

RAO

BULLETIN

15 October 2017

PDF Edition



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1. The page number on which an article can be found is provided to the left of each article's title
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Misbehaving Generals ► New Emphasis On Senior Leaders Is Needed

Struggling with an embarrassing series of misconduct and behavior problems among senior officers, the Army is putting together new mental health, counseling and career management programs to shape stronger, more ethical leaders. The programs stem from a broader worry across the military about the need to bolster professionalism within the officer corps while holding accountable those who abuse their power. The Army plan appears to focus more on building character than berating bad conduct.

In recent years, general officers from the one-star to four-star level have violated the military code of conduct they've lived under and enforced — often for decades. Some infractions involved extramarital affairs, inappropriate relationships with subordinates or improper use of government funds. “The idea that we’ll be perfect, I think, is unrealistic, but we can be better and we strive to be better,” said Lt. Gen. Ed Cardon, tasked by the Army’s top officer to review the problem and devise ways to strengthen the senior officer corps. “Competence is no longer enough. Character is as or even more important.”

Among the incidents fueling the order was the suicide of Maj. Gen. John Rossi shortly before he was to become lieutenant general and assume control of Space and Missile Defense Command. Army leaders worry they missed opportunities to deal with the high levels of stress and self-doubt that reportedly led Rossi to hang himself. In the past nine months, the Army found two senior officers guilty of misconduct, forcing them out of their jobs and demoting them as they retired. One lost two stars; the other lost three. “We recognized senior executive leaders, with varying amounts of stress, lacked a holistic program that focuses on comprehensive health,” said Gen. Mark Milley, the Army’s chief of staff. The military has strived to combat stress disorders, suicide and other problems, he said, but the focus often has been on enlisted troops or lower-ranking officers. A new emphasis on senior leaders is needed, he said.

In an interview with The Associated Press, Cardon said several pilot programs have started and others are under discussion. The Army, he said, needs to better help officers manage stress, organize calendars, make time for physical fitness, take time off and reach out to mentors or coaches for support. Cardon said a key effort is finding ways to build self-control and self-awareness, ensuring officers and their families can quickly recognize and deal with problems that arise. Ethical behavior should be reinforced. “Most generals are very good at morphing themselves,” Cardon said. “They can be with the troops and they present this persona. They can be with the secretary and they present that persona. They’re very good at it and they get even better. The challenge is how do you uncover all that, and I think this is where that self-awareness, self-control, self-mastery has to help us out.”

Accurate numbers of senior Army leaders who have been disciplined or fired from a job for bad behavior are limited and unreliable. Some officers quietly retire or move to a different post, sometimes with an official reprimand in the file. Or sometimes without. In response to a request for data, the Army said there have been nine general officers “relieved of duty” among active duty, the National Guard and Army Reserves since 2012. Two high-profile cases in which senior officers were forced out and demoted weren’t included in those statistics due to complicated legal or administrative reasons, making it clear the numbers underestimate the problem.

One pilot program, said Cardon, creates a one-stop health care facility replacing the military's often far-flung, disjointed, multistep system. It's modeled after executive clinics that take a more in-depth, holistic approach to medical care. Other ideas focus on time management, encouraging high-level officers to take longer vacations. He said every general should take 10 to 14 uninterrupted days off each year to unplug, breaking with a military culture making them believe they're too important to disconnect. On schedules, officers would be urged not to overbook themselves. Packing their calendars with events all day and every evening can increase stress and make it difficult to prioritize.

The role that chaplains, mentors, executive coaches and colleagues can play is being studied, and how individual or group discussions might help. Too often, three-star and four-star generals working as base commanders are posted in remote locations around the world and have few or no equals in rank to socialize with or ask for advice. They can become isolated, ego-driven or surrounded by subordinates afraid to challenge them on inappropriate behavior. A possibility, said Cardon, are programs strengthening officers' relationships with spouses, who often notice problems first. Ninety percent of the approximately 330 active duty generals are married, he said.

Army officials stress only a minority of general officers are problems. "We have tolerated people doing things they shouldn't be doing because we say all of them are extremely competent and really good at what they do. And that's not good enough now because you're not only damaging yourself, you're damaging the institution," Cardon said. "We have great trust with the American people, every time one of these things happens, you're putting a nick in that." [Source: Associated Press | Lolita C. Baldor | September 24, 2017 ++]

Transgender Lawsuits Update 01 ► DoJ Asking for Dismissal

The Justice Department is asking a federal court to dismiss a lawsuit challenging President Donald Trump's moves to curtail military service by transgender people. The lawsuit was filed in August by the National Center for Lesbian Rights and GLBTQ Legal Advocates & Defenders (GLAD) on behalf of eight transgender individuals, including service members in the Air Force, Coast Guard and the Army, as well as students at the U.S. Naval Academy and in the ROTC program at the University of New Haven.

Trump tweeted in July that the federal government "will not accept or allow" transgender individuals to serve "in any capacity" in the military. That would reverse a 2016 policy change that allowed transgender people to serve openly. Trump subsequently directed the Pentagon to extend indefinitely a ban on transgender individuals joining the military, and gave Defense Secretary Jim Mattis six months to come up with a policy on how to deal with those who are currently serving, leaving the door open to permitting their continued service. Trump also directed Mattis to halt the use of federal funds to pay for sexual reassignment surgeries and medications, except in cases where it is deemed necessary to protect the health of an individual who has already begun the transition.

Late 4 OCT, the Justice Department filed a brief asking a U.S. District Court judge in Washington to dismiss the lawsuit. The lawsuit "is premature and should be dismissed for many reasons, including that the Defense Department is actively reviewing such service requirements, as the president ordered," said Justice Department spokeswoman Lauren Ehrsam. She said none of the plaintiffs have established that they will be impacted by current policies on military service.

The two advocacy groups who filed the lawsuit assailed that assertion, saying there was a "compelling need" to halt the administration's efforts. "Transgender Americans looking to enlist are not able to do so, and currently serving transgender service members have been demeaned and stigmatized, denied health care, and are facing the loss of their professions, livelihoods, health care, and the post-military retirement they have worked hard to earn," the groups said 5 OCT. The groups highlighted the uncertainty now facing Dylan Kohere, the University of New Haven student, and Regan Kibby, the Naval Academy student. "Because of the president's ban, smart, dedicated,

and idealistic young people like our plaintiffs ... are barred from fulfilling their dreams of military service,” said Shannon Minter, legal director for the National Center for Lesbian Rights.

The Justice Department brief argued that the lawsuit, even if it were allowed to proceed, was likely to fail. “Federal courts owe the utmost deference to the political branches in the field of national defense and military affairs, both because the Constitution commits military decisions exclusively to those branches and because courts ‘have less competence’ to second-guess military decision-making,” the brief said. [Source: NavyTimes | David Crary | October 5, 2017 ++]

Operation Troop Treats ► Halloween Candy Exchange

The nation’s largest dentist-sponsored Halloween candy exchange benefiting U.S. troops – Operation Troop Treats – is gearing up for its sixth year. Hosted by children’s dental provider Kool Smiles in partnership with Operation Gratitude, Operation Troop Treats is a national community outreach program designed to teach children about good dental health and the importance of giving back to those who serve our country, all while giving deployed U.S. troops a “sweet” reminder of home. Every child that takes part will receive one toy for every 25 pieces of unopened candy in its original intended packaging. There is a limit of three toys per child and toys are distributed on a first-come, first-served basis.

“Operation Troop Treats gives children of all ages an opportunity to say thank you to the people who put their lives on the line for our protection, and to experience the values of service and giving in a hands-on and memorable way,” said Carolyn Blashek, Founder of Operation Gratitude. “We’re excited to partner with Kool Smiles again this year to send candy, smiles, and a whole lot of gratitude to U.S. Service Members deployed overseas.” Here’s how it works:

From Saturday, 28 OCT through Saturday, 4 NOV, children and families can exchange their Halloween candy for toys at any of the 123 participating Kool Smiles dental offices nationwide. Kool Smiles dentists then send the donated candy, dental supplies for troops, and funds to cover the assembly and shipment of care packages to Operation Gratitude, a national nonprofit that annually produces and ships thousands of care packages to U.S. service members deployed overseas. The care packages are filled with donated Halloween candy, letters of appreciation, entertainment and hygiene items, and other comforts from home. Enter your zip at <https://www.mykoolsmiles.com/trooptreats> to locate a drop-off location near you

Since 2012, Kool Smiles has collected more than 12 tons of donated candy and sponsored the shipment of more than 1,200 care packages to U.S. troops stationed overseas through Operation Gratitude. More than 29,000 children donated four tons of candy through Operation Troop Treats in 2016 alone. This year’s volunteer effort will include more than 450 participating Kool Smiles dentists from 123 office locations in 14 states and the District of Columbia. To date, Operation Troop Treats is the largest Halloween candy exchange hosted by a U.S. dental provider.

“We started Operation Troop Treats six years ago to promote healthy dental habits during Halloween and to bring a little bit of holiday joy to U.S. service members deployed overseas who are not able to celebrate with family here at home,” said Dr. Dale Mayfield, Chief Dental Officer for Kool Smiles. “Many of our Kool Smiles patient families and employees are current or former service members, so this is a small way for us to share a smile with our troops and say thank you to those who sacrifice so much to ensure our safety and security.” In addition to this year’s candy shipment, Kool Smiles dentists will donate 200 dental kits and the funds to cover the assembly and shipment of 200 Operation Gratitude care packages. [Source: Veteran Resource | Donnie La Curan | October 4, 2017 ++]

Operation Gratitude ► Troop Support

Operation Gratitude, a 501(c)(3), volunteer-based organization, annually sends 200,000+ care packages to Veterans, First Responders, New Recruits, Wounded Heroes, their Care Givers, and to individually named U.S. Service Members deployed overseas and their families waiting at home. Each package is filled with food, entertainment, hygiene and hand-made items, as well as personal letters of support. Their mission is to lift the spirits and meet the evolving needs of the Military and First Responder communities, and provide volunteer opportunities for civilians anywhere in America to express their appreciation to all who serve our nation. Each package contains donated product valued between \$45 and \$100 and costs the organization \$15 to assemble and ship. Since its inception in 2003, Operation Gratitude volunteers have shipped more than 1.8 million care packages. Go to <https://www.operationgratitude.com/can-help/> to find out how you can say "Thank You" to our Military Heroes. [Source: Veteran Resource | Donnie La Curan | October 4, 2017 ++]

Cold War Radiation Testing ► Scholar Alleges Unsuspecting People Tested

Three members of Congress are demanding answers after a St. Louis scholar's new book revealed details of secret Cold War-era U.S. government testing in which countless unsuspecting people, including many children, pregnant women and minorities, were fed, sprayed or injected with radiation and other dangerous materials. The health ramifications of the tests are unknown. Lisa Martino-Taylor, an associate professor of sociology at St. Louis Community College who wrote "**Behind the Fog: How the U.S. Cold War Radiological Weapons Program Exposed Innocent Americans**," acknowledged that tracing diseases like cancer to specific causes is difficult. But three House Democrats who represent areas where testing occurred — William Lacy Clay of Missouri, Brad Sherman of California and Jim Cooper of Tennessee — said they were outraged by the revelations.

Martino-Taylor used Freedom of Information Act requests to obtain previously unreleased documents, including Army records. She also reviewed already public records and published articles. She told The Associated Press that she found that a small group of researchers, aided by leading academic institutions, worked to develop radiological weapons and later "combination weapons" using radioactive materials along with chemical or biological weapons. Her book, published in August, was a follow-up to her 2012 dissertation, which found that the government conducted secret testing of zinc cadmium sulfide in a poor area of St. Louis in the 1950s and 1960s. The book focuses on the mid-1940s to the mid-1960s.

An Army spokeswoman declined to comment, but Martino-Taylor's 2012 report on testing in St. Louis was troubling enough to trigger an Army investigation. The investigation found no evidence that the St. Louis testing posed a health threat. Martino-Taylor said the offensive radiological weapons program was a top priority for the government. Unknowing people in places throughout the U.S., as well as parts of England and Canada, were subjected to potentially deadly material through open-air spraying, ingestion and injection, Martino-Taylor said. "They targeted the most vulnerable in society in most cases," Martino-Taylor said. "They targeted children. They targeted pregnant women in Nashville. People who were ill in hospitals. They targeted wards of the state. And they targeted minority populations."

The tests in Nashville in the late 1940s involved giving 820 poor and pregnant white women a mixture during their first pre-natal visit that included radioactive iron, Martino-Taylor said. The women were chosen without their knowledge. Blood tests were performed to determine how much radioactive iron had been absorbed by the mother, and the babies' blood was tested at birth. Similar tests were performed in Chicago and San Francisco, Martino-Taylor said. Cooper's office plans to seek more information from the Army Legislative Liaison, said spokesman Chris Carroll. "We are asking for details on the Pentagon's role, along with any cooperation by research institutions and other organizations," Carroll said. "These revelations are shocking, disturbing and painful."

In California, investigators created a radiation field inside a building at North Hollywood High School during a weekend in the fall of 1961, Martino-Taylor said. Similar testing was performed at the University of California, Los Angeles and at a Los Angeles Police Department building. Sherman said he wants a survey of people who graduated from the school around the time of the testing to see if there was a higher incidence of illness, including cancer. He also said he will seek more information from the Department of Energy. "What an incredibly stupid, reckless thing to do," said Sherman, whose district includes North Hollywood High School.

Among those who recall the testing is Mary Helen Brindell, 73. She was playing baseball in a St. Louis street in the mid-1950s when a squadron of green planes flew so low overhead that she could see the face of the lead pilot. Suddenly, the children were covered in a fine powdery substance that stuck to skin moistened by summer sweat. Brindell has suffered from breast, thyroid, skin and uterine cancers. Her sister died of a rare form of esophageal cancer. "I just want an explanation from the government," Brindell said. "Why would you do that to people?"

Clay said he was angered that Americans were used as "guinea pigs" for research. "I join with my colleagues to demand the whole truth about this testing and I will reach out to my Missouri Delegation friends on the House Armed Services Committee for their help as well," Clay said in a statement. St. Louis leaders were told at the time that the government was testing a smoke screen that could shield the city from aerial observation in case of Soviet attack. Evidence now shows radioactive material, not just zinc cadmium sulfide, was part of that spraying, Martino-Taylor said.

Doris Spates, 62, was born in 1955 on the 11th floor of the Pruitt-Igoe low-income high-rise where the Army sprayed material from the roof. Her father died suddenly three months after her birth. Four of her 11 siblings died from cancer at relatively young ages. She survived cervical cancer and suffers from skin and breathing problems. "It makes me angry," Spates said. "It is wrong to do something like that to people who don't have any knowledge of it."

According to Martino-Taylor, other testing in Chicago; Berkeley, California; Rochester, New York; and Oak Ridge, Tennessee, involved injecting people with plutonium-239. She said her book shines a light on the team of mostly young scientists tasked with developing radiological weapons. They worked in a closed world with virtually no input from anyone "who could say, 'This isn't right,' or put some sort of moral compass on it," she said. She hopes her book prompts more people to investigate. "We haven't gotten any answers so far," Martino-Taylor said. "I think there's a lot more to find out." [Source: The Associated Press | Jim Salter | October 2, 2017 ++]

Camp Pendleton ► Significant Deficiencies Found In Water Supply

Camp Pendleton officials say that despite water safety inspectors finding a dead rat rotting on a reservoir gate, a dead frog clinging to a ladder, and a rodent carcass floating in treated water the water is safe, and that there is no need to boil water or take other precautions. "Simply put, the water is and has been safe to drink," base spokesman Carl Redding told the San Diego Union-Tribune. "Camp Pendleton is committed to providing safe and compliant drinking water. This is a duty and responsibility that we take very seriously." However, according to the Military Times, state and federal investigators found "significant deficiencies" in the systems comprising the base's water treatment program. According to the Environmental Protection Agency report, Camp Pendleton "lacked adequate supervision and qualified operators for treatment and distribution."

