/12/why-15-years-is-the-perfect-term-for-a-mortgage.aspx>) a 15-year mortgage is the “perfect term” for those in need of a home loan. As Dan Caplinger writes: By going beyond the typical 30-year mortgage and instead looking at the 15-year mortgage, you can put yourself in a much better financial position over time and keep more of your hard-earned money for yourself. Among other reasons, Caplinger argued that the 15-year loan is best because borrowers save substantially on interest and build equity quickly. In another recent story, Money Talks News reporter Marilyn Lewis ran some numbers and found that although the monthly payment on a 30-year, \$200,000 loan was lower — \$966, compared with \$1,412 for a 15-year loan — overall interest payments were substantially higher on the longer loan term. In fact, a 30-year loan would cost you \$147,901 in interest over 30 years. By contrast, the 15-year loan would cost you just \$54,187 in interest.

Lewis says that’s a powerful argument for choosing the 15-year loan: You pay \$446 more each month, but you’ll own the home in half the time and pay just \$54,187 in interest — saving a whopping \$93,714. That’s nearly \$100,000 that stays in your pocket rather than going to a lender. Is a 15-year mortgage loan right for you? Before you rush out to refinance into a 15-year loan, understand that other factors might make it a bad choice for some borrowers. As Lewis discovered, a 15-year mortgage requires you to pony up an extra \$466 each month. Money Talks News founder Stacy Johnson points out that investing those dollars elsewhere might net you a bigger return than the amount you would save by paying down your mortgage more quickly. Stacy — who is a certified public accountant — says that taxes can complicate calculations when trying to decide whether the 15-year option is the best financial move. You can read more about that in “Ask Stacy: <http://www.moneytalksnews.com/ask-stacy-whats-the-best-way-pay-off-mortgage-early>”.

But in the end, he also argues that sometimes, peace of mind can trump basic math and make the 15-year loan a great option for many homeowners: Debt isn't all about the digits. There's also the "ball and chain" effect. The additional peace of mind you achieve by becoming debt-free is priceless, especially when you consider that most homeowners spend nearly their entire adult lives in debt. So if casting off the shackles is your main motivation, well, math be damned. Just do it. [Source: MoneyTalksNews | Chris Kissell | March 13, 2017 ++]

FICO Credit Score Update 10 ► Civil Judgment/Tax Lien Impact

Your credit scores might change for the better after 1 JUL. That's when the three national credit reporting agencies "plan to stop collecting and reporting substantial amounts of civil judgment and tax lien information on public records affecting millions of American consumers," according to a recent report by syndicated real estate columnist Kenneth R. Harney. Civil judgments are court-ordered debts stemming from civil lawsuits. Tax liens are placed by government agencies on the properties of folks with unpaid taxes. Currently, civil judgments and tax liens can appear in credit files and impact credit scores, Harney says, so consumers stand to benefit from this change. However, the change could negatively impact mortgage lenders, landlords and other entities that use credit files to evaluate consumers. For example, David H. Stevens, the president and CEO of the Mortgage Bankers Association, tells Harney that without civil judgment and tax lien information, some applicants' credit scores might be artificially raised, creating "false positives" that make those applicants appear to be less of a risk than they are.

Time to check your credit reports If you're unsure whether this change will affect you, it's probably time to check your credit reports. The three national credit reporting agencies — Equifax, Experian and TransUnion — all keep credit reports on consumers. Federal law requires them all to provide you with a free copy of your credit report once a year. You can obtain them at AnnualCreditReport.com. Those credit reports will not include your credit scores, however — at least not for free. But several other websites, such as www.creditsesame.com, will give you a VantageScore (FICO's competitor) for free. For a FICO score, check out <http://www.moneytalksnews.com/8-ways-get-your-fico-score-for-free>. Additionally, many financial institutions now give their customers either a VantageScore or FICO score for free. You'll find a list of them in <http://www.moneytalksnews.com/19-card-companies-offer-free-credit-score-info>. [Source: MoneyTalksNews | Karla Bowsheer | March 10, 2017 ++]

Home Loan Guaranty ► VA Loan Criteria

Note: All vets considering buying or refinancing a residence should be familiar with the following:

VA home loan guaranties are issued to help eligible Servicemembers, Veterans, Reservists, National Guard members, and certain surviving spouses obtain homes, condominiums, and manufactured homes, and to refinance loans. For additional information or to obtain VA loan guaranty forms, visit <http://www.benefits.va.gov/homeloans>.

Eligibility: In addition to the periods of eligibility and conditions of service requirements, applicants must have a good credit rating, sufficient income, a valid Certificate of Eligibility (COE), and agree to live in the property in order to be approved by a lender for a VA home loan. Lenders can apply for a COE online through the Veterans Information Portal (<https://vip.vba.va.gov/portal/VBAH/Home>). Active duty Servicemembers and Veterans can also apply online at <http://www.ebenefits.va.gov>. Although it's preferable to apply electronically, it is possible to apply for a COE using VA Form 26-1880, Request for Certificate of Eligibility.

In applying for a hard-copy COE from VA Eligibility Center using VA Form 26-1880, it is typically necessary that the eligible Veteran present a copy of his/her report of discharge or DD Form 214, Certificate of Release or

Discharge from Active Duty, or other adequate substitute evidence to VA. An eligible active duty Servicemember should obtain and submit a statement of service signed by an appropriate military official to the VA Eligibility Center. A completed VA Form 26-1880 and any associated documentation should be mailed to Atlanta Regional Loan Center, Attn: COE (262), P.O. Box 100034, Decatur, GA 30031. Please note that while VA's electronic applications can establish eligibility and issue an online COE in a matter of seconds, not all cases can be processed online.

Surviving Spouses: Some spouses of Veterans may have home loan eligibility. They are:

- The unmarried surviving spouse of a Veteran who died as a result of service or service-connected causes,
- The surviving spouse of a Veteran who dies on active duty or from service-connected causes, who remarries on or after attaining age 57 and on or after Dec. 16, 2003, and
- The spouse of an active duty member who is listed as missing in action (MIA) or a prisoner of war (POW) for at least 90 days.

VA Appraisals: No loan can be guaranteed by VA without first being appraised by a VA-assigned fee appraiser. A lender can request a VA appraisal through VA systems. The Veteran borrower typically pays for the appraisal upon completion, according to a fee schedule approved by VA. This VA appraisal estimates value of the property. It is not an inspection and does not guarantee the house is free of defects.

Closing Costs: For purchase home loans, payment in cash is required on all closing costs, including title search and recording fees, hazard insurance premiums and prepaid taxes. For refinancing loans, all such costs may be included in the loan, as long as the total loan does not exceed the reasonable value of the property. Interest rate reduction loans may include closing costs, including a maximum of two discount points.

VA Funding Fees: A funding fee must be paid to VA unless the Veteran is exempt from such a fee. The fee may be paid in cash or included in the loan. Closing costs such as VA appraisal, credit report, loan processing fee, title search, title insurance, recording fees, transfer taxes, survey charges, or hazard insurance may not be included for purchase home loans. All Veterans, except those who are specified by law as exempt, are charged a VA funding fee. For all types of loans, the loan amount may include this funding fee. VA funding fee and up to \$6,000 of energy-efficient improvements can be included in VA loans. However, no other fees, charges, or discount points may be included in the loan amount for regular purchase or construction loans. For refinancing loans, most closing costs may be included in the loan amount.

Required Occupancy: To qualify for a VA home loan, a Veteran or the spouse of an active-duty Servicemember must certify that he or she intends to occupy the home. A dependent child of an active-duty Servicemember also satisfies the occupancy requirement.

Financing, Interest Rates and Terms: Veterans obtain VA-guaranteed loans through the usual lending institutions, including banks, credit unions, and mortgage brokers. VA-guaranteed loans can have either a fixed interest rate or an adjustable rate, where the interest rate may adjust up to one percent annually and up to five percent over the life of the loan. VA does not set the interest rate. Interest rates are negotiable between the lender and borrower on all loan types.

Loan Assumption Requirements and Liability: VA loans made on or after March 1, 1988, are not assumable without the prior approval of VA or its authorized agent (usually the lender collecting the monthly payments). To approve the assumption, the lender must ensure that the purchaser is a satisfactory credit risk and will assume all of the Veteran's liabilities on the loan. If approved, the purchaser will have to pay a funding fee that the lender sends to VA, and the Veteran will be released from liability to the federal government.

Loans made prior to Mar. 1, 1988, are generally freely assumable, but Veterans should still request the lender's approval in order to be released of liability. Veterans whose loans were closed after Dec. 31, 1989, usually have no liability to the government following a foreclosure, except in cases involving fraud, misrepresentation, or bad faith,

such as allowing an unapproved assumption. However, for the entitlement to be restored, any loss suffered by VA must be paid in full.