The base failed the June inspections and subsequently the "USMC removed the animal remains and cleaned, refilled, and tested the reservoirs for total coliform and chlorine." Additional testing to ensure the water is safe to drink will be conducted, according to the EPA release. That is of little comfort to the 55,000 Marines and their dependents who live on the base. On 28 SEP, the Marine Corps and the EPA entered into a consent decree, forcing the base to comply with the Safe Drinking Water Act. Under the decree, the Marine Corps has 180 days to shut down, inspect, clean and sample all Camp Pendleton reservoirs.

"Public water systems must meet all state and federal requirements to provide safe drinking water to their customers," said Alexis Strauss, EPA's Acting Regional Administrator for the Pacific Southwest. "Our priority is to ensure the base achieves compliance promptly, to serve those who live and work at Camp Pendleton." [Source: TREA Washington Update | October 2, 2017 ++]

Guam Update 02 ► DoD Asked to Halt Military Construction

Guam Gov. Eddie Calvo has called for the U.S. Department of Defense to halt military construction projects on the island until the shortage of foreign labor is remedied. Federal immigration officials have denied most of the requests by Guam businesses to use temporary foreign labor under the H-2B visa program, the Pacific Daily News reported on 29 SEP.. A few years ago, the U.S. territory had a foreign workforce of more than 1,000 people. As the number dropped to less than 100, businesses on the island filed a lawsuit over the denials last year.

Calvo has asked the Defense Department to stop military construction and for the guidelines of the buildups to be reassessed. The military has relied on the island's temporary foreign workforce in the past. "Unfortunately, this H-2B denial, which started with the bureaucrats of the Obama administration, continues to linger," said Calvo, a Republican. "In so doing, it is not only hindering our island's economy, but I believe it is risking our island and our nation's security as well."

In a letter to acting Director James W. McCament of U.S. Citizenship and Immigration Services, Calvo said the visa denials are causing harm by inflating construction costs and leaving fewer bids for military and civilian projects. "I consider this a clear and present danger to the safety and health of the people of Guam," Calvo said. [Source: The Associated Press | October 1, 2017 ++]

USS Cole Attack Update 01 ► Slow Pace of Trying Alleged Terrorist

More than two years after a Guantánamo war court judge ordered a brain scan of an alleged terrorist awaiting a death-penalty trial, a mobile MRI unit has arrived at the remote U.S. Navy base in Cuba to carry out the study, a Pentagon spokesman said 2 OCT. The magnetic resonance imaging study of Abd al Rahim al Nashiri's brain is a prerequisite to the Saudi captive's trial as the alleged mastermind of al-Qaida's suicide bombing of the Navy destroyer USS Cole off Yemen that killed 17 U.S. sailors Oct. 12, 2000. Dozens more sailors were wounded.



Saudi Abd al Rahim al Nashiri during his Nov. 9, 2011 military commissions arraignment at the U.S. Navy base at Guantánamo Bay, Cuba

Lawyers for the 52-year-old Saudi argue, if there's demonstrable brain damage, the judge should not permit the case to go forward as a capital trial. During his 2002-06 CIA captivity he was waterboarded, confined to a coffin-sized box, subjected to a mock execution and rectal rehydration, among other techniques, to get him to cooperate with his captors. Air Force Col. Vance Spath, the judge, ordered the brain scan in early 2015. The protracted delay in delivery of the equipment is the latest illustration of the slow pace of progress at the Guantánamo war court where Nashiri was charged in 2011, and has had aspects of the pretrial phase reviewed at higher courts.

At the Pentagon, spokesman Air Force Maj. Ben Sakrisson said the mobile MRI arrived on Sept. 26, and should be up and running from mid-October through mid-February, and then return to the United States. The Navy initially advertised to rent the MRI in July 2015. It will cost about \$370,000, the major said, including transport, setup and operation. It was unclear whether four months was required to do multiple scans of Nashiri's brain. "It is unknown at this time whether other individuals will utilize the MRI at other periods of time," Sakrisson said. One apparent emerging issue, based on correspondence obtained by the Miami Herald, is whether torture expert Sondra Crosby, a physician who has spent time with Nashiri, will have access to the Saudi before or while he's put into the machine.

The base has 41 war on terror prisoners — six awaiting death penalty trials — and about 5,500 residents, including U.S. Navy families and contract laborers who are typically sent to the United States if Navy doctors order an MRI. U.S. law forbids the transfer of any Guantánamo captive to the United States for any reason, including medical care. So the equipment had to be brought to the base. The base hospital got a CT scanner soon after the Pentagon opened the war on terror prison on Jan. 11, 2002. At the detention center, medical staff assigned to care for the captives have consistently told reporters on media visits that they have no need for an MRI, and that the one being brought to scan Nashiri's brain was strictly meant for forensic not therapeutic use.

Since then, one of the men facing a war crimes trial, Abd al Hadi al Iraqi, has undergone two spine surgeries, the latest of which caused a delay in his pretrial hearing as an alleged commander of al-Qaida forces in post Sept. 11 Afghanistan. A lawyer for one of the alleged 9/11 terror attack plotters said his team was evaluating what medical tests they might seek on behalf of their client, Saudi Mustafa al Hawsawi, who they say suffered rectal damage during his years in CIA incarceration. Attorney Walter Ruiz said his team was "in the process of determining which part of his body" would benefit from a scan — both for potential treatment and legal defense purposes. "Any medical treatment is also a mitigating issue," he said, adding they would first ask the prison to conduct the test before seeking court intervention.

The spokeswoman at the U.S. Navy hospital at the base declined to say whether the Navy doctor in charge, Capt. John C. Nicholson, had any interest in using the equipment for diagnostic purposes during its four-month stay there. In 2012, the detention center bought a \$1.65 million mobile MRI for delivery by Jan. 28, 2013 to a port in Jacksonville. It spent a year in storage before the U.S. Southern Command concluded the device was not needed and sent it to the Dwight D. Eisenhower Army Medical Center at Fort Gordon in Augusta, Georgia. [Source: Miami Herald | Carol Rosenberg | October 2, 2017 ++]

Military Star Credit Card Update 01 ► Commissary Use authorized

Commissary customers soon will be able to use their Military Star credit card to pay for their groceries, as officials roll out acceptance of the card over the next month and a half. The Military Star card is a credit card accepted at all the military exchanges, with 1.5 million cardholders. On 3 OCT, a pilot test started at the Fort Lee, Virginia, commissary. On 9 OCT, five more commissaries joined the pilot: Hanscom Air Force Base, Massachusetts; Carlisle Barracks, Pennsylvania; Naval Air Station Oceana, Virginia; Naval Air Station Key West, Florida; and Portsmouth Naval Shipyard, Virginia. Twenty more stores, including some overseas, join in Oct. 16.

The payment method began being phased in worldwide 3 OCT. By 9 NOV, the remaining 212 commissary stores are expected to be on board accepting the Star card, if the pilot test of the software is successful. The full rollout is available here. To see when the Commissary in your area will start accepting it go to <https://www.militarytimes.com/pay-benefits/2017/09/23/star-card-rollout-when-youll-be-able-to-use-yours-at-the-commissary>.

The fiscal 2017 National Defense Authorization Act required the commissaries to start accepting the card. Extending this acceptance “offers greater customer convenience while lowering overhead expenses and strengthening commissary, military exchange and quality of life benefits,” said Defense Commissary Agency spokesman Kevin Robinson, in a response to questions about the rollout of the card. The current interest rate on the Military Star card is 11.24 percent. Unlike interest paid to other card companies, any money paid by cardholders in interest charges for the Military Star card (incurred when cardholders don’t pay off their balance each month) goes back to morale, welfare and recreation programs on military installations.

Robinson said he has no information about whether part of the profits from interest charges will be shared with the commissary agency. Defense officials have been taking steps to reduce the amount of taxpayer dollars — about \$1.4 billion a year — used to fund commissaries. In addition to debit cards, cash, personal checks, travelers checks, money orders and other types of payments such as government food assistance, commissaries accept other credit cards like American Express, Discover, MasterCard and Visa. Shoppers who use the Military Star card at the commissary will accumulate rewards point just as they do at exchanges, Robinson said, but they won’t able to redeem Military Star rewards cards at commissaries. As always, consumer advocates advise shopping around for the best interest rate and other terms on any credit card. And just like other cards, if you don’t pay these off each month, you’ll pay the interest charges. [Source: MilitaryTimes | Karen Jowers | September 22, 2017 ++]

Military Star Credit Card Update 02 ► Card Use Facts

Facts about the Military Star card, which will be accepted in commissaries

- 1. Reward-eligible.** Cardholders receive a \$20 rewards card for every \$1,000 in purchases. The rewards card can be redeemed at the exchanges’ brick-and-mortar facilities, wherever exchange gift cards are accepted.
- 2. Commissary, with a catch.** Some commissaries will begin accepting the card in October as part of a global rollout that will continue into November. But those stores won’t accept exchange gift cards or rewards cards, a Defense Commissary Agency spokesman said.
- 3. Pay that bill.** Unlike other credit card issuers, the administrator of the Military Star card doesn’t have to get a civil judgment against a card holder to garnish a service member’s pay through the Defense Finance and Accounting Service.
- 4. Doing some good.** When cardholders use the Star card instead of another credit card, they help exchanges and other installation entities avoid costly added fees. When customers use credit cards from other companies at such locations, the entity receiving the payment has to pay a transaction fee, often around 2 percent or 3 percent, to the credit card company. In 2016, AAFES alone paid nearly \$80 million in credit card transaction fees, which means that much less money is pumped back into the services’ morale, welfare and recreation programs.
- 5. Doing more good.** The commissaries don’t pay their transaction fees; that cost is covered directly by the U.S. Treasury. But the Military Star card has no fee, so taxpayers won’t have to foot the bill. The Treasury doesn’t provide full data on the fees to DeCA, an agency spokesman said, but estimates suggest annual fees can reach \$40 million to \$50 million.

To Learn more about the card go to <https://www.myecp.com>. [Source: Military.com | October 4, 2017 ++]

WWI Commemorative Coin ► 100th Anniversary of the End of World War I

A new commemorative coin was unveiled 9 OCT to mark the 100th anniversary of the end of World War I and honor those Americans who served. The silver dollar coin, authorized by Congress in 2014, features a service member holding a rifle to honor those who fought in the war from 1914 to 1918. Acting Army Secretary Ryan McCarthy and Army Chief of Staff Gen. Mark Milley unveiled the design on the first day of the Association of the U.S. Army's annual meeting in Washington, D.C. "It's an opportunity to remember 4.7 million men and women who served 100 years ago," McCarthy said. "Those soldiers performed their difficult mission and left a legacy that touches us all every day." No war should be forgotten, he said, and neither should anyone's military service.



World War I veterans are the only ones who don't have a national memorial in Washington, D.C., said Terry Hamby, a Vietnam veteran and commissioner of the U.S. World War I Centennial Commission. "With this coin, it starts the process to commemorate their service," Hamby said, adding that the proceeds from the coin will help with the construction of the planned World War I memorial at Pershing Park near the White House. There will be a groundbreaking ceremony on Nov. 9, with plans to eventually add a flagpole and a 65-foot-long commemorative wall. "This is the first step in establishing the memorial so that those 4.7 million men and women won't be forgotten," Hamby said.

The Treasury secretary selected the coin design from a 2016 public competition held by the U.S. Mint where artists were encouraged to submit their ideas. The coin, titled Soldier's Charge, will be available in January, with proceeds benefiting the U.S. World War I Centennial Commission. The commission focuses on public outreach and education about American involvement in the war. No price has been set yet, but prices for silver dollar commemorative coins were \$51.95, according to the U.S. Mint website. Congress authorizes commemorative coins to celebrate American people, events, places and institutions. The World War I coin will be available throughout 2018, and although these coins are legal tender, they're not minted for general circulation. [Source: ArmyTimes | Charlsy Panzino | October 9, 2017 ++]

DoD Fraud, Waste, & Abuse ► Reported 01 thru 15 OCT 2017

Los Angeles, CA -- California's attorney general has charged the owner of a chain of jewelry stores with failing to inform military members about credit terms and wrongly assessing penalties. The criminal complaint, filed last week in Los Angeles Superior Court, charges **Ramil Abalkad**, the 54-year-old owner of Romano's Jewelers

Services Inc. in Southern California, and **Melina Abalkad**, the 43-year-old owner of MBNB Financial Inc., with conspiracy to engage in illegal financing and debt collection practices. The attorney general's office said in a press release that the Abalkhads encouraged young Marines and sailors to buy jewelry using MBNB Financial for credit, including at stores near the Camp Pendleton Marine Corps Base. The couple allegedly failed to provide legally required disclosures about monthly payments, interest rates and other financing terms and had debt collectors harass customers who fell behind.

The defendants also allegedly threatened military members with courts-martial and other military discipline, according to the complaint. "Our service members and military families sacrifice immensely for our country, the last thing they should have to worry about is being fleeced by local merchants," Attorney General Xavier Becerra said Tuesday in San Diego, where he announced the charges. **Ramiro Salinas**, 51, an employee of MBNB Financial, was charged with conspiracy to engage in unlawful debt collection. A phone message for all three defendants left Tuesday at corporate offices for Romano's Jewelers and MBNB Financial was not immediately returned. Bail for Ramil Abalkad was set at \$235,000 and at \$40,000 for Melina Abalkad following their arrests on Sept. 26. Bail for Salinas was set \$100,000 following his arrest Friday. [Source: NavyTimes | The Associated Press | October 3, 2017 ++]

-o-o-O-o-o-

Media, PA -- A Pennsylvania man has admitted in federal court in New Jersey that he defrauded a military insurance program after he was recruited into the scheme by a former Canadian soccer player. **Jason Cerge** on 4 OCT pleaded guilty to conspiracy to commit health care fraud. The 41-year-old Media, Pennsylvania, resident admitted he participated in a scheme to defraud TRICARE by knowingly submitting fraudulent claims for medically unnecessary prescription compounded medications. Prosecutors say the conspirators knew that TRICARE reimbursed pharmacies for each of the compounded medications and the conspirators entered into agreements with certain pharmacies nationwide to receive a percentage of the amount reimbursed for each prescription diverted to that pharmacy. Cage was recruited by Peter Pappas, who pleaded guilty to his role in the scheme last year. [Source: The Associated Press | October 4, 2017 ++]

-o-o-O-o-o-

Butler, PA -- Two brothers who formerly owned Ibes Tek LLC, a Pennsylvania defense contractor, have been sentenced to prison and fined after pleading guilty in a \$6 million scheme to overcharge the U.S. Defense Department for Humvee window kits. **Thomas Buckner**, 68, was sentenced to two-and-a-half years in prison and fined \$500,000. **John Buckner**, 66, was sentenced to two years in prison and fined \$300,000. U.S. District Judge Arthur Schwab said Thomas Buckner received the stiffer sentence because he was more involved in the day-to-day business of Ibis Tek LLC, the Butler-based contractor the brothers founded, especially after Buckner retired from the company's management in 2007. The brothers each owned half the company when the crimes occurred; the company was sold in February 2017 to new investors who had nothing to do with the scheme.