VA Assistance to Veterans in Default: VA urges all Veterans who are encountering problems making their mortgage payments to speak with their servicers as soon as possible to explore options to avoid foreclosure. Contrary to popular opinion, servicers do not want to foreclose because foreclosure costs money. Depending on a Veteran's specific situation, servicers may offer any of the following options to avoid foreclosure:

- Repayment Plan – The borrower makes a regular installment each month plus part of the missed installments.
- Special Forbearance – The servicer agrees not to initiate foreclosure to allow time for borrowers to repay the missed installments. An example of when this would be likely is when a borrower is waiting for a tax refund.
- Loan Modification– Provides the borrower a fresh start by adding the delinquency to the loan balance and establishing a new payment schedule.
- Additional time to arrange a private sale – The servicer agrees to delay foreclosure to allow a sale to close if the loan will be paid.
- Short Sale – When the servicer agrees to allow a borrower to sell his/her home for a lesser amount than what is currently required to pay off the loan.
- Deed-in-Lieu of Foreclosure – The borrower voluntarily agrees to deed the property to the servicer instead of going through a lengthy foreclosure process.

Servicemembers Civil Relief Act: Veteran borrowers may be able to request relief pursuant to the Servicemembers Civil Relief Act (SCRA). In order to qualify for certain protections available under the Act, their obligation must have originated prior to their current period of active military service. SCRA may provide a lower interest rate during military service and for up to one year after service ends, provide forbearance, or prevent foreclosure or eviction up to nine months from period of military service.

Assistance to Veterans with VA-Guaranteed Home Loans: When a VA-guaranteed home loan becomes delinquent, VA may provide supplemental servicing assistance to help cure the default. The servicer has the primary responsibility of servicing the loan to resolve the default. Veterans with VA-guaranteed home loans can call 1-877-827-3702 to reach the nearest VA office where loan specialists are prepared to discuss potential ways to help save the loan.

Preventing Veteran Homelessness: Veterans who feel they may be facing homelessness as a result of losing their home can call 1-877-4AID VET (877-424-3838) or go to <http://www.va.gov/HOMELESS/index.asp> to receive assistance from VA.

Assistance to Veterans with Non-VA Guaranteed Home Loans: For Veterans or Servicemembers who have a non-VA-guaranteed or sub-prime loan, VA has a network of eight Regional Loan Centers and a special servicing centers in Hawaii that can offer advice and guidance. Borrowers may visit www.benefits.va.gov/homeloans, or call toll free -1-877-827-3702 to speak with a VA loan technician. However, unlike when a Veteran has a VA-guaranteed home loan, VA does not have the authority to intervene on the borrower's behalf.

VA Refinancing of a Non-VA Guaranteed Home Loan: Veterans with non-VA guaranteed home loans now have new options for refinancing to a VA-guaranteed home loan. These new options are available as a result of the Veterans' Benefits Improvement Act of 2008. Veterans who wish to refinance their subprime or conventional mortgage may now do so for up to 100 percent of value of the property.

Other Assistance for Delinquent Veteran Borrowers: If VA is not able to help a Veteran borrower retain his/her home (whether a VA-guaranteed loan or not), the Department of Housing and Urban Development (HUD) offers assistance to homeowners by sponsoring local housing counseling agencies. To find an approved agency in your

area, please search online at <http://www.hud.gov/offices/hsg/sfh/hcc/hcs.cfm>, or call HUD's interactive voice system at (800) 569-4287.

[Source: https://www.va.gov/opa/publications/benefits_book/Chapter_3_non_healthcare_benefits.asp#Home-Loan-Guaranty | Feb 2017 ++]

VA Home Loan Update 47 ► Falling Behind Tips

Loans guaranteed by the U.S. Department of Veterans Affairs are popular among Veterans and members of the U.S. military. One major reason why is that VA loans can be used to purchase a home with no down payment required, and with no mortgage insurance required. But what if, for a host of reasons, you can no longer afford the monthly payment on your VA loans? Fortunately, there is hope if you are struggling to make your VA loan payments each month. By taking a proactive approach, you can avoid a default on your mortgage, and boost the odds that all will end alright. The most important thing to do? Don't ignore the problem.

1. Make that call: If your VA loan becomes unaffordable, make sure to call your mortgage servicer immediately. Your mortgage servicer is the company to which you send your mortgage payment each month. Your mortgage statement will include a customer service number to use. When you call, explain that you're struggling to make your monthly payments and that you'd be grateful for some assistance. It might seem like a difficult phone call to make. But, know that your mortgage lender doesn't want you to miss payments any more than you do, and it certainly doesn't want to see you lose your home in foreclosure. Your lender would rather you make your mortgage payment each month. That's one way the lenders make money. Your lender, then, may be more willing to help you than you might expect.

2. Will a modification help? There are several ways in which your lender can help you when you're having trouble making payments.

- First, your lender can reduce your interest rate, which will lower your monthly payment and make it more affordable.
- Second, it can rework the terms of your loan, to make it more favorable for your current situation. If you are paying off a 15-year fixed-rate VA loan, for example, your lender can convert your mortgage into a 30-year loan, which spreads out your payments and lowers your monthly bill.
- Third, your lender can suggest a temporary halt on your payments, perhaps for two or three months, to give you the time you need to resolve whatever financial issues have made your payments so difficult for you.
- And, fourth, in the most extreme of cases, your lender can reduce your principal balance, the amount you owe on your loan, as a way to lower your payment. It's rare for a lender to do this, but lenders sometimes prefer principal forgiveness over its worst case scenario — foreclosure of a home.

3. Prepare evidence of financial distress: Before a lender will agree to make changes to VA loan, it will want to see proof that you are working through a financial crisis. Your job is to provide that proof. If you've been demoted at work to a lower salary, or had your hours reduced, have copies of your paycheck stubs from before and after the change which prove your drop in income. If a medical condition has resulted in lost wages and big medical bills, have copies of statements from hospitals and medical providers ready to go. If you or your spouse lost a job that used to provide a steady income stream, have a copy of the termination letter. Be prepared, too, to show copies of your most recent bank statements, credit card bills and anything else that you can use to prove the financial struggle you're enduring. The more evidence you can provide, the better your chances of receiving help from your lender.

4. Try counseling: VA offers financial counseling at a series of VA Regional Loan Centers across the country. Financial professionals at these centers are available to help you rework your budget, and to help you find monthly expenses you can reduce. The point of this assistance is to help VA borrowers avoid falling behind on their loan

payments. At http://www.benefits.va.gov/homeloans/contact_rlc_info.asp you can find a list of VA Regional Loan Centers. You can also call 877-827-3702 to find a VA counselor near you. Working with a counselor can help you craft the positive financial habits that can help you avoid future payment problems.

5. Short sale, deed in lieu of: If your lender cannot make a loan modification for you, consider selling your home through a short sale, or by requesting a deed in lieu of foreclosure from your lender. In a short sale, your lender agrees to let you sell your home for less than your current mortgage balance. Because the price for home is lower than typical, short sales can help your home sell quickly. The goal with a short sale is to sell your home before you can fall farther behind on your mortgage. In a deed in lieu of foreclosure, your lender agrees to take over ownership of your house without going through the lengthy foreclosure process. The benefit here is that you no longer have to worry about making mortgage payments. Your home is turned over to your lender, in full.

But whatever solution might work for you, do not ignore your financial challenges. The surest way to find relief is to contact your lender today. [Source: Vantage Point | March 9, 2017 ++]

SBP Beneficiaries Update 01 ► Educate Them | Checklist

Sometimes the most difficult conversations to have are the most important, like helping your loved ones be prepared for when you die. Talking to your family about this topic beforehand is a way to show that you care, and it will help to ease the financial burdens they may face. Military retirees can have beneficiaries for their arrears of pay (AOP), and if they have elected coverage under the Survivor Benefit Plan, they will have an SBP beneficiary as well. This article is intended to help you prepare your AOP beneficiary to file a claim when the time comes.

First -- Make sure you understand what an Arrears of Pay beneficiary is and the nature of the benefit to which they are entitled. Find more information on this benefit here. <http://www.dfas.mil/retiredmilitary/provide/aop.html>

Second -- Tell your beneficiaries who they are. Hopefully, you've designated your beneficiaries for any arrears of pay that may be due. When no beneficiary is named, the payment is made to the highest person in what is known as the "Order of Precedence." The Order of Precedence is the federally mandated order of inheritance that applies to legacies without a designated beneficiary. To find more information on "Order of Precedence" refer to <http://www.dfas.mil/retiredmilitary/provide/aop/aop-order.html>. Keep in mind that it can take many months to locate your survivors, identify who comes highest in the Order of Precedence and then make the payment. That's why having a current, correct, and complete beneficiary designation on file is important to prevent delays or errors in your arrears payments.

Designating a sole beneficiary in your will does not automatically make that person your AOP beneficiary. AOP determination is based exclusively on the AOP beneficiary election in your retired pay account. To review your current arrears of pay beneficiaries and to make changes, visit the Beneficiaries for Arrears link once you've signed in to your myPay account. For more detailed instructions on designating an Arrears of Pay beneficiary on myPay, you can review the article on our website <http://www.dfas.mil/retiredmilitary/provide/aop/aop-beneficiary.html>.

Third -- Let your beneficiary know that sometimes money that has already been deposited into your checking account needs to be returned to DFAS. Military retired pay is only payable for as long as you are alive. Entitlement to your military retirement ends when you die. Most banks will automatically deduct any overpaid funds without warning, which can be troublesome, especially if you share a joint account.

Fourth -- Tell your beneficiaries what documents they will need to send in to make their claim. One copy of the death certificate that includes the manner of death needs to be sent to us. Also, each beneficiary should complete a Claim for Unpaid Compensation (SF 1174). It's a great idea to go over this claim form with them to make sure they

will have all of the information they need to fill it out. If you want a more detailed explanation of this process, check out the instructions at <http://www.dfas.mil/retiredmilitary/survivors/Retiree-death.html>.

Fifth -- Let your beneficiaries know that sometimes there is no money due. Each situation is different. It just depends how up to date the account was kept. You can make sure your account is in good standing by performing a yearly audit.

Sixth -- When an arrears payment is made, there is a statement on the check that reads, "Retired Pay Payable only during life of Payee." Please do not let this statement alarm your beneficiaries. As long as the beneficiary's name is accurate on the check, the check can be cashed.

DFAS wants to take the best care of your loved ones when you die, you can help them by having a conversation with them to prepare them so they can know what to expect. We know talking about it might be difficult, but hopefully this checklist gives you an idea of the things to say. Don't put it off. Have a conversation about it with your loved ones today.

[Source: <https://www.dfas.mil/retiredmilitary/newsevents/newsletter/educateyourbeneficiaries.html> MAR 2017 ++]

Online Cigarette Sales Scam ► How It works

Purchasing cigarettes from online international sellers sounds like a great deal! However, some sellers are scammers, and they can land you in trouble with the law.

How the Scam Works

- You hear that you can save money on cigarettes by buying online from international sellers. You search, and find a site that looks legitimate. It has photos of big brand names, and the cigarettes are a great price. It's less than half of what you pay in the US or Canada.
- You decide to buy a few cartons. Some sites have a five or 10 carton minimum. When you are ready to check-out, you notice the seller doesn't accept credit cards. You need to pay by wire transfer or prepaid debit card.
- Don't do it! The seller will take your money and confirm the order shipped - but your cigarettes will never arrive.

How to spot an online sales scam:

- If the price seems too good to be true, there's probably something wrong: Be wary if the price is significantly lower than on similar sites.
- Don't wire money or use a prepaid debit card: Be sure to pay by credit card.
- Check for contact information and social media presence: Look for a real address and telephone number in the site's contact information. Check out the company's social media presence to verify their activity.
- Use www.whois.com: Look up the domain name to see if it is registered in the country where the business claims to be located.
- Make sure websites are secure and authenticated: Before you purchase an item online. Look for "https" before the web address and online seals that ensure your credit card and/or banking information is secure.

More information:

Learn more about buying cigarette online at the Alcohol and Tobacco Tax and Trade Bureau's website <http://send.council.bbb.org/link.cfm?t=RFC4HKzJenpCXnisucmKTw~~&pe=uOmhYMTyrHD6d-bVid-2KdPnD3UduNjpIQ-Yy3bpCgbVuobYBMma5ccVS5AVfD-MeRgpGE7BkgreeEzafERAAQ~~>. It's important to adhere to local tax regulations. Be sure to follow the laws in your state. For Canadian information visit

<http://www.dutyfreecanada.com/customs-allowances>. To report a scam, go to BBB Scam Tracker at <https://www.bbb.org/scamtracker/us>. [Source: BBB Know Scams | March 3, 2017 ++]

IRS 2017 Filing Season Update 01 ► New Rules

There's good news for those who prefer to wait until the last minute to file their federal taxes: You have three extra days this year. Federal income tax returns are due 18 APR. April 15 falls on a Saturday, and Emancipation Day is on April 17, a legal holiday for the District of Columbia. But if even if you're an early bird, don't expect to get that refund money as fast as you have in previous years. A federal law that took effect this year requires the Internal Revenue Service to hold any refunds until 15 FEB for taxpayers who claimed certain credits – the Earned Income Tax Credit or an Additional Child Tax Credit. "This means you won't get your money until at the earliest, the week of 27 FEB," factoring in weekends and the Presidents Day holiday, said Army Lt. Col. Samuel Kan, the executive director of Armed Forces Tax Council, in an interview about changes in tax law that could affect service members and their families.

Refunds are being delayed because of steps taken to combat fraud in connection with these two credits, Kan said. The additional time, required by the Protecting Americans from Tax Hikes, or PATH, Act of 2015, helps the IRS stop fraudulent refunds to identity thieves and to those claiming fraudulent wages and withholdings. The EITC (Earned Income Tax Credit) is a benefit for working people with low to moderate income who meet certain requirements. The maximum amount of credit for tax year 2016 is \$6,269, for those with three or more qualifying children. You must file a tax return to qualify for the credit and reduce the taxes you owe – and possibly receive a refund. You might qualify for the credit (and a refund) even if you don't owe tax. The Additional Child Tax Credit is for certain people who get less than the full amount of the regular Child Tax Credit – also possibly giving a refund even if they don't owe any tax. (More on child credits here.) Other highlights this year include:

HEALTH CARE CATCH

Those in the military health care system generally don't have to worry about the requirements for minimum essential health care coverage under the Affordable Care Act, because the military's health care qualifies as such. The employer provides that information on Form 1095, which is mailed to you, and you'll use when preparing your taxes or having them prepared. But Kan cautioned that service members who may have joined or left the military last year might face hefty penalties if they didn't have the required minimum coverage during the time they weren't in the military. For those who didn't have required minimum coverage, the penalties are significantly higher this year, he said: "If you have a family, your penalty is more than doubling. Last year the penalty was a maximum of \$975. This year, it's \$2,085." "If you left the military or entered, you have to take that into consideration," he added.

SAME-SEX MARRIAGES

The IRS has issued rules that these couples are considered married for federal income tax purposes, regardless of the couple's location. If the relationship would be recognized as marriage under the laws of at least one state, possession or territory of the U.S. – even if the marriage was in a foreign country – it is considered a marriage for federal income tax purposes. The regulation went into effect 2 SEP. This doesn't apply to other relationships – registered domestic partnerships, civil unions, or other similar formal relationships not recognized as marriage under that jurisdiction's laws.

FOREIGN NATIONALS

Some service members who are married to foreign nationals may run into snags because of requirements related to Social Security numbers and Individual Taxpayer Identification numbers, or ITINs, Kan said. "In the past, there were certain things you could do retroactively. ... But if you don't have a Social Security number by the time the tax return is due [plus the extensions], you're not going to be able to later file for the Earned Income Tax Credit, the child tax credit, the American Opportunity Tax Credit," Kan said. "You're going to want to get a Social Security

number before the due date so you can qualify for those. “If you can’t get a Social Security number, you’ll want to get an Individual Taxpayer Identification number, because there are ramifications.”

Other new rules mean that some taxpayers’ ITINs have expired. This year, if an ITIN hasn’t been used in filing taxes in the three years prior to Jan. 1, 2017, it expired. The ITINs also are expiring on a rolling basis starting in 2017; first to go are ITINs whose fourth and fifth digits are either a 78 or 79. “People with ITINs need to be sure they keep track of that issue, and if applicable, apply for renewal,” Kan said. That requires submitting a Form W-7 and can take up to 11 weeks, he said, up from seven weeks prior to tax season. It’s more difficult to go through this process abroad. The Armed Forces Tax Council has been working with the military services and the IRS to get Certified Acceptance Agents abroad to help process the ITINs, Kan said. “We’ve trained up a lot of the Certified Acceptance Agents abroad already, so we’re putting procedures in place to address that,” he added.

IRA ROLLOVERS

If you rolled over money into an Individual Retirement Account last year and you inadvertently missed the 60-day time limit for properly rolling the money over, the IRS has a new rule that allows taxpayers who encountered a variety of mitigating circumstances to ask for a waiver and avoid extra taxes. This might apply to some spouses who left a job and rolled over 401(k) money, for example, or those who left the military and rolled over Thrift Savings Plan money. Taxpayers can provide a self-certification letter to the administrator or trustee of the retirement plan or IRA receiving the rollover that they qualify for the waiver.

[Source: MilitaryTimes | Karen Jowers | March 4, 2017]

IRS 2017 Filing Season Update 02 ► 5 Tips

The head of the Armed Forces Tax Council says he prepares his tax returns himself, but he always goes to a military tax center to get them double-checked. “Every single time they find something I missed,” said Army Lt. Col. Samuel Kan. “Taxes are so complicated that you’re going to miss something. It’s helpful to have another set of eyes. ... I don’t think I’ve ever seen a tax return that didn’t have a mistake.” Sometimes it’s not necessarily a mistake that they find – it might be that the service member hasn’t taken advantage of a credit or deduction. Some boxes service members frequently forget to check on their tax-prep list:

1. **Reference materials.** It’s especially important this year to bring in last year’s tax return when you go to your tax preparer, Kan said. The IRS changed its contract for tax software, so even if you’re going to the same military tax center you went to last year, it’s possible the center may no longer have your data. And don’t forget every scrap of tax paperwork – anything from your employer(s) or bank(s), and documentation to substantiate any donations. Also, don’t forget your 1095 forms from your employer that certify your minimum essential health care coverage.
2. **Big numbers.** The most common mistake is entering the wrong Social Security number. Be meticulous with this. If it’s wrong, that will delay your refund.
3. **BIGGER numbers.** If you’re getting your refund deposited electronically, make sure you get your bank account number correct. “You don’t want your money going into someone else’s account,” Kan said. “It’s a tremendous feat to get money out of someone else’s account when it goes to the wrong account.” Also, ask banks to verify account and routing numbers – some use different routing numbers for electronic deposits than what’s printed on your check.
4. **Don’t skip deductions.** Make sure you take advantage of applicable tax credits and deductions. Haircuts and uniform items in general are not deductible, but, especially with the Guard and Reserve component, make sure you include the deductions for certain travel expenses related to duty.
5. **Eyes on extensions.** If you’re stationed overseas, or if you’re deployed to a combat zone during the tax filing season, you may qualify for certain automatic extensions.