The Buckners and their former chief financial officer, **Harry Kramer**, 52, of Pittsburgh, Pennsylvania, pleaded guilty in May to charges of major fraud against the government and income tax evasion for filing returns that didn't include the illegal income, as well as other irregularities. Kramer will be sentenced Oct. 18. The Buckners have already repaid more than \$6 million to the government, plus another \$6 million to settle a lawsuit the government filed against them for the scheme. They've also repaid nearly \$1 million each in income tax losses and interest. Assistant U.S. Attorney Nelson Cohen and the defense attorneys agreed before Tuesday's sentencing that the judge could sentence the brothers below the 41 to 51 months in prison dictated by federal sentencing guidelines given their cooperation so far, and their record of civic and charitable works. But Schwab rejected arguments by Thomas Buckner's attorney, Alexander Lindsay Jr., who hoped for probation.

"A non-prison sentence is a bridge far too far in considering the defendant's conduct," Schwab said. "The Buckners' generosity is undercut by the nature of this offense." Cohen had argued for prison saying the brothers

must be held responsible for something other than restitution, which he said was reasonable given the brothers' wealth. "You don't want to stand in front of a judge with a pile of money in the bank and the victim not paid in full," Cohen told the judge. "Paying back the money is just the cost of doing business." The target of the fraud was the Warren, Michigan-based U.S. Army Tank-Automotive and Armaments Command, or TACOM, an arm of the Defense Department which procures military vehicles from contractors.

The brothers scammed TACOM by hiring a Chinese firm to make emergency escape window kit frames for \$20 each and then selling them to TACOM for \$70 each through a shell company they created called Alloy America, Cohen said. Alloy America was located at Ibis Tek, and Kramer kept the books for both companies. The Buckners and Kramer also sold scrap aluminum relating to the manufacture of the frames, but kept the money. The Buckners and Kramer were supposed to credit the scrap revenue to TACOM as a way of helping the government agency control costs, Cohen said. Kramer was charged because he helped the Buckners by filing false tax returns that understated Ibis Tek's income in 2009 and 2010. [Source: The Associated Press | Joe Mandak, | October 10, 2017 ++]

POW/MIA Recoveries ► Reported 01 thru 15 OCT 2017 | Twenty-Two

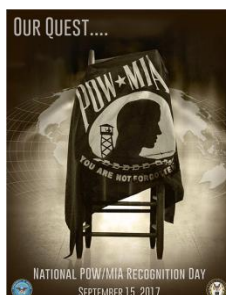
"Keeping the Promise", "Fulfill their Trust" and "No one left behind" are several of many mottos that refer to the efforts of the Department of Defense to recover those who became missing while serving our nation. The number of Americans who remain missing from conflicts in this century are: World War II 73,025, Korean War 7730, Vietnam War 1604, Cold War (126), Iraq and other conflicts (5). 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 missing or unaccounted for personnel to date refer to <http://www.dpaa.mil> and click on 'Our Missing'. Refer to <http://www.dpaa.mil/News-Stories/Recent-News-Stories/Year/2017> for a listing and details of those accounted for in 2017. 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 names, photos, and details of the below listed MIA/POW's which have been recovered, identified, and/or scheduled for burial since the publication of the last RAO Bulletin are listed on the following sites:

- <https://www.vfw.org/actioncorpsweekly>

- <http://www.dpaa.mil/News-Stories/News-Releases>
- <http://www.thepatriotspage.com/Recovered.htm>
- <http://www.pow-miafamilies.org>
- <https://www.pownetwork.org/bios/b/b012.htm>
- <http://www.vvmf.org/Wall-of-Faces>

LOOK FOR

- Army Air Forces 1st Lt. **George W. Betchley**, 20, of Yonkers, N.Y., assigned to the 429th Bombardment Squadron, 2nd Bombardment Group, 15th Air Force in 1945.
- Army Air Forces 1st Lt. **John H. Liekhus** assigned to the 323rd Bombardment Squadron, 91st Bombardment Group (Heavy), Eighth Air Force in 1944.
- Army Air Forces 2nd Lt. **Clarence L. Dragoo**, 21, of Sandyville, W.Va., assigned to 716th Bomber Squadron, 449th Bombardment Group. in 1945.
- Army Air Forces 2nd Lt. **Richard M. Horwitz**, 22, of Brookline, Mass. assigned to the 716th Bomber Squadron, 449th Bombardment Group in 1945.
- Army Air Forces Staff Sgt. **Bobby J. Younger** assigned to the 323rd Bombardment Squadron, 91st Bombardment Group (Heavy), Eighth Air Force in 1944.
- Army Air Forces Staff Sgt. **Robert O. Shoemaker** was a B-17 crew member assigned to the 323rd Bombardment Squadron, 91st Bombardment Group (Heavy), Eighth Air Force in 1944.
- Army Air Forces Tech Sgt. **Allen A. Chandler** assigned to the 323rd Bombardment Squadron, 91st Bombardment Group (Heavy), Eighth Air Force in 1944.
- Army Air Forces Tech Sgt. **John F. Brady** assigned to the 323rd Bombardment Squadron, 91st Bombardment Group (Heavy), Eighth Air Force in 1944.
- Army Air Forces Tech. Sgt. **Earl P. Gorman**, 23, of Lynn, Mass. a B-24 radio operator assigned to the 718th Bombardment Squadron, 449th Bombardment Group, based in Grottaglie, Italy in 1944.
- Army Pfc. **Willie E. Blue** assigned to Company K, 3rd Battalion, 9th Infantry Regiment, 2nd Infantry Division in 1950.
- Army Sgt. **Kermit J. Lejeune** assigned to Company K, 3rd Battalion, 35th Infantry Regiment, 25th Infantry Division in 1950.
- Marine Corps 2nd Lt. **George S. Bussa**, 29, of Chicago IL, assigned to Company F, 2nd Battalion, 8th Marines, 2nd Marine Division in 1943.
- Marine Corps Cpl. **Walter G. Critchley**, 24, of Norwich, N.Y. assigned to Company F, 2nd Battalion, 8th Marines, 2nd Marine Division in 1943.
- Marine Corps Pfc. **Harold P. Hannon** assigned to Company E, 2nd Battalion, 8th Marine Regiment, 2nd Marine Division in 1943.
- Marine Corps Reserve Sgt. **Johnson McAfee, Jr.** assigned to Company F, 2nd Battalion, 7th Marine Regiment, 1st Marine Division, Fleet Marine Force in 1950.
- Navy Storekeeper 3rd Class **Wallace E. Eakes** assigned to the USS Oklahoma in 1941.
- Navy Electrician's Mate 3rd Class **Don O. Neher**, 28, of Kansas City, Mo. assigned to the USS Oklahoma in 1941.
- Navy Reserve Pharmacist's Mate 2nd Class **Thomas J. Murphy** assigned to Headquarters Company, 3rd Battalion, 8th Marine Regiment, Fleet Marine Force in 1943.

- Navy Seaman 1st Class **Clifford G. Goodwin** assigned to the USS Oklahoma in 1941.
- Navy Seaman 1st Class **Joseph M. Johnson** assigned to the USS Oklahoma in 1941.
- Navy Seaman 2nd Class **Harold L. Head** assigned to the USS Oklahoma in 1941.
- Navy Storekeeper 3rd Class **Eli Olsen** assigned to the USS Oklahoma in 1941.

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

*** VA ***



VA Rating Criteria ► Review & Update | Dental and Oral Conditions

If you’ve ever wondered how VA rates disabilities for compensation, you’ll be interested to know that after more than 70 years they are doing a review and update of the rating criteria for all 15 body systems. Previous updates have been done as needed, but this is the first comprehensive review of the VA Schedule for Rating Disabilities. <https://www.benefits.va.gov/WARMS/bookc.asp>. The first of these updates, for Dental and Oral Conditions, went into effect 10 SEP. This update includes updated medical terms, new diagnostic codes for conditions previously rated under other conditions, and added disability levels. **No existing dental or oral conditions were removed.**

Often referred to as the “VASRD” or rating schedule, directs claims processors on how to assess the severity of disabilities related to military service. While VA has routinely updated parts of the VASRD, for the first time since 1945, VA is updating the entire rating schedule to more accurately reflect modern medicine. Since 2009, subject matter experts, including physicians, reviewed each of the 15 body systems that make up the VASRD. This effort is part of VA’s continued commitment to improving the delivery of disability compensation benefits to Veterans and modernizing our systems.

If you have a claim or appeal pending for a dental or oral condition **before Sept. 10, 2017**, VA will consider both the old and new rating criteria when making a decision. All claims for dental or oral conditions received by VA **on or after Sept. 10** will be rated under the new rating criteria. If you are already service-connected for a dental or oral condition and submit a claim for increase, your disability rating may increase (or decrease) based on the new rating criteria. However, VA will not change your disability rating just because of the update to the rating criteria. In the coming months, more body systems will be updated until all 15 are modernized, ensuring VA provides the most accurate ratings for disability compensation claims based on modern medicine. [Source: Vantage Point | September 8, 2017 ++]

VA Individual Unemployability Update 04 ► No Cuts in 2018

Months after Veterans Affairs officials dropped plans for a controversial benefits cut, the families of those who would have been affected still fear they could lose thousands in monthly payouts. Confusion over the short-lived plan this week forced department leaders to issue a letter to veterans groups clarifying they will not change the Individual Unemployability program in fiscal 2018, and are looking for other cost-saving solutions in the future. “The department does not support a termination of [the program],” VA Secretary David Shulkin wrote in a letter to veterans groups Thursday. “We are committed to finding ways that empower disabled veterans through vocational rehabilitation and employment opportunities.”

Advocates praised the move, noting they have been inundated with questions about the potential cut, even months after Shulkin said the department was abandoning the proposal. At issue is a provision in the federal budget plan unveiled by the White House last spring. Included in plans for a \$186.5 billion VA budget for fiscal 2018 was a provision to dramatically change eligibility rules for the IU program, which awards payouts at the 100-percent disabled rate to veterans who cannot find work due to service-connected injuries, even if their actual rating decision is less than that. The program is essentially an unemployment benefit for veterans not officially labeled as unable to work.

Administration officials had considered stopping those payouts once veterans become eligible for Social Security retirement benefits, arguing that retirement-age individuals should no longer qualify for unemployment payouts. Veterans ineligible for Social Security would be exempt. The move would have saved \$3.2 billion next year alone. But it also would have taken away thousands of dollars annually from up to 210,000 veterans over the age of 60, a move which veterans groups decried as devastating. After a public outcry, Shulkin publicly dropped the idea in June. “The budget is a process, and it became clear this [plan] would hurt some veterans,” he told lawmakers during a Senate hearing. “I’m not going to support policies that hurt veterans.”

But concerns about a potential cut have lingered. Leaders from veterans groups said they have received numerous letters and calls in recent months from veterans who still believe the cuts are under consideration. Shulkin’s latest letter is designed to end that speculation. In it, he promises to continue working with veterans groups on future changes to the program. Administration officials have said they want to re-examine the IU program in the future but don’t want that debate to take away from other budget priorities. The federal government is currently operating under a three-month extension of the fiscal 2017 budget. Congress must find a long-term solution or a short-term fix for the funding fight by mid-December, or trigger a partial government shutdown. [Source: MilitaryTimes | Leo Shane III | October 13, 2017 ++]

VA Secret Agreements ► Staff Mistake and Misdeed Concealment

A USA TODAY investigation found the VA — the nation’s largest employer of health care workers — has for years concealed mistakes and misdeeds by staff members entrusted with the care of veterans. In some cases, agency managers do not report troubled practitioners to the National Practitioner Data Bank, making it easier for them to keep working with patients elsewhere. The agency also failed to ensure VA hospitals reported disciplined providers to state licensing boards. “What they are saying is, ‘We don’t want you to work for us, but we’ll help you get a job elsewhere.’ That’s outrageous.” In other cases, veterans’ hospitals signed secret settlement deals with dozens of doctors, nurses and health care workers that included promises to conceal serious mistakes — from inappropriate relationships and breakdowns in supervision to dangerous medical errors — even after forcing them out of the VA.

USA TODAY reviewed hundreds of confidential VA records, including about 230 secret settlement deals never before seen by the public. The records from 2014 and 2015 offer a narrow window into a secretive, long-standing

government practice that allows the VA to cut short employees' challenges to discipline. Some employees who received the settlements were whistle-blowers or appear to have been wronged by the agency. In other cases, it's clear the employees were the problem. In at least 126 cases, the VA initially found the workers' mistakes or misdeeds were so serious that they should be fired. In nearly three-quarters of those settlements, the VA agreed to purge negative records from personnel files or give neutral or positive references to prospective employers. In 70 of the settlements, the VA banned employees from working in its hospitals for years — or life — even as the agency promised in most cases to conceal the specific reasons why.

Michael Carome, a doctor and director of the health research group at Public Citizen in Washington, said removing records from personnel files and providing neutral references create potential danger beyond the VA. "It's unacceptable," he said. "What they are saying is, 'We don't want you to work for us, but we'll help you get a job elsewhere.' That's outrageous."

- The VA settled with a nurse who managers initially found had left a psychiatric patient bound in leather restraints for hours; a medical technician who made errors on critical bone imaging charts; and a hospital director accused of harassing female workers while his facility fell weeks behind in treating veterans.
- The VA found radiologist Jorge Salcedo misread dozens of CT scans, images that detect tumors and blood clots, at a VA hospital in Spokane, Wash., according to Texas Medical Board records. Instead of firing him, the VA agreed to pay him up to \$42,000 of unused sick and leave pay and let him resign with a clean reference in 2015. The Texas records show Salcedo told the medical board he resigned under investigation, but he didn't admit or deny the VA's findings.
- Thomas Franchini drilled the wrong screw into the bone of one veteran. He severed a critical tendon in another. He cut into patients who didn't need surgeries at all. Twice, he failed to properly fuse the ankle of a woman, who chose to have her leg amputated rather than endure the pain. In 88 cases, the VA concluded, Franchini made mistakes that harmed veterans at the Togus hospital in Maine. The findings reached the highest levels of the agency. "We found that he was a dangerous surgeon," former hospital surgery chief Robert Sampson said during a deposition in an ongoing federal lawsuit against the VA. Agency officials didn't fire Franchini or report him to a national database that tracks problem doctors. They let him quietly resign and move on to private practice, then failed for years to disclose his past to his patients and state regulators who licensed him.

The secret settlements obtained by USA TODAY represent a fraction of the problem doctors and other employees the VA has discovered over the past 10 years. Each year, the agency fires hundreds of medical workers and pays out hundreds of malpractice claims. The providers' names remain secret. USA TODAY asked to inspect the records for thousands of those cases, but the VA blacked out or would not release the identities of the providers or the details of what took place.

That's what makes the small set of secret settlements obtained by USA TODAY so unique. Though the records do not describe the wrongdoing, they provide the names, job descriptions, the amount of the settlement payments and other terms. In the 230 deals, the agency spent \$6.7 million to settle with employees, including doctors, nurses and other health-care workers.

The VA has been under fire in recent years for serious problems, including revelations of life-threatening delays in treating veterans in 2014 and efforts to cover up shortfalls by falsifying records. New VA leaders promised accountability, including increased transparency and a crackdown on bad employees. In the years since, the VA has fired hundreds of employees involved in patient care. Details of each case — including the names of fired doctors — largely remain secret. In denying requests for information, the agency cited federal privacy law and said protecting employees' privacy outweighed the public's right to know about problems involving veterans' care.

Agency leaders who took over after President Trump's inauguration declined to discuss how their predecessors handled cases uncovered by USA TODAY. VA spokesman Curt Cashour said "we cannot explain or defend"

settlements negotiated by past agency leaders. In response to USA TODAY's findings, VA Secretary David Shulkin ordered that all future settlement deals with employees involving payments of more than \$5,000 be approved by top VA officials in Washington.

In the past, decisions about most deals were left to local and regional officials. The settlements USA TODAY reviewed involved workers at more than 100 facilities in 42 states. In addition, the VA said it will review its policy of reporting only some medical professionals to the national data bank following USA TODAY's questions about its investigation of Franchini, who did not get a settlement. "We will review the specific elements of this situation, along with patient safety procedures and how and when we report to the National Practitioner Data Bank and state licensing boards," Cashour said. [Source: USA TODAY | Donovan Slack & Michael Sallah | October 11, 2017 ++]

VA Prosthetics Update 18 ► Possible \$256.7 Million Overpayment by VHA

The Veterans Health Administration (VHA) may have overpaid for more than a quarter of a billion dollars in prosthetics in 2015 by inappropriately using government-issued charge cards, according to a new watchdog report. The Department of Veterans Affairs (VA) Office of Inspector General (OIG) found that VHA staff from fiscal 2012 to 2015 sometimes used government purchase cards to buy prosthetics instead of using contracts. Staff also "did not ensure fair and reasonable prices were paid" for the prosthetics, according to the Sept. 29 report. As a result, the government may have overpaid for \$256.7 million in prosthetics purchases in 2015.

The OIG looked into the way the VHA bought prosthetics after they received a complaint in May 2015 that administration staff had inappropriately used government purchase cards to buy commonly used prosthetics. The VHA defines a prosthetic as any device that supports or replaces the loss of a body part or function; the category includes artificial limbs, heart valves, hearing aids, hip replacements and pacemakers. The VHA bought nearly \$2 billion worth of prosthetics using purchase cards in fiscal 2015. OIG also found that VHA staff not authorized to make prosthetics buys that cost more than \$3,500 did so anyway.

Typically, VHA staff should have a specific authority to use purchase cards, which have a preset amount on them ranging from \$3,500 into the millions. The cards are intended to help the VA buy things faster. "A purchase card is similar to a credit card and has a preset monetary limit used to pay for goods or services for official VA use," a VA spokesman told The Hill. "VA purchasing staff can use these cards when ordering supplies, such as prosthetic items, using established contracts to place purchase card orders," he said. But of the roughly 87,100 VHA prosthetic buys made with purchase cards in fiscal 2015, 61 percent, or \$520.7 million worth, were "improper payments," the watchdog found. "VHA did not have reasonable assurance that VA medical facilities used taxpayer funds efficiently when procuring prosthetics," the report states.

VA OIG Audit Manager Earl Key, who worked on the report, said VHA staff would buy prosthetics then ask individuals with purchase cards to make the payment. VHA officials told the OIG's office they did so because they were trying to ensure the veterans received what they needed. Key said this was a standard practice of VHA and management "understood this was occurring." "To some degree, there was obviously a need for this item, but VHA didn't have sufficient controls in place to ensure they were procured properly," Key said. He added that no one has been held accountable, but VHA officials "were considering it."

Since the audit, administration officials "have started to put controls in place," and the OIG will continue to review the VHA over the next year. Should VHA staff not implement recommended controls, "they increase their risk for improper payments and unauthorized commitments totaling about \$2.6 billion over a five-year period," according to the OIG report. "VHA spends quite a bit of funds on prosthetics. We're not saying that all of the \$500 million was wasted, we're just saying that they spent this without following the policy. They did get \$500 million in prosthetics for what they purchased," Key said. [Source: The Hill | Ellen Mitchell | October 6, 2017 ++]

VA Home Loan Update 51 ► Appraiser Shortage Impacting Vets Adversely

One of the promises we make members of the military is that in exchange for their service, we promise to ease their transition back into civilian life when the time comes. For over seven decades, a major element of that deal has been the VA loans that veterans can use to buy a home. These loans require no money down and can be obtained with much lower credit scores than other mortgages. But the much-vaunted program, which began under the GI Bill of 1944, has hit a snag. The Mortgage Bankers Association recently warned the Department of Veterans Affairs that the program may be hurting the very vets it was designed to help.

Here's The Deal. Under the VA loan program, veterans can borrow up to \$417,000 — or \$625,000 in designated “high cost areas,” like parts of California — without putting any money down for a house that will be their principal residence. That's a good deal considering the median home value in the U.S. is currently \$200,700, according to Zillow. Among the program's other attractions, there is no maximum debt ratio — meaning that the borrower's monthly mortgage payment can exceed the typical lender's restriction of no more than 28 percent of gross monthly income. There is no minimum credit score requirement either, while most other home mortgages require a credit score of at least 620 for conventional loans or 580 for most Federal Housing Administration loans. A VA loan can also be used to refinance an existing loan. And vets can get these loans more than once.

The VA home loan program is one of the key reasons that 79 percent of veterans own their own homes, compared with just 63 percent of the non-veteran population, according to Trulia.com. But recent vets don't seem to be taking advantage of the program in large numbers. Just 36 percent said they had applied for a VA home loan in a 2014 survey of 2,000 members of Iraq and Afghanistan Veterans of America. Real estate agents have long complained that the VA's hurry-up-and-wait requirements when it comes to appraisals and inspections, associated red tape and extra hoops to jump through compared with conventional loan programs ultimately hurt veterans' efforts to purchase homes in a competitive market.

Now the Mortgage Bankers Association is highlighting the problem of delays in the appraisals that the VA requires. There is a shortage of available appraisers, which has led to longer wait times and missed contract deadlines. Add the appraiser shortage to the fact that it's just faster and simpler to work with other buyers, and some home sellers and their agents shy away from dealing with VA loans. As a result, the mortgage bankers group said, veterans are under pressure to bypass the benefits of a VA loan and seek conventional financing instead.

Steve O'Connor, senior vice president of the Mortgage Bankers Association, laid out his group's concerns in a 5 SEP letter to the executive director of the VA's Loan Guaranty Service, who oversees the loan program. He said that veterans often can't close a VA loan and are forced “to choose other loan programs to meet certain deadlines or face other adverse outcomes.” Finding alternate home funding means having to come up with as much as a 20 percent down payment, meeting tighter credit standards and walking away from a promised benefit they earned when they put their lives on the line for their country. A non-VA loan can also cost the veteran an additional “tens of thousands of dollars of interest payments over the life of the loan,” O'Connor wrote. The VA did not respond to questions emailed by HuffPost or make a spokesperson available for comment by publication time.

While the Mortgage Bankers Association letter was sparked by anecdotal evidence provided by its members, the group is not the first to note the impact of changes to the appraisal industry — changes that have not set well with current appraisers and may have discouraged new ones from entering the field. Almost 75 percent of the 2,248 appraisers surveyed in a 2017 study from the National Association of Realtors said they planned to leave or have already left the business because of greater regulation and an industry shift away from working directly for lenders

to working for larger companies that manage groups of appraisers. These appraisal management companies take as much as 50 percent of what home buyers pay in appraisal fees.

The Dodd–Frank Wall Street reform law of 2010 put in place new federal guidelines that required banks to have a “firewall” between lenders and appraisers to avoid conflicts of interest. These appraisal management companies blossomed as the new middlemen, but the actual appraisers — the people who do the hands-on work — saw their pay cut. Appraisers also contend they’re unfairly taking the blame when the companies “gouge” buyers with excessive fees, according to housing writer Kenneth R. Harney. So appraisers are unhappy these days, and the assignments they most don’t want to accept are those involving VA loans, according to the National Association of Realtors study. The double whammy of red tape and low compensation was the given reason.

To address the problem, the Mortgage Bankers Association offered a series of recommendations to the VA: use a virtual desktop appraiser to supplement the traditional process of on-site visits, grant property inspection waivers, and lend its support to a proposal from the Appraisal Qualifications Board to reduce licensing requirements. “The damaging impact to the veteran community is clear and the VA should act quickly,” the group wrote. [Source: Huffington Post | Ann Brenoff | October 4, 2017 ++]

GI Bill Update 240 ► Retail Ready Career Center Loses Eligibility

A for-profit trade school in Texas that trained student veterans in heating and air conditioning careers has suspended classes and sent its students packing after losing its eligibility to receive GI Bill funds. The closure of Retail Ready Career Center in Garland, Texas, stems from a Department of Veterans Affairs investigation last week, said Bryce Dubee, public affairs officer for the Texas Veterans Commission. The school closed 27 SEP, providing students with free shuttles to the airport and plane tickets home, according to the Dallas Morning News. An online calendar for the school shows students were two weeks into a six-week training course, which would have ended 20 OCT.

The Texas Veterans Commission, the state approving agency for Retail Ready Career Center, withdrew the school’s eligibility to educate GI Bill recipients after learning the VA had executed a search warrant at the school on 20 SEP, “as it was determined the school no longer met criteria for approval,” Dubee said. It’s unclear whether the school plans to reopen. Neither Retail Ready Career Center nor the VA responded to requests for comment Friday by press time. Veteran students constituted the vast majority of the student population at the school, according to the school’s website <http://www.rrcfuture.com>. Federal data for the latest fiscal year show the school educated more than 1,000 students using GI Bill benefits in 2016 for a total cost of \$28,858,494. The cost of the program includes an iPad Mini, professional tool kit, catered meals and a \$175 dinner allowance, as well as job placement help, according to the website.

The school was not accredited, according to information it provided to Military Times earlier this year. The program was licensed by the Texas Workforce Commission for two courses in computer installation and repair and heating, air conditioning and refrigeration technology. “The Texas Workforce Commission is aware of the situation with Retail Ready Career School and is in communication with our state and federal partners,” Texas Workforce Commission spokeswoman Lisa Givens said in an email. Commission staff are available to answer questions from the students and staff at (866) 256-6333, (512) 936-3100 or career.schools@twc.state.tx.us. Dubee said the VA will contact students about their benefits. And while the veterans commission had not yet received any calls from veterans in need, any students seeking immediate housing or financial help can contact the Veterans Coalition of North Central Texas. [Source: MilitaryTimes | Natalie Gross | September 29, 2017 ++]

GI Bill Update 241 ► Ethics Law suspension Averted

The Department of Veterans Affairs abruptly dropped plans 11 OCT to suspend an ethics law barring employees from receiving benefits from for-profit colleges. The move comes after criticism from government watchdogs who warned of financial entanglements with private companies vying for millions in GI Bill tuition. In a statement to The Associated Press, the VA said it had received “constructive comments” on the Trump administration plan and as a result would delay action.

As recently as 10 OCT, the department had told AP it would implement the rule on 16 OCT, citing the lack of any “significant adverse comment.” It changed its position after it was asked about rising opposition to the plan. “VA has submitted paperwork to the Federal Register today, to be published 13 OCT, so that the notice is withdrawn,” spokesman Curt Cashour said. The VA published the proposal on 13 SEP, calling the 50-year-old law outdated and unfair to VA employees who it said often have no real conflicts of interest. It cited as an example of a VA doctor who receives payment for teaching courses as an adjunct professor.

The federal ethics law, passed in 1966 in the wake of several scandals involving the for-profit education industry, calls for dismissal of any VA employee who receives “any wages, salary, dividends, profits, gratuities, or services” from a for-profit school in which a veteran is also enrolled using VA GI Bill benefits. In interviews this week, veterans groups and ethics experts said the process was rushed, betrayed the will of Congress and gave for-profit colleges an opening to improperly reward VA employees who steer veterans to the schools. They also challenged what they said was limited publicity of the proposed change.

At least four major veterans’ organizations — Student Veterans of America, The American Legion, Veterans for Foreign Wars and Vietnam Veterans of America — urged the VA to grant waivers case by case, something that agency officials had complained as burdensome, rather than issue a blanket waiver covering all 330,000 VA employees. “It’s highly questionable,” said Richard Painter, who served as chief White House ethics lawyer for former President George W. Bush. “The VA has a great big pot of money and every educational institution wants a piece of the action. And there’s no doubt for-profit colleges have a lot of influence in this administration.” Cashour said Shulkin’s proposal was prompted by concerns from VA employees following a July inspector general’s report that found two employees had violated the conflicts of interest law by working as adjunct professors. The IG also recommended issuing waivers case by case.

For-profit colleges have found an ally in President Donald Trump, who earlier this year paid \$25 million to settle charges his Trump University misled customers. Trump’s education secretary, Betsy DeVos, halted two Obama-era regulations to shield students from fraud and predatory actions by for-profit universities. She has also delayed action on tens of thousands of claims for loan discharge from former students at for-profit colleges. The ethics law had already come under criticism. Just two months ago, the Republican-controlled Senate Appropriations Committee urged the VA to re-examine the law saying that it may not address meals and gifts from for-profit colleges as another potential source of conflicts of interest. The committee told VA Secretary David Shulkin to prepare a report on the law’s effectiveness in stemming conflicts of interest within six months.

Carrie Wofford, president of Veterans Education Success, a group that focuses on fraud and abuse of student veterans, noted that for-profit colleges are especially attracted to veterans because of a law that caps the amount of federal funds that colleges can receive. The GI Bill is not considered “federal funds,” which encourages the schools to aggressively recruit veterans. “It’s ugly,” Wofford said, noting that more, not less, safeguards are likely needed to stem abuses. Total government spending on the GI Bill is expected to be more than \$100 billion over 10 years. [Source: The Associated Press | Hope Yen | October 11, 2017 ++]

GI Bill Update 242 ► Flight Training Programs Loophole

Congressmen heard arguments 11 OCT for cutting federal funding given to veterans who attend flight training programs, with some veteran advocates saying the schools use a loophole to charge inordinate amounts for tuition and abuse the GI Bill. Representatives from the Department of Veterans Affairs, American Legion and Student Veterans of America told members of the House Committee on Veterans' Affairs subcommittee on economic opportunity that they were concerned with the amount of money some flight schools charge students who use the GI Bill to pay for their education. According to VA data, one student was charged more than \$534,000 in fiscal 2014 – a cost footed by taxpayers.

“Some may ask why veterans groups would consider legislation that would appear to lower the generosity of the GI Bill,” said John Kamin, a representative for the American Legion. “The answer to this is that we know the road to ruin for the GI Bill begins when we forego our responsibility to ensure it’s an honorable investment of our public dollars.” The Los Angeles Times first reported in 2015 that some companies avoided spending limits the VA places on private schools by working as contractors for flight training programs at public universities, which aren’t subject to caps. Congressmen are considering legislation to close that loophole, and a draft proposal that they discussed Wednesday would impose a spending cap on the flight schools. For private schools last fiscal year, the cap was slightly less than \$22,000 for each student.

In 2016, there were about 1,700 student veterans enrolled in flight training programs at a cost to the GI Bill of about \$48.5 million. “While some veterans choose to pursue a vocation in flight programs, these programs continue to operate at levels requiring vastly more resources than limits on vocational training costs,” said Will Hubbard, vice president of Student Veterans of America. “Veterans who desire a career in aviation should be able to achieve those goals, and not at the expense of the sustainability of the GI Bill.”

In written testimony, Matthew Zuccaro, president of Helicopter Association International, wrote his organization supported tightening regulations to prevent abuse by flight programs. However, Zuccaro, an Army helicopter pilot in the Vietnam War, also wrote spending caps would “unfairly impact the ability of veterans” to pursue pilot jobs and veterans would face a “discriminatory financial burden.”

The House already passed legislation in 2016 to address GI Bill spending on flight programs, but the measure was dropped in the Senate. Rep. Beto O’Rourke (D-TX) and Rep. Mark Takano (D-CA) asked for urgency Wednesday to pass the bill again. “We have to have a GI Bill that’s sustainable,” Takano said. “We simply cannot sustain this kind of expense.” [Source: Stars & Stripes | Nikki Wentling | October 11, 2017 ++]

VA ID Card Update 10 ► New Photo Cards Available in NOV 2017

All honorably discharged veterans of every era will be able to get a photo identification card from the Department of Veterans Affairs starting in November due to a law passed in 2015. The law, known as the Veterans Identification Card Act 2015, orders the VA to issue a hard-copy photo ID to any honorably discharged veteran who applies. The card must contain the veteran's name, photo and a non-Social Security identification number, the law states. A VA official on 4 OCT confirmed the cards are on track to be available nationwide starting in November. Veterans may apply for the card online, but a timeline for how long it will take to receive a card after application has not been finalized, the official said.