[Source: MilitaryTimes | Karen Jowers | March 4, 2017 ++]

IRS 2017 Filing Season Update 03 ► How To File Free

While tax-preparation companies have begun their annual saturation of TV and other advertising, service members – in most cases – may be able to tune those spots out. “We definitely recommend using the free services we provide,” said Army Lt. Col. Samuel Kan, executive director of the Armed Forces Tax Council. “We don’t want people to unnecessarily spend money to get their taxes done when they can get their taxes done for free by people who are trained up.” In addition, there’s a quality reviewer who checks the tax preparer’s work, Kan said: “The more eyes that see your return, the more likely you’ll catch mistakes,” he said. The tax centers will also file the taxes electronically for free.

Through the services’ legal community, tax preparers on military installations are trained through the Internal Revenue Service’s Volunteer Income Tax Assistance, or VITA, program. These military tax preparers are also very familiar with tax exclusions and other situations specific to the military, such as combat zone tax exclusions. They’re also used to filing multiple state tax returns, which is often the case for military couples. “If the person who is preparing their taxes doesn’t know an answer to a question, there’s a significant chain of command that [the preparer] can use,” Kan said. That includes representatives from each of the service branches who sit on the Armed Forces Tax Council. “If there are issues, it comes up to us. We engage the IRS every day, and if there are issues we addresses those issues and resolve them,” he said. For those in the military community, he said, “there’s probably not a better source of information than the military because we have that direct link with the IRS and we work hand in hand with them. ... There’s no reason to go to a paid tax center.”

There is no income requirement to get your taxes done for free at a military VITA tax center; civilian centers have strict income limitations and other eligibility requirements. You aren’t limited to the tax center at the installation where you’re stationed. If there are multiple bases in your area and the tax center at your installation can’t fit you in, or you live closer to a different base, try there. Tax centers will help you regardless of branch of service, and some will prepare taxes for free for retirees, if they have the manpower available. If you want to prepare your taxes yourself, go through Military OneSource to get free tax software. You must be eligible for the free Military OneSource services – that covers active-duty troops, Guard and Reserve members, and their families.

Retirees and other veterans are eligible for services under Military OneSource for up to 180 days after leaving the military. Visit www.militaryonesource.mil or call 800-342-9647 for access to the software. Through OneSource, you also have access to free confidential tax consultation. These MilTax experts can answer any tax-related questions you may have as you’re preparing your tax returns. You can get the tax help online or by calling 800-342-9647. [Source: MilitaryTimes | Karen Jowers | March 4, 2017 ++]

Imposter Scams ► Rising | Overtaken Identity Theft

Consumers, beware: Impostor scams are on the rise. In fact, they’re so commonplace today that impostor fraud has overtaken identity theft in the Federal Trade Commission’s Consumer Sentinel Network report, an annual compilation of America’s top consumer complaints. The 2016 report <https://www.ftc.gov/news-events/press-releases/2017/03/ftc-releases-annual-summary-consumer-complaints> is based on the more than 3.1 million gripes the Consumer Sentinel Network received from consumers last year. Although debt collection issues topped the

consumer complaint list for 2016, impostor scams surpassed identity theft for the first time to claim the No. 2 spot. Impostor scams occur when a fraudster pretends to be someone else, typically someone trustworthy — like a computer tech or a government official — and then tries to convince a consumer to send money.

In one example of an impostor scam (<http://www.moneytalksnews.com/dont-get-caught-offguard-this-common-and-costly-scam>) , someone pretending to be with a car warranty company attempts to bilk consumers out of cash for an unnecessary extended car warranty. Another impostor scam to watch out for is the recent “Can you hear me?” phone scam (<http://www.moneytalksnews.com/protect-yourself-from-the-can-you-hear-phone-scam>). The FTC says these are the top six consumer complaints in the U.S. for 2016. The percentages represent the portion of overall complaints made last year:

- Debt collection: 28 percent
- Impostor scams: 13 percent
- Identity theft: 13 percent
- Telephone and mobile services: 10 percent
- Banks and lenders: 5 percent
- Prizes, sweepstakes and lotteries: 5 percent
- Protect yourself from scams

Fortunately, you can protect yourself from fraudsters. The following tips are included in MTN founder Stacy Johnson’s “10 Golden Rules to Avoid Getting Scammed” (<http://www.moneytalksnews.com/the-10-golden-rules-scam-prevention>):

- Don’t believe the testimonials: “There’s only one kind of testimonial worth believing — the kind that comes from people you both personally know and totally trust,” Johnson writes. You — and your pocketbook — are better off ignoring all testimonials when you’re considering making a purchase.
- Don’t ignore the fine print: “Virtually every deal that goes awry is the result of people listening to the sales pitch without reading the fine print,” Johnson warns. Do yourself a favor and check out the fine print before you make a purchase. If you don’t understand what it’s saying, “find someone who does,” recommends Johnson.

[Source: MoneyTalksNews | Krystal Steinmetz | March 7, 2017 ++]

IRS Student Loan/Tuition ► Tax Breaks

Being a college student isn’t a cheap business — there’s tuition, housing, books and a host of other costs. Reportedly, a bipartisan bill is in the works in Congress that eventually would help people pay down student loan debt. But this tax season offers an opportunity to reduce those costs right now. There are a number of great deductions that students and their families can claim on their tax returns, according to just-released guidance from Sallie Mae, the national saving, planning and paying for college company. They include:

Student loan interest deduction

Sallie Mae says student loan borrowers may be eligible for up to \$2,500 in student loan interest deductions to offset taxable income. This deduction is available for both federal and eligible private student loans in repayment. To qualify, you must be a single filer with a modified adjusted gross income of less than \$80,000, or filing jointly with a modified adjusted gross income of less than \$160,000.

Tuition and fees deduction

Students or their families can claim up to \$4,000 in expenses for higher education to offset taxable income. This deduction is taken as an adjustment to income, so you don’t need to itemize other deductions. Sallie Mae says that

individuals with a modified adjusted gross income of up to \$80,000 and those filing jointly with a modified adjusted gross income of up to \$160,000 qualify for this deduction. Families can claim only one credit for the same student in any one year. Also, they cannot take both this deduction and a credit in the same year.

American Opportunity Credit

You may qualify for a maximum annual credit of \$2,500 per student for the first four years of higher education. To qualify, students must be enrolled at least half-time in a degree or other recognized educational credential. In addition to tuition and fees, the credit can be applied to course-related books and supplies. Single taxpayers with incomes of up to \$80,000 can receive the full credit. Partial credit is available for single taxpayers with incomes amounting to \$90,000. Married filers with an adjusted gross income up to \$160,000 are eligible for the full credit, and a partial credit is available for those with incomes of up to \$180,000.

Lifetime Learning Credit

Eligible taxpayers may qualify for up to \$2,000 per tax return to help pay for undergraduate, graduate and professional degree courses. This includes courses designed to improve job skills. There is no limit on the number of years someone can claim the Lifetime Learning Credit. The Lifetime Learning Credit is available to taxpayers with modified adjusted gross income of less than \$65,000, or less than \$131,000 to qualify if you are filing jointly. The credit is reduced gradually for single filers making more than \$55,000, and for joint filers making more than \$111,000.

[Source: MoneyTalksNews | Geof Wheelwright | March 8, 2017++]

Debt Collector Scam ► How It works

Debt collection scams are one of the most frightening and persistent types of cons. Watch out for a new twist that claims to be collecting on cash advances!

How the Scam Works:

- You receive an automated call. It's from a company claiming to be collecting payment for a cash advance. The recording prompts you to stay on the line and speak to an agent.
- Don't do it! These calls often turn threatening. The "agent" will request you pay your debt immediately using a wire transfer or prepaid debit card. If you refuse, the "debt collector" will try to intimidate you. Targets report being threatened with arrest, lawsuits or garnished wages.
- Despite the threats, these phony collection agents don't have any legal power. In most cases, the alleged cash advance doesn't exist.

Protect Yourself from Debt Collector Cons:

- To keep yourself protected against debt collector scams know your rights.
- Just hang up: If you don't have any outstanding loans, hang up. Don't press any numbers or speak to an "agent."
- Ask the debt collector to provide official "validation notice" of the debt. In the US and most of Canada, debt collectors are required by law to provide the information in writing. The notice must include the amount of the debt, the name of the creditor and a statement of your rights. If the self-proclaimed collector won't provide the information, hang up.
- Ask the caller for his/her name, company, street address, and telephone number. Then, confirm that the collection agency is real.
- Do not provide or confirm bank account, credit card or other personal information over the phone until you have verified the call.