Although the law states that the VA may charge a fee for the card, the official said no fee is planned. The change comes as the military exchange stores prepare to open online shopping to all honorably discharged veterans starting 11 NOV. Veterans who wish to use that new benefit must be verified through VetVerify.org. Congress passed the ID law as a way to help veterans prove their service without showing a copy of their DD-214. "Goods, services and

promotional activities are often offered by public and private institutions to veterans who demonstrate proof of service in the military, but it is impractical for a veteran to always carry Department of Defense form DD-214 discharge papers to demonstrate such proof," the law states.

Some veterans already carry such proof of service. Those who receive health care from the VA or have a disability rating can get a photo ID VA health card, also known as a Veteran Identification Card. Military retirees also hold an ID card issued by the Defense Department. Veterans are also able to get a proof of service letter through the VA's ebenefits website. And some states will include a veteran designation on driver's licenses if requested. [Source: Military.com | Amy Bushatz | October 4, 2017 ++]

VA Emergency Room Care Update 02 ► VA Technique Cuts Wait Times

Veterans Health Administration hospitals around the country are adopting a Pittsburgh-developed technique for reducing emergency room waits and making sure vets can quickly see a specialist after an ER visit. Twenty-six sites are now using VA Pittsburgh's Rapid Access Clinic model, and every site in the system with an emergency department could adopt it over the next year, says Dr. Susan Kirsh, a VA national director for clinical practice management. The model targets patients who in the past might have waited hours to see a specialist only to undergo a simple procedure, such as getting a cast, before leaving with instructions to make a followup appointment, says Dr. Ali Sonel, VA Pittsburgh's chief of staff. Waits for specialists can grow long if the doctors are busy with surgeries or treating more serious injuries, and some patients with relatively minor maladies would leave the ER without treatment, Sonel says.

Front-line ER doctors now identify patients with a list of common conditions — such as a fracture, blood in urine, a tendon rupture or swollen joints — and treat them without calling in the specialist. Emergency department staff then schedule followup appointments for the patients before they leave. Sonel says the idea for the clinic emerged from discussions in late 2013 about how to reduce wait times. A national scandal erupted in 2014 over long waits for veterans in some states to get appointments with VA doctors, with some veterans dying while waiting. “The thing that we were trying to solve at the time was not keeping the patient in the (emergency department) any longer than they had to be there,” he says.

The clinic, launched at the beginning of 2015, has reduced the number of patients who leave the emergency department without being seen to 1 percent, down from 5 percent, Sonel says. The national target is 4 percent, he says. “We save the specialist time and save time for the patient,” he says. The clinic has not reduced the overall time it takes to get treated and leave the emergency department, but has reduced wait times for individual patients with certain conditions, a VA spokesman says in an email. “More and more organizations are looking at doing this sort of thing, but it's much easier said than done,” says Kenyokee Crowell, senior vice president of clinical access for Allegheny Health Network (AHN).

Crowell says the network has adopted a process similar to the VA's for emergency room patients who need to see a cardiologist. The network discharges some patients with low-acuity chest pain with an appointment to see a cardiologist within 72 hours, Crowell says. She says AHN aims to have the model in place across its hospitals by the end of the year, and is evaluating other health conditions that could be handled in the same way. “We do have plans to continue building upon that, and hopefully to move toward a model like the VA has,” she says. University of Pittsburgh Medical Center (UPMC) hospitals use several strategies to reduce wait times, spokesman Rick Pietzak says in an email. At UPMC Presbyterian, consulting specialists schedule follow-up appointments before the patients leave the emergency department for certain conditions, Pietzak says. Other specialties reach out to patient proactively to schedule follow-up appointments or tests, he said.

The VA Pittsburgh model requires more coordination between the emergency department and specialist offices to make sure the specialists keep enough slots open, Sonel says, and relies on emergency room doctors to identify which patients still need to see a specialist in the emergency department and which don't. "It seemed in some ways simple, and in some ways it was really quite innovative," Kirsh says of the Pittsburgh model. "It's just chipping away at this, taking one piece at a time, each one iteratively improves the system as a whole." [Source: Tribune-Review | Wes Venteicher | October 2, 2017 ++]

VA Telehealth Update 12 ► **Anywhere to Anywhere VA Health Care Initiative**

The Department of Veterans Affairs is moving forward with a plan to enable VA doctors to treat veterans through telehealth no matter where the doctor or patient are located, essentially overriding state laws. Officials said the [28-page proposed order](#), unveiled on 29 SEP under the VA's Anywhere to Anywhere VA Health Care Initiative, aims to boost the number of veterans using telehealth and telemedicine to access needed healthcare services, especially mental health services. It would give VA doctors the authority to use telehealth and telemedicine to treat veterans regardless of state guidelines on originating sites or licensing requirements.

It also could be seen as a veiled criticism of the mishmash of state laws regulating telehealth and telemedicine, which often do more to curb new healthcare services than promote them. "In an effort to furnish care to all beneficiaries and use its resources most efficiently, VA needs to operate its telehealth program with healthcare providers who will provide services via telehealth to beneficiaries in states in which they are not licensed, registered, certified, or located, or where they are not authorized to furnish care using telehealth," the proposed order states. "Currently, doing so may jeopardize these providers' credentials, including fines and imprisonment for unauthorized practice of medicine, because of conflicts between VA's need to provide telehealth across the VA system and some states' laws or licensure, registration, certification, or other requirements that restrict or limit the practice of telehealth.

A number of states have already enacted legislation or regulations that restrict the practice of interstate telehealth, as discussed below in the Administrative Procedure Act section." As a result, VA officials say, many VA centers aren't expanding their telehealth and telemedicine programs to non-federal locations, such as the patient's home or the doctor's home. And VA doctors are reluctant to take on telehealth for fear of running into conflicts with state laws. "This proposed rulemaking would clarify that VA healthcare providers may exercise their authority to provide care through the use of telehealth, notwithstanding any state laws, rules, or licensure, registration, or certification requirements to the contrary," the proposed rule states. "In so doing, VA would exercise federal preemption of state licensure, registration, and certification laws, rules, regulations, or requirements to the extent such state laws conflict with the ability of VA healthcare providers to engage in the practice of telehealth while acting within the scope of their VA employment."

"Preemption would be the minimum necessary action for VA to furnish effectively telehealth services because it would be impractical for VA to lobby each state to remove its restrictions that impair VA's ability to furnish telehealth services to beneficiaries and then wait for the state to implement appropriate changes," the rule continues. "That process would delay the growth of telehealth services in VA, thereby delaying delivery of healthcare to beneficiaries. It would be costly and time-consuming for VA and would not guarantee a successful result."

According to the VA, some 702,000 veterans, or 12 percent of the country's veteran population, used telehealth or telemedicine in FY 2016, accounting for 2.17 million telehealth episodes. Of that group, 45 percent were living in rural communities. "The data collected in FY 2016 demonstrates that telehealth, particularly in the mental health context, improves patient care and improves patient outcomes," the proposed order points out. "In FY 2016, there was a 31 percent decrease in VA hospital admissions for beneficiaries enrolled in the Home Telehealth monitoring program for non-institutional care needs and chronic care management. Also, beneficiaries who received mental

health services through synchronous video telehealth in FY 2016 saw a reduction in the number of acute psychiatric VA bed days of care by 39 percent.”

Other benefits, the VA said, include improvements to remote monitoring for veterans with limited mobility or difficulties traveling to a healthcare provider, and its use as an incentive to recruit more VA healthcare providers, thereby reducing a national shortage.

[The proposal surfaced](#) when VA Secretary David Shulkin unveiled the Anywhere to Anywhere VA Healthcare Initiative in August, in a ceremony attended by President Donald Trump. At that time he also announced the nationwide roll-out of the Veteran Appointment Request (VAR) app, which allows veterans to use their smartphone, tablet or computer to schedule or modify appointments at VA facilities. “What we’re really doing is, we’re removing regulations that have prevented us from doing this,” he said. “We’re removing geography as a barrier so that we can speed up access to Veterans and really honor our commitment to them.” Shulkin garnered support from, among others, the American Telemedicine Association – which has scheduled him as a keynote speaker at its ATA Edge conference next week in Washington D.C. – and Sen. Joni Ernst (R-Iowa), whose bill, the [Veterans E-Health & Telemedicine Support \(VETS\) Act of 2017](#), seeks to give VA doctors that same authority.

“The VA’s decision to allow veterans to access care from the comfort of, or closer to, their own homes is necessary to improving quality and timely care for the more than 200,000 veterans in Iowa, particularly those who are disabled or reside in rural communities,” Ernst, a National Guard veteran, said. “It is critical that we continue to create opportunities for veterans to receive the best care out there, including potentially life-saving mental healthcare. Improving the VA’s telehealth program is critical, and I am thrilled to see this common-sense measure will be put into action to benefit Iowans and veterans across the country.” The industry trade group Health IT Now also supports the measure.

“This proposed rule will be instrumental in breaking down geographic barriers that, for too long, have prevented our nation’s heroes from accessing the care they need where they need it,” Joel White, the group’s executive director, said [in a Sept. 29 blog post](#). “By allowing VA telehealth providers to more easily treat patients across state lines, we can ensure that recent advances in technology-enabled care reach the most deserved among us and spur better outcomes for the 20 million veterans in the VA system today.” Supporters also say the success of such a program could help spur efforts to create a national licensing framework for healthcare providers, such as the [Interstate Medical Licensure Compact](#) for doctors and similar compacts [for nurses](#) and [physical therapists](#). It might also spur state medical boards to collaborate more freely on national telehealth and telemedicine standards. But the proposal may draw complaints from state officials and national physicians’ groups interested in preserving each state’s right to regulate telemedicine and telehealth inside its borders.

During Congressional deliberation last September on the National Defense Authorization Act for FY 2017, the American Medical Association and American Academy of Family Physicians lobbied against a telehealth benefit for the TRICARE program that would have designated the originating location for certain telehealth services to be the physician’s location, instead of the patient’s location. They argued the legislation would enable physicians treating military personnel and veterans to skip state licensing laws when treating patients via telehealth.

[In a Sept. 1 letter to Congressional leaders](#), AAFP Board Chairman Robert L. Wergin, MD, warned that the Senate version of the bill “portends a troubling scenario under which state licensing boards will lack the authority to discipline physicians who are practicing medicine within that state’s borders.”“While this language would indeed ease barriers that hinder the free flow of telehealth services, it also would undermine the existing system of medical licensure, under which each state governs the practice of medicine within its borders,” Wergin wrote. “Allowing physicians with a single license to treat TRICARE beneficiaries in any state via telemedicine would create episodes of medical care that the state in which the patient resides cannot readily regulate, if at all.” The Defense bill [was eventually passed without the telehealth provision](#). The proposed order was scheduled to be published in the National Register on Monday, 2 OCT. The public comment period will last 30 days. [Source: mHealth Intelligence | Eric Wicklund | September 29, 2017 ++]

PTSD Update 233 ▶ Former Ineligible Veterans May Qualify

A new federal policy could help veterans with Post Traumatic Stress Disorder (PTSD), and who are presently ineligible for benefits, get the medical care and benefits they need. The Department of Defense set down new guidelines to work with veterans who are trying to upgrade discharges to get medical help. This new set of guidelines is for veterans who have been diagnosed with PTSD or who do not realize they have PTSD. The DOD says this is in large part for veterans from the Vietnam War who were discharged without any record of having PTSD because it wasn't understood in that time. So, unless they get diagnosed by a private doctor, they cannot be reinstated for help with their PTSD if they were declared ineligible with their discharge. The new guidelines don't mean every single veteran will get their benefits. It just means a review board will take PTSD cases under special consideration. Without these guidelines it was nearly impossible to get benefits reinstated after they were denied. [Source: USVCP Newsletter | September 28, 2017 ++]

VA PTSD Claim Support Update 03 ▶ How to Pursue A Claim

USVCP newsletter advises it is important that veterans pursuing a claim for posttraumatic stress disorder (PTSD) understand the bureaucratic process they must navigate toward their goal. PTSD is a psychological injury with political overtones. Due to the egregious injustices to Vietnam veterans during the 60s and 70s, the collective repair of mental health professionals today is to ensure that all veterans are given the benefit of doubt. Veterans of Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) are three times as likely to get a diagnosis of PTSD then veterans of the Persian Gulf War, Vietnam, Korea or World War II. Not because they actually have the disorder as understood in the Diagnostic and Statistical Manual for Mental Disorders (DSM), but due in part to mental health professionals wanting to “make up” with veterans from all war eras.

Due in part to guilt from mental health professionals, the overwhelming numbers of veterans filing for PTSD claims, and a well crafted strategy, it is pretty easy to get diagnosed with PTSD. Here's how. **Keep in mind, real or imagined your experiences are your realities.** Therefore, when visiting a psychiatrist or psychologist in the civilian sector or your local Veterans Affairs (VA), you need to make sure your story is “heard.” Mental health staff see many veterans and clients everyday, and inherent in this process is a tendency for mental health staff to go “intellectually numb.” That is, your story is a blur in a long line of very similar stories. The details get lost, and it is perceived with subtle indifference by mental health staff. So, it is very important to make your story stand out. This does not mean to lie or deviate from the truth, what it suggests is for you to inject some degree of hyperbole. The squeaky wheel gets the oil in any bureaucracy.

Who To See For A Confirmed Diagnosis

In order to get a diagnosis for PTSD, you must visit with a psychiatrist or a psychologist (PhD level). They will assess you for certain criteria which will qualify you for PTSD or rule you out. Typically, the psychiatrist or psychologist you visit with will be at your local VA or an outside contractor.

Getting An Appointment

Calling the mental health department at your local VA and requesting an evaluation for PTSD is not good enough. You need to integrate yourself in the system. You do this by contacting the mental health department and inform them that you have a set of symptoms that might suggest PTSD. For instance, inform them you are having nightmares about war trauma, anxiety attacks when you are in crowded places, anger outbursts for minor issues, and that you are so depressed about issues from the war that you cannot sleep. Also, you may want to let the intake

coordinator know that you are so immobilized by your depression that you have no energy. That should be enough to get you an appointment for an evaluation.

How To Dress For Interview

Those with PTSD are so psychologically fragile and emotionally upset by their trauma that personal hygiene takes a back seat. Understand, to set the tone that you are suffering from this intense psychological injury, you must dress the part. A disheveled appearance works best. Unshaven face (for men), uncombed hair, mismatched clothing, dirty nails, tattered clothing, and a few days without a bath or shower will make the impression you need. Also, deprive yourself of sleep. Red, bloodshot eyes project trouble to mental health professionals. Try to get an appointment for Monday. That way, you have the weekend to excuse away hygiene of any sort.

Case in point. USVCP knows of a veteran who visited a psychologist at his local VA dressed in a beautifully tailored suit. As if going for a job interview. And another veteran who followed the prescription above. Needless to say, the veteran who followed our advice was given a diagnosis of PTSD and later awarded a service-connected rating of 100% for the psychological injury.

The Interview

During your intake assessment interview with the mental health professional you will be under a psychological microscope. Some mental health professionals make a concerted effort not to make you feel as though you are being scrutinized. Either way you look at it, you are being scrutinized. Their job is to rule you out for PTSD. Your job is to prove to them that you have PTSD. For instance, part of their assessment is to determine if you have good eye contact. If you do, in their clinical view, you are on the road to recovery, if not totally cured. One cagey veteran made it known to us that he always averts direct eye contact with his psychiatrist. In our opinion, this is a good strategy. Direct eye contact suggests a healthy self-image and good self-esteem. Veterans with PTSD do not have such attributes. Also, you want to give the impression of being distant and detached. In the mind of a mental health professional, this is a symptom of PTSD.