- Check your credit report. In the US, check with one of the three national credit reporting companies (Equifax, TransUnion, Experian). In Canada, check with Equifax Canada. This will help you determine if you have outstanding debts or if there has been suspicious activity.
- Place a fraud alert on your credit report. If the scammer has personal information, place a fraud alert with the three national credit reporting companies.

For more information check out this recent alert about cash advance collections scam from the Washington State Department of Financial Institutions at <http://www.dfi.wa.gov/consumer/alerts/cash-advance-group-possible-loan-collection-scam>. Also, read the article from the Federal Trade Commission (FTC) about dealing with fake debt collectors at <https://www.consumer.ftc.gov/blog/stand-fake-debt-collectors>. To report a scam, go to BBB Scam Tracker at <https://www.bbb.org/scamtracker/us>. [Source: BBB Scam Alert | March 10, 2017 ++]

IRS Tax Debt ► Can't Pay | Here's What to do

This tax status may bring you woe: “I owe! Oh, no! I haven’t got any dough! So ...” This scary situation may make you want to dodge the IRS. But, seriously, resist the temptation to skip filing. The penalty for not filing is 10 times worse than it is for paying late. And the filing deadline is fast approaching. Instead, follow these steps if you can’t pay the IRS on time.

Don’t fail to file:

When it comes to income taxes, most people are rewarded for filing because they get money back. The IRS said in its latest weekly update on the 2017 filing season, as of Feb. 24, that 52.1 million tax returns had been filed, and some 41.4 million taxpayers were getting refunds averaging \$3,071 each. But if you owe the IRS money and can’t pay immediately, file anyway! If you file something and don’t pay, your penalty will be 0.5 percent per month on the amount you owe, the IRS says. But if you don’t file anything by the deadline, the penalty is 5 percent for each month or part of a month after the due date, up to a limit of 25 percent of your total tax bill. For example, if you owe \$1,000, and file, but don’t pay, Uncle Sam will assess you \$5 a month until you send in what you owe. But if you don’t file, the penalty will be \$50 a month.

Consider your options:

“There is always a cost to paying the IRS over time rather than when your taxes are due,” says Manny Davis, a Southern California accountant. Compare the cost of an IRS payment plan with alternatives.

- Get a loan: If you can’t pay, the best solution is an interest-free loan, from friends, family or maybe your boss. Second best might be a signature loan from a source like a credit union.
- Charge it: You could put what you owe on a credit card, but it will cost you: Federal payment processors including <https://www.officialpayments.com/fed/index.jsp?x>, <https://www.payusatax.com/main>, and <https://www.pay1040.com> charge upfront fees, plus your card issuer will charge you interest on your balance.

Buy time, sort of:

If by Tax Day (April 18 this year) you ask for an automatic extension of time to file your income tax return, the IRS usually gives you two extra months — for filing, not for paying. “An extension of time to file is not an extension of time to pay,” the IRS cautions. However, you will avoid the late-filing penalty, it says. Additionally, IRS Form 4868 (<http://www.irs.gov/pub/irs-pdf/f4868.pdf>), which is the extension request that can be filled out online or on paper and mailed, says that a late payment penalty will not be charged if you can show reasonable cause for not paying on time.

Make a deal:

The IRS may be nicer than you think. “We recognize that some people may be enduring financial hardship,” said IRS Florida spokesman Mike Dobzinski. “If you need to file a tax return, pay what you can, get that return in to avoid any late payment penalties and late filing penalties, and perhaps the IRS can work out an installment agreement with you.” The IRS says you must first file all required returns and be current with estimated tax payments. If you’re an individual owing \$50,000 or less in combined tax, penalties and interest, you can request an installment agreement using the Online Payment Agreement application, or complete IRS Form 9465, Installment Agreement Request. There are setup fees (<https://www.irs.gov/individuals/payment-plans-installment-agreements>) for various installment plans — ranging from \$31 for a direct debit installment agreement to \$225 for a regular installment agreement. See the details at <https://www.irs.gov/individuals/payment-plans-installment-agreements>

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|---|--|---|--|--------------------------------------|
| Form 9465 (Rev. December 2013) Department of the Treasury Internal Revenue Service | | Installment Agreement Request ▶ Information about Form 9465 and its separate instructions is at www.irs.gov/form9465 . ▶ If you are filing this form with your tax return, attach it to the front of the return. ▶ See separate instructions. | | OMB No. 1545-0074 |
| Tip: If you owe \$50,000 or less, you may be able to establish an installment agreement online, even if you have not yet received a bill for your taxes. Go to irs.gov to apply to pay online. Caution: Do not file this form if you are currently making payments on an installment agreement or can pay your balance in full within 120 days. Instead, call 1-800-829-1040. Do not file if your business is still operating and owes employment or unemployment taxes. Instead, call the telephone number on your most recent notice. If you are in bankruptcy or we have accepted your offer-in-compromise, see Bankruptcy or offer-in-compromise , in the instructions. | | | | |
| Part I This request is for Form(s) (for example, Form 1040 or Form 941) ▶ and for tax year(s) (for example, 2012 and 2013) ▶ | | | | |
| 1a Your first name and initial | | Last name | | Your social security number |
| If a joint return, spouse's first name and initial | | Last name | | Spouse's social security number |
| Current address (number and street). If you have a P.O. box and no home delivery, enter your box number. | | | | Apt. number |
| City, town or post office, state, and ZIP code. If a foreign address, also complete the spaces below (see instructions). | | | | |
| Foreign country name | | Foreign province/state/country | | Foreign postal code |
| 1b If this address is new since you filed your last tax return, check here <input type="checkbox"/> | | | | |
| 2 Name of your business (must be no longer operating) | | | | Employer identification number (EIN) |
| 3 Your home phone number | | 4 Your work phone number | | |
| Best time for us to call | | Ext. Best time for us to call | | |
| 5 Name of your bank or other financial institution | | 6 Your employer's name | | |
| Address | | Address | | |

Offer in compromise:

You may qualify to settle your tax liability for less than the amount you owe, says the IRS. The agency considers your ability to pay, income, expenses and asset equity. “We generally approve an offer in compromise when the amount offered represents the most we can expect to collect within a reasonable period of time,” the IRS says. Check your eligibility (https://irs.treasury.gov/oic_pre_qualifier) with the IRS’ Offer in Compromise (OIC) prequalification tool which is basically a petition for you to settle your debt for less than what you actually owe. Your odds of getting off the hook this way are slim – less than 20% of OIC petitions are accepted – but if your circumstances are truly dire, you may stand a chance. If you need more time or lower monthly payments, consider enlisting some professional help. Find a qualified and reputable tax professional who can help you negotiate a lower monthly payment plan, and set up a payment schedule that you can live with. If you go forward, the filing fee is \$186; the detailed instructions and forms you need are in this <https://www.irs.gov/pub/irs-pdf/f656b.pdf> IRS booklet, Form 656-B.

Don't ignore IRS tax bills:

If you don’t pay up, the IRS could place a federal tax lien — the government’s legal claim — against your real estate, personal property and financial assets. *For example, in 2015 actor Robert De Niro paid the IRS \$6.4 million after the government put a lien on his New York City condo in Tribeca in connection with his personal 1040 filing for 2013, the New York Daily News reported. De Niro’s lawyer claimed the IRS had sent the Academy Award winner’s tax delinquency notice to an old address. Once alerted to the bill, De Niro paid it in full, the lawyer said. A lien secures the government’s interest in your property. Under the IRS’ Fresh Start initiative to make it easier to pay*

back taxes, it is generally only when you owe more than \$10,000 that a lien is filed. If you don't pay your tax debt, the IRS can levy, seize and sell any type of real or personal property that you own or have an interest in.

Prevent a repeat:

How did you get in this situation? Many people who owe the IRS at tax time did not have enough money withheld from their paychecks. You may want to consider filing a new W-4, the IRS says. Try its withholding calculator. Have handy your most recent pay stubs and most recent income tax return. Enter estimates if necessary. You may have claimed too many exemptions or received W-2 forms from more than one job; or perhaps you're married, and both you and your spouse work; or the number of your allowances changed during the year. Other top reasons noted by the IRS: You have non-wage income, such as interest, dividends, alimony, unemployment compensation or self-employment income.

[Source: MoneyTalksNews | Jim Gold | March 8, 2017 ++]

Tax Burden for Nevada Retired Vets ► As of Mar 2017

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 Nevada. **Note:** The state has a statutory provision for automatic adjustment of tax brackets, personal exemptions or standard deductions to the rate of inflation.

Sales Taxes

State Sales Tax: 6.85%. Counties may add up to 1.15% additional.

Gasoline Tax: 52.25 cents/gallon (Includes all taxes)

Diesel Fuel Tax: 52.96 cents/gallon (Includes all taxes)

Cigarette Tax: 1.80 cents/pack of 20

Personal Income Taxes

Retirement Income: Not taxed. No state income tax

Property Taxes

All property in the state is subject to tax by the state, counties, cities, towns, and school districts. Property taxes are applied to property of every kind and nature, including real and personal property. The assessed valuation for tax purposes is based on 35% of the fair market value of the property and is revalued every year. Refer to <https://tax.nv.gov/Publications/Publications>. The Department of Taxation and county assessors and treasurers are required to provide information on the Internet concerning property taxes, including, a description of the assessment process, an explanation of the manner in which property taxes are calculated, the rates of taxes imposed by various taxing entities and the revenues generated by those taxes.

Inheritance and Estate Taxes

There is no inheritance tax and a limited estate tax related to federal estate tax collection.

Visit the Nevada Department of revenue site <http://tax.state.nv.us> for further information,

[Source: <https://www.retirementliving.com/taxes-kansas-new-mexico#NEVADA> | March 2017 ++]



Notes of Interest ► 1 thru 15 MAR 2017

- **U.S. President Salary.** President Trump pledged not to take more than \$1 a year. However, he is entitled to a \$400,000 per year salary plus a \$50,000 non-taxable expense account.
- **DDG-121.** The keel of the US Navy's (USN's) Flight IIA Arleigh Burke-class guided-missile destroyer the future USS Frank E Petersen, Jr (DDG 121) was laid on 21 February 2017 at Huntington Ingalls Industries (HII) shipyard in Pascagoula, Mississippi.
- **Dakota pipeline.** The U.S. Army Corps will spend more than \$1 million to clean up the mess left behind by the Standing Rock Sioux Tribe and others opposed to the Dakota Access Pipeline in North Dakota. The pipeline is a 1,172-mile underground state of the art 30" pipeline extending from the Bakken/Three Forks production area in North Dakota to Patoka, Illinois.
- **Space.** NASA is planning a mission to the surface of the sun. Like the old joke says they will go at night to avoid the heat.
- **Chicken sandwiches.** How much chicken is in your chicken sandwich? If you order a Subway chicken it is only 50% chicken. Wendy's chicken tested better at 85%.
- **Sea duty.** A record 16 out of 100 Navy women are reassigned from ships to shore duty due to pregnancy, according to data obtained under the Freedom of Information Act by The Daily Caller News Foundation's Investigative Group. That number is up 2 percent from 2015.
- **Burial at Sea.** Loyce Edward Deen, an Aviation Machinist Mate 2nd Class, USNR, was a gunner on a TBM Avenger. On November 5, 1944, Deen's squadron participated in a raid on Manila where his plane was hit multiple times by anti-aircraft fire while attacking a Japanese cruiser. Deen was killed. The Avenger's pilot, Lt Robert Cosgrove, managed to return to his carrier, the USS Essex. Both Deen and the plane had been shot up so badly that it was decided to leave him in it. It is the only time in U.S. Navy history (and probably U.S. military history) that an aviator was buried in his aircraft after being killed in action. View at <http://loyceedeen.webstarts.com/uploads/GoingHome.mp4>.
- **GTMO.** Pentagon spokesman Capt. Jeff Davis said a former Guantanamo Bay detainee was among those killed in U.S. airstrikes on 2 MAR on terror targets in Yemen. Yasir al-Silmi, who was held at Guantanamo Bay from 2002 was released in 2009 despite earlier recommendations that he remain in custody because he was considered a "high threat" to America and its allies. Davis, would not get into specifics about why al-Silmi released but confirmed he was counted among those who had returned to terrorism.
- **Spy Claims & Controversy.** Check out <https://youtu.be/GjToGCWpm-g> Fox News 5 MAR exclusive video report on wiretapping claims.
- **Middle Finger Origin.** Before the Battle of Agincourt in 1415, the French, anticipating victory over the English, proposed to cut off the middle finger of all captured English soldiers. Without the middle finger it would be impossible to draw the renowned English longbow and therefore they would be incapable of fighting in the future. This famous English longbow was made of the native English Yew tree, and the act of drawing the longbow was known as 'plucking the yew' (or 'pluck yew'). Much to the bewilderment of the French, the English won a major upset and began mocking the French by waving their middle fingers at the defeated French, saying, See, we can still pluck yew! Since 'pluck yew' is rather difficult to say, the

difficult consonant cluster at the beginning has gradually changed to a labiodentals fricative F', and thus the words often used in conjunction with the one-finger-salute! It is also because of the pheasant feathers on the arrows used with the longbow that the symbolic gesture is known as 'giving the bird.'

Rosie The Riveters Update 03 ► National Recognition for 'Rosies'

Ninety-five-year-old Phyllis Gould of Fairfax, Calif., made history during World War II as one of the women who collectively became known as Rosie the Riveter. Now she's determined to make history again, spearheading a campaign for a national Rosie the Riveter Day as part of Women's History Month. From 1942 until the end of the war in 1945, Gould worked as a welder at the Kaiser-Richmond Shipyards, helping build Liberty and Victory ships to replace the ones torpedoed by Nazi submarines. One of the first six women to become journeymen union welders, she put down her welding torch after the war and raised five children. She's now a grandmother and great grandmother.



Phyllis Gould (far left) and her daughters, Phyllis and Phyllis (far right) with Phyllis Gould's son, Phyllis.

For much of the past decade, she and a fellow "Rosie" from Pennsylvania, Mae Krier, a former riveter on the Boeing B-17 warplane assembly line, have been lobbying U.S. government officials to recognize the contributions of the millions of women who supported the war effort on the home front, holding down jobs previously held by men as riveters, loggers, welders and electricians. "Oh, god, it's taken so long and it hasn't happened yet," she said last week. "It's maddening." Recognition for the Rosies inched closer to becoming a reality, though, when Rep. Jared Huffman (D-San Rafael) kicked off March, Women's History Month, with a congressional resolution designating 21 MAR as a national Rosie the Riveter Day. "Phyllis Gould has been such a dynamo in driving this resolution forward," Huffman said. "I wanted to be part of recognizing these incredible Americans while we still can."

Huffman's resolution and an identical one in the Senate have the bipartisan support of some 60 members of Congress, but it will not be official until it gets through the Senate Judiciary Committee and is then approved by a vote of the full Senate. Even if that happens, which is no sure thing in today's bitterly divided Washington, the Rosie day will be for this year only. "I'm not counting on anything," Gould said. "This has gone to Congress twice before. It's been sent to the President (Obama) and nothing happened." In 2014, Gould and four other Rosies visited Washington, D.C., meeting with President Obama and Vice President Biden in the Oval Office. They got a hug from both men, posed for photos with them and had lunch in a White House dining room. But they didn't get the recognition -- any kind of formal recognition -- they were hoping for.

When Gould got home, she was in the shower ("that's when I have my wildest thoughts") when she came up with the idea for a national Rosie the Riveter Day, and began firing off letters to that effect to everyone in the capital she

could think of. "I wrote a really hot one to (House Speaker) Paul Ryan," she said. "I said if he was as powerful as I was told, he'd get on the phone and tell the people on the judicial committee to deal with it."v After the presidential election, Gould taped a sign on the front window of her apartment saying, "Don't blame me, I voted Democrat," and hung a black tassel of mourning on her front door. But her drive for a Rosie Day for her and the Rosies across the country is greater than her distaste for the president, so she's been trying to get through to him, writing letters and phoning the White House, knowing he has the power to issue an executive proclamation marking 21 MAR (or any day, for that matter) as a Rosie the Riveter Day.

"I've written five different letters, the most recent one last week, but I've never gotten a reply," she said. "I got someone from his staff on the phone and asked her how long it took for letters to go through the mail room. She said she didn't know, but the mail room wasn't staffed." A remarkably spry nonagenarian (she still drives a pickup with a stick shift), Gould is cautiously pinning her hopes on the Huffman resolution, the best chance she has to make history one more time. "It's intense how much time and money we've put into this," she said, speaking of herself and cohort Krier. "We represent all these millions of women, and we deserve to be recognized." [Source: The Marin Independent Journal | Paul Liberatore | March 5, 2017 ++]

Iwo Jima Flag Raising Update 02 ► Photographer Joe Rosenthal Petition

Some retired Marines in California want the Navy to name a warship for the photographer behind the iconic Iwo Jima flag-raising photo. Joe Rosenthal's Pulitzer Prize-winning photo shows Marines raising the flag on Mount Suribachi on the Japanese island on Feb. 23, 1945. The picture became the model for the Iwo Jima Memorial near Arlington National Cemetery in Virginia, known officially as the Marine Corps War Memorial. The San Francisco Chronicle reported 11 MAR that the campaign to honor Rosenthal includes an online petition that has gathered more than 1,300 signatures. To sign go to <http://www.ussjoe.org/sign-the-petition>. "Joe Rosenthal took one of the greatest photographs in history, and yet he has been bypassed by history," campaign organizer Tom Graves told the paper.