At some point during your interview the mental health member will ask you about your sleep. Veterans with PTSD are bombarded with nightmares, restless sleep patterns, and very little sleep. You need to let the mental health member know who is interviewing you that you are afraid to go to bed for fear of dreaming about war trauma. You also want to let them know that your significant other is afraid to sleep near you because of your violent and abrupt sleepwalking events. Additionally, your night sweats has caused you to be alarmed by the intensity of your dreams as well. Your mental health professional will see these as definitive signs and symptoms of PTSD.

You want to inform the psychologist that upon waking from your violent nightmares that you then conduct reconnaissance missions around your home. You check the windows, doors, under the bed, in all closets, and the perimeter. You inform the clinician you are looking for the enemy. Your mental health professional will see this as hypervigilance, a sure sign of PTSD.

Intense psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event is another surefire sign of PTSD. Vietnam veterans with PTSD often recall certain smells that remind them of war trauma. For instance, odors closely related to Asian spices bring back intense traumatic memories for Vietnam veterans. For OIF/OEF veterans, a common environmental cue that reminds them of war trauma is the contour of geographical landscapes. Especially those veterans that live in the West (i.e., California, Nevada, New Mexico, Arizona, and West Texas). Also, many OIF/OEF veterans experience intense anger outbursts from traffic jams. We learned of several Iraqi veterans who informed doctors that driving around the Middle East meant driving as fast as they wanted, any time they wanted. Also, road rules of any sort did not exist. For obvious reason, following any such road etiquette could have gotten them injured or killed. When back in the states, these veterans perceived road rules and congestion on the road as a sign of imminent or immediate danger. Therefore, road rage is another probable indicator of PTSD. If you are an OIF/OEF veteran make sure and tell the clinician you cannot tolerate driving.

Veterans of both Vietnam and OIF/OEF with PTSD show signs of detachment from loved ones and friends. Getting emotionally and psychologically attached to others in the combat zone can make veterans vulnerable. This defense mechanism helps veterans protect themselves from the pain of loss. It is important to let your psychologist know that you are afraid to connect with loved ones. You find it difficult to establish meaningful relationships since you departed the war zone. This is another key marker of PTSD.

Alcohol abuse is another characteristic of PTSD. Why? The pain, suffering, and psychological turmoil you are struggling with is often drowned in booze. Many veterans with PTSD consume alcohol to mask depression, reduce anxiety, or divert their feelings. Albeit, this is not a good way to fight against PTSD, but those with PTSD abuse alcohol often. Again, another symptom of PTSD.

Those veterans diagnosed with PTSD who experienced multiple combat traumas often suffer with “survivors guilt.” They often ask themselves, “How did I survive when others did not?” Or, “Why I am alive? The other guys that died were so much more deserving of life.” Tree hugging mental health professionals will certainly sympathize with those veterans who show signs of survivor’s guilt.

Lastly, during your interview it is important to note that all of your symptoms occurred after your tenure in the war zone. Before heading to war, you were happy, extroverted, and positive about your future. This suggests to mental health professionals that war trauma has changed you in dramatic fashion.

Understanding Your GAF Score

After your interview, the mental health professional who did your assessment will provide you with a GAF score. The Global Assessment of Functioning (GAF) is a measure of your immediate daily functioning. It is a score from 0-100. The higher the score the healthier you are, psychologically speaking. Veterans with PTSD generally have a GAF score of 40 – 49. Once your interview is completed you may want to ask your interviewer what GAF score they assigned you. If you receive a score over 60, you may want to inject a well rehearsed, “Oh, I forgot to tell you...”

Developing A Documentation Trail

So much of making the bureaucratic evaluation system work is to “play the game.” The mindset of VA mental health professionals is such, that if you are not actively working on helping your condition, then you do not have a condition. If a veteran is not involved in individual or group psychotherapy, then, according to VA personnel, that veteran does not have a condition. If PTSD has been previously diagnosed and the veteran refuses treatment or rarely attends treatment, then that veteran is in jeopardy of losing his or her benefits.

When pursuing service-connected benefits a veteran must show that he or she is attending treatment programs offered by the VA. Vet Centers are great vehicles for developing documentation trails. Your local Vet Center will help you put together the documentation you need to show proof that you are interested in working on your PTSD. After several weeks of attending group or individual therapy, your therapist at your local Vet Center can provide you with a 2-3 page letter illustrating your involvement in the Vet Center program. Moreover, one of the side benefits of utilizing Vet Center programs is the education you get from other veterans about the benefits process. Vet Center environments are much more relaxed than VA run programs. Veterans are free to discuss issues related to benefits in an open forum. We know of many veterans who have attempted to secure PTSD benefit for years. Once engaged in the Vet Center program these veterans went from 0% rating, to 60% rating and more.

PTSD Residential Treatment Programs

Veterans who have been diagnosed with PTSD have great leverage in increasing their ratings. If you are less than 100% service-connected for PTSD, talk to your VA psychiatrist, psychologist or Vet Center therapist about PTSD residential programs. If you can get away from work or home for 6-7 weeks, one of many inpatient PTSD residential programs may be of interest to you. Such programs reimburse you at 100% while you are in the program, and some will pay travel reimbursement. The programs are designed to provide you with additional strategies for living with PTSD. One might assume that such programs are emotionally and psychological intense.

Nothing could be further from the truth. One veteran put it this way; “I loved my time in Little Rock. It was a 7-week respite. I had my own room, we had daily outings to local restaurants and movie theatres. I made some great arts and craft items. It was great! I want to go back.”

MST Veterans

Recently, the VA has recognized Military Sexual Trauma (MST) as a compensable condition. Due to the sensitive nature of this condition it is obvious as to why this issue does not require any documentation. Also, one might be surprised to learn that many men have been diagnosed with this compensable condition. Common trauma that arises from MST issues is rape and sexual harassment. Many women feared reporting such events while in uniform for fear of jeopardizing their careers. Years later, these stories are being reported to VA staff, and men and women are being compensated in large numbers. Many receive ratings of 70% and more in a matter of just a few months. We have learned that military men have reported rape, sexual harassment, and sexual abuse events. For instance, one young Marine reported that members in his unit attempted to insert carrots in his anus as part of some tacit hazing ritual. Of course, no one can prove or disprove this event. Nonetheless, he now receives 100% service-connected compensation.

Bottom line, if you have been sexually abused or think you may have been sexually abused report it as soon as possible. Also, make sure and report to your Veteran Service Officer (VSO) that you are interested in a claim for MST. MST compensation is ridiculously easy to secure. No one will ever question you about your story. No one! Most Vet Centers have specially trained counselors who work with MST clients. They want to help you get compensated for your trauma.

[Source: USVCP Newsletter | September 28, 2017 ++]

VADIP Update 04 ► Dental Program Enrollment Begins 15 NOV

On 28 SEP the Department of Veterans Affairs (VA) announced that it has selected Delta Dental of California and MetLife to once again offer private dental insurance plans as part of the VA Dental Insurance Program (VADIP). The program was extended until Dec. 31, 2021, by the VA Dental Insurance Reauthorization Act of 2016. “It is important to provide this care to eligible Veterans, especially those who need lower-cost insurance,” said VA Secretary Dr. David J. Shulkin. “VADIP underscores our commitment to support America’s Veterans and their family members.”

Veterans enrolled in the VA health-care system and beneficiaries of the Civilian Health and Medical Program of the VA (CHAMPVA) can enroll in the program beginning Nov. 15, 2017, for coverage to start Dec. 1, 2017. VADIP offers eligible individuals the opportunity to purchase discounted dental insurance coverage, including diagnostic services, preventive services, endodontic and other restorative services, surgical services and emergency services. Individuals who enroll in one of the dental insurance plans will pay the entire premium in addition to the full cost of any copayments. Enrollment is voluntary and does not affect eligibility for VA outpatient dental services and treatment. The plans are available to eligible individuals in the United States, the District of Columbia, Puerto Rico, Guam, the U.S. Virgin Islands, American Samoa and the Commonwealth of the Northern Mariana Islands.

Delta Dental and MetLife previously offered insurance plans as part of the three-year VADIP pilot program. Coverage under the VADIP pilot began Jan. 1, 2013, and more than 115,000 Veterans and CHAMPVA beneficiaries enrolled in the program before it expired in January 2017. Individuals who enrolled in a plan during the pilot period must select and enroll in one of the new plans offered by Delta Dental or MetLife. While the insurance providers will remain the same, plan options, fees and other factors may have changed from those offered during the pilot. For more information, visit www.va.gov/HEALTHBENEFITS/vadip or call 877-222-VETS (8387). [Source: VA News Release | September 28, 2017 ++]

VA Lawsuit | Togus Veteran's Hospital ► Foot/Ankle Care

Six Maine veterans are suing the U.S. Government for medical malpractice, after they say a podiatrist at Togus Veteran's Hospital practiced negligent foot and ankle care. Whether the lawsuits move forward hinges in part on this question: Did the U.S. Department of Veteran's Affairs fraudulently conceal it? That's now up to a judge to decide. "They very much trusted that they would get good care at the VA," said David Lipman, an attorney representing two of the veterans.

One of Lipman's clients is April Wood, a U.S. Army veteran who was honorably discharged after injuring her ankle in a training exercise. Court records show a doctor at Togus Veterans Hospital in Augusta performed surgeries on Wood in 2006 and 2009, but Lipman said her injuries only got worse after the surgeries, and she eventually elected to have her leg amputated. "She's a woman in her forties," said Lipman. "The pain was so bad she could not endure it. She was living in a wheelchair. She lost her leg and she will have no leg for the rest of her life."

According to court documents, officials at the VA told Wood in 2013 that her original surgeon provided negligent care. That doctor was suspended and then resigned in 2010. "Unknown to them, in 2010, the VA here in Augusta, Togus, became suspicious," Lipman said. According to a brief filed in court, the VA reviewed 431 of that doctor's surgical cases, and by 2012, concluded that more than half of patients were at risk of potential or actual harm. "This is not something that just involves a few people," Lipman said. "It was a massive problem." Wood first filed an administrative claim seeking compensation from the VA, but it was denied.

Curt Cashour, press secretary for the VA, said "In reviewing each claim, VA conducted a thorough investigation of each claim, including expert medical opinions, in order to determine if the care provided was sub-standard or caused injury. When that was the case, VA took steps to settle. Where there was no clear-cut evidence of substandard care, VA denied the claim." Now, Wood, and five other veterans with similar stories, have filed lawsuits against the government. Under Maine statute, the lawsuit has to be filed within three years of the medical procedure, so the statute of limitations is up. However, Lipman said there is an exception if the veterans can prove one of two things. "Whether they fraudulently concealed it or whether there's a special relationship between the VA and its patients and they had a duty to tell the patients," Lipman said.

Cashour said they expect the court to rule on that question shortly, and they have made changes "to hold employees accountable and to be transparent with our findings and actions." "The defense that they're giving is that they were negligent and incompetent, not deliberate," said Lipman. Oral arguments are scheduled for 25 OCT, with the judge's decision to follow. If dismissed, Lipman said the plaintiffs will appeal to first circuit. He said this is a case that could end up in front of the U.S. Supreme Court. [Source: CBS 13 WGME | Marissa Bodnar | October 12th 2017 ++]

VA Conflict-Of-Interest Law ► Push To Suspend 50-Year-Old Ethics Law

The Department of Veterans Affairs is pushing to suspend a 50-year-old ethics law that prevents employees from receiving money or owning a stake in for-profit colleges that pocket hundreds of millions of dollars in tuition paid through the G.I. Bill of Rights. The agency says the conflict-of-interest law — enacted after scandals enveloped the for-profit education industry — is now redundant and outdated, with “illogical and unintended consequences” affecting employees who have no real conflict of interest, such as a V.A. doctor teaching a course at a school attended by veterans with educational benefits.

Veterans' groups and ethics experts reject those arguments and say the department is abandoning protections for veterans and taxpayers. They worry that the effort is part of a larger rollback of federal safeguards that were instituted before President Trump took office to combat abuses and fraud by for-profit colleges. Several officials who worked in the for-profit college industry and had criticized the Obama-era crackdown as excessive, for example, have joined the Education Department, which administers and polices the federal student loan program and the industry.

The proposal to suspend the ethics law was published in the Federal Register in mid-September and is scheduled to take effect on 16 OCT, but no public hearings have been scheduled and no public comments have yet been submitted. "It's just reckless and sloppy," said Walter M. Shaub Jr., a former director of the Office of Government Ethics, said of the agency's action. He questioned why such a blanket exception for more than 330,000 agency employees should exist when the law allows waivers for individuals or even classes of individuals, like those teaching courses. Invoking the waiver also requires public hearings, he said. Most troubling to Mr. Shaub, now senior counsel at the nonpartisan Campaign Legal Center, is that the move seems like an attempt by the executive branch to overrule the legislative branch. "They are saying the statute is unreasonable, but that's not for them to say," he said of agency officials.

Curtis Cashour, a V.A. spokesman, said officials had focused on the ethics law after the agency's inspector general investigated complaints this year that two V.A. employees were teaching at a for-profit institution. There were no significant conflicts and a waiver was ultimately granted, he said, but the report led to worries among many employees about the impact of more rigorous enforcement. "Our response was aimed at easing the concerns of numerous V.A. employees," Mr. Cashour said in an email, adding that the ethics law had been superseded by subsequent conflict-of-interest statutes.

One concern of critics is that officials at the organization's upper levels could be making decisions about a college in which they have a financial interest, like permitting a school with a record of abuses to recruit at military bases. Another is that people advising veterans about their educational benefits could steer students to a particular school because they were on the payroll. "There's no good that can come from allowing colleges to have unseemly financial entanglements with V.A. employees," Carrie Wofford, director of Veterans Education Success, a nonprofit advocacy group. "Congress enacted a zero tolerance for financial conflicts of interest for V.A. employees precisely because Congress uncovered massive fraud by for-profit colleges targeting veterans." She added that "student veterans were already facing an aggressive rollback of their protections under the Trump administration's Education Department."

Two months ago, the Republican-led Senate Appropriations Committee issued a report during its debate over the military budget instructing the department to review the statute — but its concern was that the current rules "may be inadequate to identify conflicts of interest that can develop" because of gifts or expensive meals. Veterans are particularly valuable as potential students: There are limits on the federal funds that for-profit schools can receive, but money from the G.I. Bill is not counted. Even before last year's presidential election, some of the biggest veterans and military organizations were urging the department to better monitor for-profit colleges that were misleading veterans about the costs and benefits of enrolling, and violating legal and regulatory standards. And a report issued in July by the director of the agency's Education Service found that financial issues involving tuition and fees were by far the leading complaint among students who had called the agency's G.I. Bill hotline since 2014.

Some ethics experts disagreed with the department's contention that other federal statutes made the ethics law unnecessary, saying the agency's rule sets a higher bar, requiring, for example, more public review. Dozens of other agencies also have supplemental ethics rules that have been written to address potential problems specific to those agencies. Senator Patty Murray, Democrat of Washington, and a longtime advocate for veterans, said she planned to look into the agency's decision. "I am deeply concerned the V.A. is opening the door for predatory for-profits to take advantage of men and women who have bravely served our country," she said. [Source: The New York Times | Patricia Cohen | September 29, 2017 ++]

VA Compensation & Benefits ► Problem Solving Program Q&A -- 13 thru 16

Question #13:

I have nerve problems and bad circulation in my feet and lower legs. I also have drop foot. I wear special shoes and leg braces to keep me stable when walking and standing. This is SC. I am 100% T&P. Would I qualify for special compensation such as loss of use of foot etc.?