Graves belongs to the Marine Corps Correspondents Association in San Francisco and wants to collect thousands of more names before submitting them to the Navy. The Alameda County Board of Supervisors is supporting the naming effort, the paper reports. "Naming a ship for Joe Rosenthal would also represent Iwo Jima, the Marines and the Pacific war," Graves told the paper. The photo quickly became the subject of posters, war-bond drives and a U.S. postage stamp. Rosenthal left the AP later in 1945 to join the Chronicle, where he worked as a photographer for 35 years before retiring. He was 94 when he died in 2006. Last year the Marines announced that one of the six men long identified in the photo was actually not in the image. The announcement came after an investigation prompted by the claims of two amateur historians. [Source: FoxNews.com | March 12, 2017 ++]



U.S. Passport Policy Update 03 ► Owing Uncle Sam Impact

Owing Uncle Sam back taxes can seriously hamper your travel plans outside the United States. A newly implemented federal law — known as the Fixing America’s Surface Transportation Act, or FAST Act — requires the Internal Revenue Service to provide the U.S. State Department with a list of Americans who have seriously delinquent tax debt, CBS MoneyWatch reports. The State Department can then deny, revoke or limit passports for the delinquent taxpayers. Forbes explains:

“The law isn’t limited to criminal tax cases, or even cases where the IRS thinks you are trying to flee. The idea of the law is to use travel as a way to enforce tax collections.”

Although the effective date of the law — which was approved by Congress in 2015 and then signed by former President Barack Obama — was Dec. 4, 2015, the IRS now is ready to start implementing it in March. The law applies to Americans with seriously delinquent tax debt of \$50,000 or more who have a tax levy issued or a tax lien filed against them. According to CBS MoneyWatch:

While [\$50,000] sounds like a lot, it also includes penalties and interest — and anyone who has been notified about unpaid taxes knows that interest and penalties can add up fast.

CBS MoneyWatch says the IRS considers the following people to be “excepted” from the FAST Act:

- Individuals who have an installment agreement with the IRS to pay back taxes.
- Individuals who have settled their back taxes through an offer in compromise or a Justice Department agreement.
- Individuals who appeal a tax levy through an IRS collection due process hearing.
- Individuals who file Form 8857 and request innocent spouse relief.

According to Forbes, before it denies a passport, the State Department will hold your application for 90 days to give you time to resolve erroneous certification issues, pay your tax debt in full or enter into a payment agreement with the IRS. Beginning in March, you can call the National Passport Information Center at 877-487-2778 to discuss your specific situation. [Source: MoneyTalksNews | Krystal Steinmetz | February 27, 2017 ++]



DARPA Update 04 ► SIGMA Program | Dirty-Bomb Hunting

For the past seven months, some Washington, D.C., ambulances have been doing double duty: simultaneously responding to emergencies and scanning the city for nuclear threats. A Pentagon research program aiming to detect “dirty bombs” and nuclear threats recently outfitted fire and emergency medical services ambulances with radiological detectors they used to draw out a map of radiation levels in the city. The Defense Advanced Research Projects Activity’s nuclear threat detection program, called SIGMA, wrapped up testing last month. In its search for radiological phenomena, DARPA installed about 73 detectors on the ambulances, which travel across the city each day responding to medical and fire emergencies. The detectors gathered about 100,000 hours of data and traveled a total of about 150,000 miles. The detectors were plugged into the ambulance and reported back to DARPA in real time, so ambulance operators didn’t need any training. DARPA may refine the system so it can eventually be deployed in other cities across the country, including to active duty military units and National Guard civil support teams, according to program manager Vincent Tang. The program may also consider incorporating other vehicles in

addition to ambulances. The DARPA program has developed another radiation detector model the size of a smartphone; one day in October, the agency asked about 1,000 volunteers to carry them around the National Mall. The detection systems may be transitioned to state, local and federal groups as early as this year. [Source: Defense One| Paisley | Mohana Ravindranath | March 3, 2017 ++]

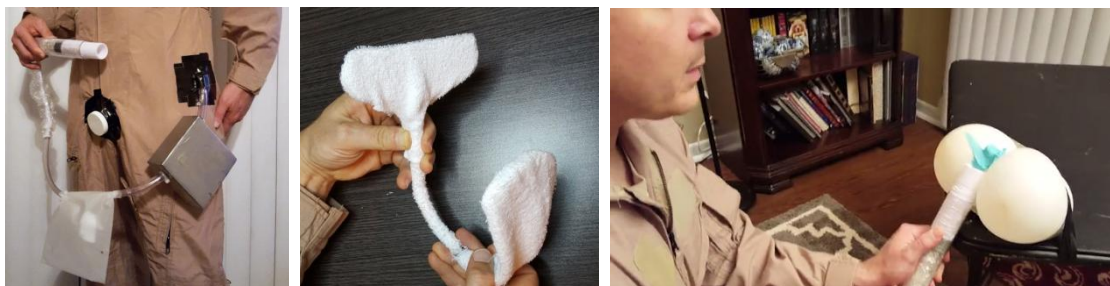


NASA Update 01 ► Space Poop Challenge

In space, no one can hear you poop. But that doesn't mean it isn't a health and hygiene issue for astronauts. That's why NASA asked the public for ideas to help astronauts deal with their Number 1 and Number 2 problems, as part of the NASA Space Poop Challenge (<https://herox.com/SpacePoop>). The competition challenged creative minds to come up with ways for astronauts to manage personal waste in space while ditching the traditional diaper. The low-tech, temporary solution isn't meant for long-term situations. Instead, NASA wanted to find a way for astronauts to dispose of urine and feces for up to 144 hours — or six days. Air Force Col. Thatcher Cardon, commander of the 47th Medical Group at Laughlin Air Force Base in Texas, won the grand prize of \$15,000 with his MACES Perineal Access and Toileting System, or M-PATS. It involves inserting different tools into a port in the front of the space suit to collect an astronaut's waste in a hands-free — and mess-free — fashion.

Astronauts aren't normally in their space suits, known as the Modified Advanced Crew Escape Suit, or MACES, for six days, and part of that limitation is toileting, Cardon said. "Right now, [NASA] is trying to plan for an emergency," he said. "You don't want to be in your space suit if you can help it." However, if a spaceship is on the other side of the moon and a meteor puts a hole in the ship, Cardon said, astronauts may need to live in their suits until they can get back to Earth. In the future, a system like this could be used for longer space travel. "If you're on Mars walking around, you'd have to run back to the bathroom every time," he said. "If you can handle that in your suit, it opens a lot of options."

Cpl. Cardon tapped into his experience as a flight surgeon and his interest in space to come up with a method to help astronauts in case they need to be in their suits for extended periods of time. He spoke with Air Force Times about the challenge and how his system works. Following is the interview with him which has been edited for clarity.



Q. How did you get involved with the Space Poop Challenge?

A: I was looking at the news and saw it come up. I was instantly interested. It was kind of in my wheelhouse as a flight surgeon, so I thought maybe I could do that. I read about the different requirements. You could leave the waste in the suit or take it out. I'm not going to leave it in the suit because that's just disgusting. It's just going to cause problems. I decided it was going to come out. Then I thought, where am I going to take it out? You can't take it out the back because you can't reach it. You can't really operate anything back there, especially in a space suit. I thought about laparoscopy surgery [that uses a thin tube through an incision]. I could design a valve that's like laparoscopy surgery and design items to go through the valve to perform that function. It all seemed to really flow after I came up with the valve introducer concept.

Q: Can you tell us how the devices work, step by step?

A: If you were using, say, the female urine suction device, you would get the universal suction box and hook it to your suit. You would get out the introducer that had a female urine suction wand in it, unwrap that, hook it to the suction end of the suction box, and open the port on the front of your suit. With the safety valve, the air wouldn't come out of your suit. You put the introducer in that hole, and the introducer would prevent air escaping when the valve opens, and it would equalize the pressure. The wand would be there, and it would inflate or unfold, and you put that in position and turn on the suction pump and urinate into it. The urine would be sucked into the collection bag through the cup. When you're finished, you deflate the wand or fold it back up and pull back the introducer.

Q: We read that you were also inspired by the lingerie industry?

A: You could put on some underwear after urination, and a plunger would push the underwear out of the introducer, unfold and fold around the bottom. I was researching different ways to put on underwear and different kinds of underwear. I typed into Google "strapless underwear" and came across C-string underwear. It's a piece of plastic shaped like a C that clamps on the butt crack and on front. I got some and tore off the leopard skin lace and put on some terrycloth.

Q: How does the other device work?

A: The fecal containment and perineal hygiene device is basically an inflatable bed pan. Everything goes in [the suit valve] through an introducer. This device is made out of elastic material that wants to stay rolled up, like a poster. When you inflate it, the cushion on the bed pan inflates and makes space in the suit and unrolls into a bed pan-shaped device. You would use the toilet, and suction would help move the waste down deep into the device. When it deflates, it scrolls back up and you pull it out.

Q: How does everything stay in place and not spill?

A: There's zero gravity, so it's not going to spill. Gentle air flow moves balls of fluid and feces toward deeper parts of the pan. You might have something that's stuck to your skin, and you can get that off by wiping or suction. The hygiene wand will help you with that as well.

Q: How did your Air Force experience help with this?

A: As a physician, I understand the importance of skin care and how badly feces and urine can damage your skin and threaten your life with infection. As a flight surgeon, we think about ambient pressure changes. What changes about a patient's body when they go up in altitude? That attunes me to the issues of managing a space suit. Also from my interest in space and watching videos and studying zero gravity, that all kind of came together to help me with a solution.

Q: Could this be used in other situations besides in space?