A1: You can file for loss of use or SMC-K which give you an additional \$104 above your 100%. (CP) 3/30/2016

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Question #14:

I have been in the VA medical system for eight years and go to my Primary provider Doctor there. If I need to file a claim for a residual condition from a previous closed claim do I ask the VA Doctor or go to an outside Doctor for consultation of the problem? The VA Doctors don't say much about helping you with a claim. Is this normal? I am a Vietnam vet with a service connected claim awarded for lung cancer in 2011, now I have residuals resulting from the cancer and surgery of removal of lower lobe.

A1: Since you are already SC for lung cancer and assume it's due to Agent Orange, all you really need is a statement from your Oncologist stating your residuals are due to lung cancer. If you have a good relationship with your PCP, ask him/her if they would consult with your oncologist about this request. (CP) 3/30/2016

A2: File your claim now....don't wait....there will be time to collect all the supporting documentation. You will be required to get evaluated anyway regardless for current doctor statements. (LG) 5/21/2016

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Question #15:

I am a retired 100% (+) Disabled Combat Military (Line Officer)Veteran. I am receiving disability compensation. Further, I am a Hip Disarticulation, with Heart, Kidney, Hypertension, Hearing, Eyes, Foot medical Problem which renders me wheel-chair bound. My wife of sixty-one years provides 80% assistance to me; e.g., meal preparation, shopping, clothes washing, household chores related to me, errand running, intermittent personal sanatorium services, wound care (foot, and residual limb) and other daily living matter which I am incapable of performing.

QUESTION: Is my wife authorized VA Compensation as she is my daily, personal healthcare provider, to include her services as my interpersonal relations person?

A1: Your wife could very well be entitled to aid and attendance compensation. Go to this link and look up aid and attendance it will tell you about it. (BD) 3/30/2016

A2: You can follow the link http://www.va.gov/healthbenefits/resources/caregiver_eligibility_check.asp and call if more information is needed. (CP) 3/30/2016

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Question #16:

I was on active duty USN 10/1963 - 12/1970. I just read that "1957 through 1977" Veterans of this period are credited with \$300 in additional Social Security earnings for each calendar quarter in which they received active duty basic pay. It sounds like this would apply to me. How should I proceed in inquiring about this?

A1: Social Security has reported they have completed doing this for all veterans during this time. However, call Social Security and ask to make sure. (CP) 3/30/2016

A2: I would take my DD-214 to the Social Security office. They make sure you are corrected. (RJ) 4/4/2016

A3: To be sure, make an appointment with social security and take your DD 214 to ensure you are squared away. (LG) 5/21/2016

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Problem Solving Program (PSP)

Have a question about the VA? Need help with benefit questions? Need answers to your compensation questions? Use the Problem Solving Program (PSP) to get answers. Submit your question at <http://www.veteranprograms.com/compensation.html> and allow an experienced veteran(s) or VSO to answer your question. Use the PSP as often as you like. Your question will be sent to over 125,000+ [registered](#) USVCP veterans, government employees, veteran organizations, and military supporters.

[Source: USVCP | <http://www.veteranprograms.com/id2460.html> | October 15, 2017 ++]

VA Health Care Access Update 57 ► Tips to Reduce Wait Time

Wait times at Veterans Affairs medical centers continue to be an issue. Here are a few tips to help save you time and energy as you manage your way through the VA:

- 1. Schedule your appointment first thing in the morning or right after lunch.** Many doctors, outside of the VA, are bound by quotas and have to see as many patients as possible. VA doctors focus on quality instead of quantity. Because of this, they tend to run over scheduled times. Making an appointment for either first thing in the morning all but guarantees that you'll be seen on time.
- 2. Have a referral to a specialty clinic? Schedule that appointment yourself!** Don't wait around for the clinic to call you, this could take a while. Sometimes the VA just automatically schedules you for your appointment, but you can always take control of this. Ask the physician or nurse for the number to the clinic. You can either call or go there in person and let them know you have a referral and set up an appointment time that works best for you.
- 3. Ask for an appointment tomorrow.** According to the VA, the majority of veterans receive their appointments within 14 days of the desired date. That's a rather odd statement because when was the last time you were asked and not told when you could have your appointment? It never hurts to ask for a specific appointment time and from what I hear, it works a good amount of times too.
- 4. Use MyHealtheVet** (<https://www.myhealth.va.gov/mhv-portal-web/home>) secure messenger to talk to your physician. Need an appointment? Just have a question? Need to check your appointment schedule? Want to refill your meds? You can do all of this by downloading the VA's MyHealtheVet app. Every VA facility has a coordinator who can help you with any issues that come up with the app and most staff can help you if you have a technical problem. If you haven't tried this yet, from what I hear it's a game changer!
- 5. Choose a different VA.** You have the right to go to any VAMC you choose. If you don't like the one closest to you, try another one. You can use the VA's Access to Care site to check wait times for all VA facilities. And this breaks down into types of care too.
- 6. Go to the emergency room if you need anything.** If you can't wait, use the emergency room at the VAMC closest to you. If they can't help you, they'll at least get a referral in for you. This isn't something you should do every time you need to see a doctor! But if your condition is getting worse, go get help!

7. Use the kiosks. You can check in for an appointment or look for future ones by using one of these kiosks. They are in VAMC’s and outpatient clinics. Most facilities have staff that will show you how they work. Soon you’ll even be able to pay your copay through one as well! The kiosk will even tell you if you’re in the right place or not.

8. Prepare and double check! Show up with a list of questions written out. Check them off as you go over each one with your doctor. Take notes and then verify that the physician did enter the referrals if any are needed.

9. Have a problem? Tell someone about it! Every VAMC has quarterly town hall meetings that you can attend. These meetings are held specifically so you can talk to leadership and give feedback. The majority of VA employees want to help you so let them!

[Source: CBS News Radio | Andrea Estes | October 9, 2017 ++]

VAMC Sioux Falls SD ► Pin-Ups For Vets Visit Rejection Withdrawn

Veterans Affairs officials in Sioux Falls, South Dakota, spiked an appearance by two “pin-ups” at the VA hospital next week, saying the planned giveaway of calendars featuring female military veterans dressed in 1940s vintage clothing “may contribute to the disrespect of women Veterans.” Models with Pin-Ups for Vets (<http://www.pinupsforvets.com>), a nonprofit A Nonprofit Organization 501(c)(3) whose annual calendar has raised more than \$56,000 for veterans causes — including medical equipment for VA facilities, per the charity’s website <http://www.pinupsforvets.com/home> — have made more than 60 visits to VA installations, along with trips to military bases and other appearances.



Founder Gina Elise said she confirmed the 10 OCT appearance late last month; Elise and Marine Corps veteran and fellow vintage model [Tess Rutherford](#) already had travel booked from California when they received word that the visit had “been deemed inappropriate by the leadership.” Elise posted news of the rejection on Facebook on 4 OCT, encouraging supporters to express their opinion of the decision directly to Sioux Falls VA officials. Those officials sent out a statement [via Facebook](#) on 5 OCT, thanking people for their messages and saying, in part, that the ruling came “because we feel the materials the group asked to distribute may contribute to the disrespect of women Veterans in their roles as equals, and perpetuates objectification of women in general.”

An emailed response to questions from Military Times on Thursday night contained similar wording. It did not address specific questions, such as why the visit had been approved before it was rejected. "With all due respect to the leadership of this facility, I feel like this was a knee-jerk decision and that there was little to no research done prior to making that decision," said Jennifer Marshall, a Navy veteran [and actress](#) who has donned the vintage clothing for several Pin-Ups for Vets outings with VA patients. "Our award-winning nonprofit has visited thousands of veterans at their bedside and has worked to raise money for badly needed rehab equipment. There is nothing disrespectful nor objectifying about the work that we do."

On 9 OCT Sioux Falls, South Dakota, Veterans Affairs leadership contacted Pin-Ups for Vets to reallocate representatives to visit while "at the same time maintaining an environment that is respectful of all the Veterans we serve," according to a statement. The move reverts the change outlined in the above story. No further details were immediately available.

Elise maintains a web page of letters from VA staff [expressing appreciation](#) for the group's visits. The group's 2018 calendar, its 12th, includes 21 female veteran models. For a sample of what the organization does go to https://youtu.be/T5SMNW9U_uE. [Source: The Boston Globe | Andrea Estes | September 18, 2017 ++]

VAMC Clarksburg WV ► Wait Time Manipulation Uncovered

A Department of Veterans Affairs investigation revealed the Louis A. Johnson Veterans Affairs Medical Center in Clarksburg, W. Va., intentionally manipulated patient data to make it seem like wait times and patient volume were lower than they actually were, according to the Office of Special Counsel. The VA began its investigation following allegations from a confidential whistle-blower. Ultimately, the VA found an unnamed primary care manager at the West Virginia facility is responsible for the placement of emergency patients in two unofficial clinics used to improperly decrease reported emergency department wait times and ED patient volume, states a 29 SEP letter from the OSC to President Donald Trump. This reportedly occurred over the last seven years.

"The decision to create these unofficial clinics violated several VA directives and prevented an accurate analysis of ED staff workload," the letter reads. "It also gave the false impression that the primary care clinic had a greater workload and demand for services." The VA also failed to properly code patient visits, which resulted in charging more than 600 veterans an incorrect copayment and "a total lost revenue of \$21,070 for the clinic," according to the OSC. According to the OSC, the VA responded by immediately discontinuing the practice, coming up with a process for clinic approvals and educating leadership and staff on requirements in VA directives. The VA "is currently determining how to recoup lost payments. In addition, the VA counseled the manager responsible for the creation of these improper clinics," the agency added [Source: Becker's Hospital Review | Kelly Gooch | October 10, 2017 ++]

VAMC Denver CO Update 08 ► Cancelled/Postponed Surgeries

A FOX31 Problems Solvers investigation has found 65 to 90 surgeries have been canceled or postponed at the Denver Veterans Affairs Medical Center since early August of 2017. The Eastern Colorado Health Care System blames a shortage of staff, specifically anesthesiologists and certified registered nurse anesthetists. "In Colorado, it's a very competitive market for physicians in general and particularly anesthesiologists," said Dr. Ellen Mangione, the chief of staff for the Eastern Colorado Health System, which operates Denver VA Medical Center. "Any delay we are certainly concerned about."



Vietnam War veteran Peter Lando

One of the patients affected by the surgical delays is Vietnam War veteran Peter Lando "I feel pretty left alone. I went and fought a war for my country. I love this country more than anything and I would do it again in a hot second," said Lando. The 70-year-old said he's been trying to get back surgery done since March. "(Delays) happening all the time. I'm getting so my whole life is disrupted," said Lando. His wife Michelle called the Problem Solvers after her husband's surgery, scheduled for 22 SEP, was rescheduled for 16 OCT. "I haven't made a stink. But my 100 percent service-connected husband needs care. ... He could be in a wheelchair in less than a year if he doesn't get the surgery," the 62-year Broomfield resident said. The day after Michelle Lando called, she learned her husband's Oct. 16 surgery had been canceled too. "I just feel discouraged," she said. "My husband is discouraged and the next step is despair."

Mangione pointed out the Denver VA Medical Center performs about 380 surgeries a month and is taking aggressive steps to beef up its staffing. The hospital signed a Locum contract on 1 OCT so it can hire doctors and nurses from nearby hospitals on a freelance basis until it's up to full staff. Currently, the Denver VA has eight anesthesiologists and 10 certified registered nurse anesthetists but wants to hire at least three more of each. The hospital has increased its salaries, and can offer anesthesiologists up to \$400,000 a year and anesthetists up to \$173,000 a year.

Still, Peter Lando said he wasn't willing to wait for another surgery date. He demanded a referral to University of Colorado Hospital and was seen almost immediately on 3 OCT. The next day, he was on the operating table. The day before his back surgery, he showed his prized 1968 Harley motorcycle and shared his post-surgery wish. "Ride my bike," he said. Peter Lando was still recovering at the University of Colorado Hospital. The family launched a GoFundMe page (<https://www.gofundme.com/pete-lando-veteran-family-fund>) after Michelle Lando's car broke down when she left the hospital after Peter's surgery.

U.S. Rep. Mike Coffman issued the following statement about staffing shortages at the VA:

"The VA has reassured me they continue to aggressively address staffing shortages, not only in the competitive Denver area, but nationwide. This is in line with what the Secretary himself told me on a phone call and follow up letter regarding progress made to improve access to care in the Eastern Colorado Health Care System," Coffman said. "While its concerning to have any medical procedures rescheduled or postponed, I was also told that urgent and critical patient needs are being met. Additionally, the Denver VA has informed me that they are receiving the necessary support and resources from their leadership to address their staffing shortages. Rest assure, as a Marine Corps combat veteran and Member of Congress, I will continue to follow this matter very closely."

Sen. Michael Bennet's office also sent a statement:

"Michael believes the VA must do more to recruit and retain staff in high-demand areas like Denver so our veterans receive the timely, high-quality health and behavioral health care they deserve. We urge the VA to take steps to address and enhance the agency's ability to recruit and retain medical professionals, which includes notifying Congress of any additional authority or funding needs."

A spokeswoman for the Denver VA Medical Center said the hospital hopes to be at full staff within a few months. [Source: Fox 31 Denver | Rob Low | October 11, 2017 ++]

VAMC Tomah WI Update 18 ► Ex-Head Allowed to Resign

The former head of the Tomah VA Medical Center was allowed to resign and given a settlement after allegations that painkillers were being overprescribed to patients. Mario DeSanctis was fired from the hospital in 2015. But a USA Today investigation found he fought his dismissal and reached a deal in which he was allowed to resign. He and his attorney were paid \$163,000. The Tomah VA hospital was rocked in January 2015 by reports of inappropriate dosages of narcotic pain killers and retaliation against employees who questioned the practice. DeSanctis did not return a phone message left by The Associated Press on 12 OCT. Jason Simcakoski was a Marine who died in 2014 from a fatal combination of drugs. His widow, Heather Simcakoski, told the La Crosse Tribune the settlement was “really disappointing.” [Source: Associated Press | October 12, 2017 ++]

VARO Providence RI ► Manager Disciplined for Toxic Work Atmosphere

A manager at the Veterans Affairs Regional Office in Providence has been relieved of his duties pending disciplinary action, following a complaint from a co-worker that he created a “toxic work atmosphere.” Stephen V. Pina, the Veterans Services Center manager, who also has been embroiled in controversy after a Facebook post suggesting that **New England Patriots players who kneeled during the national anthem on Sunday were dancing monkeys**, is “no longer engaged in processing benefits claims,” according to Mark Ramos, a spokesman for the Providence VA office. Ramos said that disciplinary action against Pina has been proposed and that, to afford due process rights, it can’t be imposed for 15 business days. Ramos said he was not aware of the nature of the proposed discipline. In the interim, Pina has been assigned to other job duties.

Peter Rogers, who was a human resources specialist at the Providence office, said he left for another government job two years ago due to insensitive remarks made at work by Pina. “The work environment there is awful because of him,” said Rogers, who now works for the U.S. Department of Homeland Security. Rogers said he is an openly gay veteran who served 23 years in the military, including a tour in Afghanistan as an air traffic controller for the Air Force. The 44-year-old Virginia native said he recalled one moment when he was driving Pina and other colleagues to an event at a VFW in Warwick. Rogers claimed that Pina made homophobic remarks during the ride. “He was pounding on the dashboard, yelling all kinds of obscenities and f-bombs,” said Rogers. “I was completely blown away by his behavior.”