A: We're looking into that. I filed a patent and am going to speak at an incontinence engineering conference in April. We'll see what people think. One part that might have some application on Earth is the diaper solution [I created]. One of the problems with diapers is once you have them on, you can't take them off with the suit. You can take this off with your suit on. It might last a few days depending on how much you had to go. This diaper pulls off in a long strip — kind of a tear-away diaper. You pull it ... through the port on the front of the suit.

Have You Heard? ► Mule Funny || How to Live Like a Navyman

Mule Funny

An old hillbilly farmer had a wife who nagged him unmercifully. From morning 'til night she was always complaining about something. The only time he got any relief was when he was out plowing with his old mule. He plowed a lot.

One day, when he was out plowing, his wife brought him lunch in the field. He drove the old mule into the shade, sat down on a stump, and began to eat his lunch. Immediately, his wife began nagging him again. Complain, nag, complain, nag - it just went on and on. All of a sudden the old mule lashed out with both hind feet, caught her smack in the back of the head. Killed her dead on the spot.

At the funeral several days later, the minister noticed something rather odd. When a woman mourner would approach the old farmer he would listen for a minute then nod his head in agreement; but when a man mourner approached him, he would listen for a minute then shake his head in disagreement.

This was so consistent, the minister decided to ask the old farmer about it. So after the funeral, the minister spoke to the old farmer and asked him why he nodded his head and agreed with the women but always shook his head and disagreed with all the men.

The old farmer said, 'Well, the women would come up and say something about how nice my wife looked or how pretty her dress was, so I'd nod my head in agreement.'

'And what about the men?' the minister asked.

'They wanted to know if the mule was for sale.'

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How to live like a Navyman

1. Buy a dumpster, paint it gray and live in it for 6 months straight.
2. Run all of the piping and wires inside your house on the outside of the walls.
3. Pump 10 inches of nasty, crappy water into your basement, then pump it out, clean up, and paint the basement "deck gray."
4. Every couple of weeks, dress up in your best clothes and go to the scummiest part of town, find the most run down, trashy bar you can, pay \$10 per beer until you're hammered, then walk home in the freezing cold.
5. Perform a weekly dis-assembly and inspection of your lawnmower.
6. On Mondays, Wednesdays, and Fridays turn your water temperature up to 200 degrees, then on Tuesday and Thursday turn it down to 10 degrees. On Saturdays, and Sundays declare to your entire family that they used too much water during the week so all showering is secured.
7. Raise your bed to within 6 inches of the ceiling.
8. Have your next-door neighbor come over each day at 5am, and blow a whistle so loud that Helen Keller could hear it and shout "Reveille, Reveille, all hands heave out and trice up."

9. Have your mother-in-law write down everything she's going to do the following day, then have her make you stand in the back yard at 6am and read it to you.
10. Eat the raunchiest Mexican food you can find for three days straight, then lock yourself out of the bathroom for 12 hours, and hang a sign on the door that reads "Secured-contact OA division at X-3053."
11. Submit a request form to your father-in-law, asking if it's ok for you to leave your house before 3pm.
12. Invite 200 of your not-so-closest friends to come over and then board up all the windows and doors to your house for months. After the 6 months is up, take down the boards, wave at your friends and family through the front window of your home...you can't leave until the next day you have duty.
13. Shower with above-mentioned friends.
14. Make your family qualify to operate all the appliances in your home (i.e. Dishwasher operator, blender technician, etc.).
15. Walk around your car for 4 hours checking the tire pressure every 15 minutes.
16. Sit in your car and let it run for 4 hours before going anywhere. This is to ensure your engine is properly "lighted off."
17. Empty all the garbage bins in your house, and sweep your driveway three times a day, whether they need it or not. (Now sweepers, sweepers, man your brooms, give the ship a clean sweep-down fore and aft, empty all trashcans over the fantail)
18. Repaint your entire house once a month.
19. Cook all of your food blindfolded, groping for any spice and seasoning you can get your hands on.
20. Use eighteen scoops of budget coffee grounds per pot, and allow each pot to sit 5 hours before drinking.
21. Have your neighbor collect all your mail for a month, read your magazines, and randomly lose every 5th item.
22. Spend \$20,000 on a satellite system for your TV, but only watch CNN and the Weather Channel.
23. Avoid watching TV with the exception of movies, which are played in the middle of the night. Have the family vote on which movie to watch and then show a different one.
24. Have your 5-year-old cousin give you a haircut with goat shears.
25. Sew back pockets to the front of your pants.
26. Spend 2 weeks in the red-light districts of Europe, and call it "world travel."
- 27.. Attempt to spend 5 years working at McDonalds, and NOT get promoted.
28. Ensure that any promotions you do get are from stepping on the dead bodies of your co-workers.
29. Needle gun the aluminum siding on your house after your neighbors have gone to bed.
30. When your children are in bed, run into their room with a megaphone, and shout at the top of your lungs that your home is under attack, and order them to man their battle stations. ("General quarters, general quarters, all hands man your battle stations")
31. Make your family menu a week ahead of time and do so without checking the pantry and refrigerator.
32. Post a menu on the refrigerator door informing your family that you are having steak for dinner. Then make them wait in line for at least an hour, when they finally get to the kitchen, tell them that you are out of steak, but you

have dried ham or hot dogs. Repeat daily until they don't pay attention to the menu any more so they just ask for hot dogs.

33. When baking a cake, prop up one side of the pan while it is in the oven and spread the icing on real thick to level it off.

34. In the middle of January, place a podium at the end of your driveway. Have you family stand watches at the podium, rotating at 4-hour intervals.

35. Lock yourself and your family in your house for 6 weeks. Then tell them that at the end of the 6th week you're going to take them to Disneyland for "weekend liberty." When the end of the 6th week rolls around, inform them that Disneyland has been canceled due to the fact that they need to get ready for Engineering-certification, and that it will be another week before they can leave the house.

36. Sleep on the shelf in your closet. Replace the closet door with a curtain. Have your wife whip open the curtain about 3 hours after you go to sleep. She should then shine a flashlight in your eyes and mumble "Sorry, wrong rack."

37. Renovate your bathroom. Build a wall across the middle of your bathtub, move the shower head to chest level. When you take showers, make sure you shut off the water while you soap down.

38.. When there is a thunderstorm in your area, find a wobbly rocking chair and rock as hard as you can until you become nauseous. Have a supply of stale crackers in your shirt pocket.

39. Put lube oil in your humidifier and set it on high.

40. For ex-engineering types: leave the lawn mower running in your living room eight hours a day.

41. Once a week, blow compressed air up your chimney, making sure the wind carries the soot onto your neighbor's house. Ignore his complaints.

42. Lock-wire the lug nuts on your car.

43. Buy a trash compactor, but use it only once a week. Store the garbage on the other side of your bathtub.

44. Get up every night around midnight and have a peanut butter and jelly sandwich on stale bread.

45. Set your alarm clock to go off at random during the night, jump up and get dressed as fast as you can making sure you button up the top button on your shirt, stuff you pants into your socks. Run out into the backyard and uncoil the garden hose.

46. Once a month, take every major appliance apart and put them back together again.

47. Install a fluorescent lamp under the coffee table and then get under it and read books.

48. Raise the thresholds and lower the top sills of your front and back doors so that you either trip or bang your head every time you pass through one of them.

49. Every so often, throw the cat in the pool and shout, "Man overboard, starboard side" Then run into the house and sweep all the pots and dishes off the counter. Yell at the wife and kids for not having the kitchen "stowed for sea."

50. Put on the headphones from your stereo set, but don't plug them in. Hang a paper cup around your neck with string. Go stand in front of your stove. Say...to no one in particular "Stove manned and ready" Stand there for three or four hours. And say again to no one in particular "stove secured." Roll up your headphones and paper cup and place them in a box.

Alternative USAF Rank Chart

BY CHAIRFORCE.COM



HALF-AN-AIRMAN

Earning that first set of stripes is automatic ... there's nothing we can do about that. However, this new rank -- Half and Airman -- would allow the Air Force an extra six months before giving half-ass Airmen their first full stripes.



PRINCESS

She graduated high school one year ago and she still thinks the world revolves around her. Things that are more important than the military: Boys, makeup, hair style, Britney Spears' latest album, and anything to do with Orlando Bloom.



AIRMAN-COLONEL

We've all work with one of these Airmen at one point or another. The Airman-Colonel actually believes that the Air Force is a Democracy, where his decisions actually matter as much (or more) than his fellow non-commissioned officers.



CHIEF SENIOR AIRMAN

Promotion to the NCO ranks is nearly automatic these days, but back in the day, when promotion to staff sergeant was actually a difficult task, Airmen could easily hold the rank of E-4 for half a decade. CHairforce.com recognizes these slow burners.



BDU BLING

For those Airmen who feel naked without 20 pounds of gold and silver around their neck and wrists or a fake, 2-carat diamond hanging from the side of their head, this new set of stripes would help add some bling to those bland BDUs.



BABY NCO

Ten years ago, promotion to the ranks of a noncommissioned officer was a respectable accomplishment that required years of experience. With today's 65-plus promotion percentage rates, Airmen are becoming NCOs well before their time.



German Propaganda Leaflets

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