Pina, who lives in Brockton, Massachusetts, landed in hot water this week after making a comment under a Facebook story about Patriots players who knelt during the national anthem on Sunday. In the post, Pina called the players “turds” and added, “dance monkey dance.” Pina has since resigned from his position on the Brockton Parks and Recreation Commission, after Mayor Bill Carpenter called on him to do so. A Pop Warner football team, the Brockton Junior Boxers, said Pina had stepped down as a coach after the youth football league made a statement calling for him to do so. Pina received a \$120,000 salary last year as manager of the Veterans Service Center, overseeing 157 government employees at the downtown office on Westminster Street. [Source: Providence Journal | Paul Edward Parker | September 29, 2017 ++]

VA HCS Central AR ► Community Clinic Shift to VA Personnel Manning

The Central Arkansas Veterans Healthcare System (HCS) has opened a new outpatient clinic in Mena, **staffed entirely** with U.S. Department of Veterans Affairs personnel. One of 16 community-based outpatient clinics in the state, the new Mena clinic is the most recent in the state to shift away from the contractor-run format to strictly VA staff. The Pine Bluff clinic will be the next to make the change, a Little Rock VA spokesman said last week. Dr. Margie Scott, the central Arkansas VA medical center director, said the staff is excited to welcome veterans to the Mena clinic. "It's a brand-new building with state-of-the-art equipment, modern construction and veteran-centered design," she said in a news release.

The VA's community clinics are positioned throughout the state to offer veterans with VA benefits closer alternatives to one of the state's VA medical centers, located in Fayetteville, Little Rock and North Little Rock. The community clinics typically offer primary care coupled with a few specialty services, although the offerings have expanded in recent years with the development of tele-medicine. In Mena's case, the new clinic, located at 300 S. Morrow Road, will offer primary care, mental health care, tele-health, and a women's health program. The facility will utilize the VA's Patient Aligned Care Team model, emphasizing prevention and health promotion from a personalized team consisting of a medical provider, registered nurse, licensed practical nurse and medical support assistant.

Arkansas' other community clinics are located in the following cities: Conway, El Dorado, Fort Smith, Harrison, Helena-West Helena, Hot Springs, Jonesboro, Mountain Home, Ozark, Paragould, Pine Bluff, Pocahontas, Russellville, Searcy and Texarkana. The number of veterans each clinic sees varies by location. In the VA's Northwest Arkansas/south Missouri region, the Ozark and Harrison satellite locations average almost 200 veterans each month, according to Veterans Health Care System of the Ozarks Public Affairs Officer Wanda Shull. The Fort Smith location sees close to 1,300. Shull said the regional branch is planning a relocation and expansion of the Fort Smith clinic.

The central Arkansas VA serves about half of its veterans through community clinics, a spokesman said. As for the Mena clinic, it began taking calls on 30 SEP and patients the first week of OCT. "Our mission is to honor and care for our nation's heroes, and this new clinic is built just for that purpose," Scott said. [Source: Northwest Arkansas Democrat Gazette | Hunter Field | October 9, 2017 ++]

* Vets *



Vet Toxic Exposure | Palomares Spain ► Ionizing Radiation

On 3 OCT, Vietnam Veterans of America and the VVA Connecticut State Council filed suit in U.S. District Court in Connecticut to compel the Department of Defense to release records related to U.S. airmen's exposure to ionizing radiation while responding to a January 17, 1966, hydrogen bomb accident near Palomares, Spain. "The Department

of Defense has withheld access to critical health information, including the results of medical testing by military doctors, from Palomares veterans for over fifty years,” said John Rowan, President of Vietnam Veterans of America. “Without key information about the extent of their exposure, these veterans have been unable to pursue the disability benefits that many desperately need.”

In one of the worst nuclear accidents in U.S. history, a U.S. Air Force B-52 bomber collided with a KC-135 tanker aircraft, releasing four hydrogen bombs. The Palomares “Broken Arrow” incident irradiated large swathes of the Spanish countryside after two of the bombs broke open upon impact. In an effort to recover the weapons, the U.S. Air Force ordered approximately 1,600 airmen to the site of the accident, where they were exposed to dangerous levels of radiation daily, for weeks or months at a time. The Air Force failed to provide the airmen with adequate protection, however, and did not warn them of the danger of their assignment.

Many of the veterans who participated in the Palomares cleanup operation have sought veterans’ disability benefits for illnesses and health conditions related to exposure to ionizing radiation, but have been denied. “Palomares veterans have waited decades for even basic information about the medical risks that prolonged exposure to radioactive plutonium dust carries,” said Vietnam veteran Patti Dumin, President of the VVA Connecticut State Council. “They cannot wait any longer – the Pentagon owes them answers.”

The lawsuit asks the court to compel the Department of Defense to conduct a reasonable search and immediately produce the wrongfully withheld records under the Freedom of Information Act. Jacob Bennett, a law student intern with the Veterans Legal Services Clinic at Yale Law School’s Jerome N. Frank Legal Services Organization, said, “Palomares veterans and the American public are entitled to know the full extent of the damage that this Broken Arrow disaster inflicted on young service members’ health. We intend to vindicate our clients’ FOIA rights to help Palomares veterans access the benefits they deserve.” [Source: VVA Communications Department | October 3, 2017 ++]

Toxic Exposure | Wurtsmith AFB Update 01 ► Assessment Reopening

The federal government is reopening a 16-year-old health report on the former Wurtsmith Air Force Base in Oscoda at the urging of legislators and veterans seeking coverage for illnesses they contend were caused by exposure to toxic chemicals. The Agency for Toxic Substances and Disease Registry (ATSDR) says it will update the 2001 public health assessment for Wurtsmith, a Strategic Air Command nuclear B-52 bomber base in northeast Michigan which closed in 1993 at the end of the Cold War.

The ATSDR, an independent agency under the U.S. Department of Health and Human Services which operates jointly with the Centers for Disease Control, will reassess past exposure in base drinking water to trichloroethylene (TCE), a cancer-causing industrial solvent found at astonishing levels in base drinking water in the late 1970s. The report will be ready for public review this spring, ATSDR said. Veterans hope the updated report prods the U.S. Department of Veterans Affairs (VA) to extend disability benefits and treatment to former service members without forcing them to somehow show medical evidence that links their disability claim to TCE exposure.

For that to happen, though, the ATSDR must conclude TCE exposure likely harmed people at Wurtsmith. That has to occur before the VA would consider amending its benefits policy, according to health officials. Such an outcome may also require an act of Congress. Wurtsmith veteran Mike Bussey of Pennsylvania considers the news a “50 percent victory” because, while the ATSDR will re-examine TCE exposure, the agency declined to assess exposure among veterans to per- and polyfluoroalkyl substances called PFAS, (also named perfluorinated chemicals, or PFCs) that were used on base.

Although the Air Force began to clean up TCE in base groundwater in the late 1970s, expansive local PFAS contamination only became widely known last year when the state issued a drinking water advisory for private wells

in Oscoda Township. State investigators say PFAS began contaminating the base groundwater shortly after the Air Force started using a chemical-laden firefighting foam in the 1970s. Amid redevelopment in 1997, the base connected to municipal water from the Huron Shore Regional Utility Authority which pulls drinking water from Lake Huron. Before that, base water came from on-site wells.

On an 10 AUG conference call, Bussey said the ATSDR told him there wasn't enough data on PFAS exposure among veterans at Wurtsmith to cook that into an official update. Last year's discovery of high PFAS levels in old water preserved in unused fire hydrants that were never flushed after the base closed wasn't enough for ATSDR, he said. "My response was, 'that's not good enough,'" said Bussey, who was stationed at Wurtsmith as a senior airman from 1989 to 1992. "But it wasn't taken very seriously." The call followed months of back-and-forth between the veterans group -- which is applying for 501c3 nonprofit status under the name Veterans & Civilians Clean Water Alliance -- the Michigan Department of Health & Human Services (MDHHS), and staff members with the office of Congressman Dan Kildee, a Democrat from Michigan.

Christina Bush, an MDHHS toxicologist who has been evaluating toxicant data on Wurtsmith, said the ATSDR doesn't consider the hydrant data collected by the Michigan Department of Environmental Quality last year robust enough to calculate a past exposure dose. PFAS compounds are still considered an "emerging" contaminant, although movement toward better scientific understanding of health impacts through human studies is gaining steam. "Even though PFAS would not be expected to degrade over time, it's unclear whether there could be some evaporation of water or imperfect mixing" in the hydrants, she said.

With TCE, it's a different story. When the original ATSDR report was written in 2001, Bush said the agency was using an interim screening level to evaluate chronic exposure. Today, that number is about 400 times lower than what the agency used previously. Whereas concentrations of TCE in drinking water at Wurtsmith may not have exceeded the old number, they were above the screening level the agency now uses, she said. In 2001, the ATSDR concluded it was "unknown" whether TCE concentrations at Wurtsmith "persisted at high enough levels for long enough durations to actually pose a public health hazard." The report later notes that there is "much controversy" in the scientific community about whether TCE caused cancer in humans. Since then, the ATSDR, National Toxicology Program, Environmental Protection Agency and the International Agency for Research on Cancer have all concluded that TCE is a known human carcinogen.

The chemical is all too familiar to pollution investigators. TCE was once widely used as an industrial degreaser and dry cleaning solvent. It's present at many brownfield and Superfund sites. TCE became widely known during the Woburn, Mass., water contamination case dramatized in the book and movie "A Civil Action." TCE was first discovered in Wurtsmith drinking water in 1977. Former Michigan Attorney General Frank Kelley sued the military in 1979, alleging that Air Force officials knew about the contamination and tried to cover up the TCE presence in base water by adding phosphates to mask the odor. The Air Force settled in 1980 and installed groundwater extraction and treatment systems to capture TCE and spilled jet fuel that still operate.

According to the 2001 report, TCE concentrations in 1977 in one of Wurtsmith's primary drinking water wells reached as high as 5,173 parts-per-billion (ppb), which is more than 1,000 times the EPA's current limit of 5-ppb for TCE in drinking water. The number of people potentially exposed to TCE at Wurtsmith is large. In 1985, the base maintained an \$80 million annual payroll with 3,600 military and civilian personnel. Notably, the TCE levels at Wurtsmith were substantially higher than those discovered at Camp LeJeune, a Marine Corps training base in North Carolina where veterans and their families drank water polluted with TCE and other chemicals from the early 1950s to the late 1980s. According to the ATSDR, TCE levels in LeJeune drinking water reached 1,400-ppb in the 1980s.

LeJeune's drinking water contamination is considered one of the largest of its kind in U.S. history and eventually forced the VA to automatically presume diseases like adult leukemia, bladder cancer, kidney cancer, liver cancer, Non-Hodgkin's lymphoma and Parkinson's disease were caused by consuming the chemicals. However, it took many years and President Obama's signature on federal legislation to reach that point. Wurtsmith veterans hope to someday receive similar presumptive treatment.

The Wurtsmith veterans group includes members spread around the country, many of whom are battling reproductive and immune system issues, neurological problems and "more types of cancer than you can shake a stick at," Bussey said. The group has the ear of Kildee, whose Congressional district covers Oscoda. There have been talks with his office about legislation along the lines of the Janey Ensminger Act of 2012, which authorized the VA to extend presumptive care to LeJeune veterans and families.

Capitol Hill staffers say a bill along those lines would have to follow the current push to fund a CDC study on the health impacts of PFAS in veterans and people living near military bases. Both the U.S. House and Senate have passed language requiring such a study in the 2018 National Defense Authorization Act. "Service members have made great sacrifices for our freedoms and we must ensure that they are taken care of, especially when they were exposed to toxic substances through no fault of their own," Kildee said in a statement. Bussey stressed that time is not on the veterans group's side. "You can't treat what you don't acknowledge," he said. "We need to move forward on this because too many people are sick and dying." [Source: VVA Press Release | http://www.mlive.com/news/index.ssf/2017/09/wurtsmith_tce_atcdr.html | September 20, 2017 ++]

Vet Service Dogs Update 21 ► Where Federal Regulations Allow

A video of a woman screaming about a veteran's service dog being inside a Delaware restaurant has caught the attention of the internet. It happened at Kathy's Crab House in Delaware City. The unidentified woman was filmed screaming about how disgusting she thought it was that an animal was inside the eatery. Kathy's Crab House addressed the incident and announced that it will be sponsoring a veterans and service animals fundraiser in a statement released via their Facebook page 11 OCT. That statement reads:

"We would like to express at this time how sorry we are over the embarrassing turn of events that occurred earlier this week in our restaurant, here in Delaware City. It is unfortunate that some of the public are not familiar with **federal regulations regarding service animals, which, in fact, do permit service animals into establishments such as grocery stores, public buildings and restaurants, giving aid and comfort to their masters in their time of need.** That being said, we would like to take what may have been perceived as a negative incident and turn this into a positive opportunity, by educating and enlightening the public about the role of service animals and how they help and serve many returning veterans who have suffered serious wounds and injuries, as well as those veterans suffering from PTSD.

So, at this time, we would like to announce that we will be sponsoring a fundraising effort for veterans and service animals thru the Montana Wounded Warriors. We would like to enlist your help as a sponsor, volunteer, or as a donor and help us enlighten and educate the public as well as to help those veterans in need. Details need to be finalized at this time, but as they come together, we will make additional announcements to keep you apprised of our progress.

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To view the video of the livid woman's screams over the issue go to: http://videos.vidible.tv/prod/2017-09/19/59c1647db90afb54d3287b66_640x360_v2.mp4?cYoZbzEzuEv4ZCWT-GNqjKloZVzdpjTwnb8AC9gOdCAYFV3nS8-HFLZzKnZHWJFP. [Source: CBS WIZ Baltimore | September 21, 2017 ++]

Vet Pensioner Abuse ► VA and Congress Crawling Toward Actions

In 2012, the Government Accountability Office found more than 200 financial planning firms and estate law offices enticing veterans or their survivors into costly annuities or irrevocable trusts intended to hide or reallocate their assets so they would qualify for VA pensions the claimants wouldn't be eligible for otherwise. Since then, the VA and Congress have been crawling toward actions to stop the abusive practices, which twist the intent of the pension benefit in ways to help some veterans, put others in financial binds, and generate fees or profits or streams of residents for the schemers.

The crawl toward reform continues. The VA is still working on a draft rule first released for public comment in January 2015. Final publication of the “Net Worth, Asset Transfers and Income Exclusions for Needs-Based Benefits” rule was expected this past summer. However, it remains “in VA's internal concurrence process,” said a VA spokesperson Wednesday. Meanwhile, the House Veterans' Affairs Subcommittee on Disability Assistance and Memorial Affairs held a first-ever hearing last month on legislation to address financial abuses of the pension program. The Veterans Care Financial Protection Act (now HR 3122) first was introduced in 2014.

The VA pension program exists to help veterans in financial distress if they served at least a day of wartime service, at least 90 consecutive days on active duty, and earned an honorable or a general discharge. To be eligible for the basic VA pension, veterans also must have only modest annual incomes or none at all. They can qualify for more VA financial help, however, if they are disabled and unable to leave their homes unassisted, or they have unmet daily living needs or they face exorbitant medical, assisted care, or nursing home costs. The additional financial help is called the VA Aid and Attendance benefit. “It's an absolute lifeline for veterans who have significant health problems,” John Katz, the American Legion's assistant director for pensions at the VA regional office in Philadelphia, told me late last year. “Many people who laid their lives on the line for their country are incapable today of taking care of themselves without housebound benefits or aid and attendance, in addition to the non-service connected [VA] pension. For them there's no other way they'd survive.”

About 303,000 wartime veterans and 220,000 survivors draw VA pension benefits. Veteran advocates believe thousands more would qualify if they knew the program existed. What has raised the profile of pensions recently, however, have been the reports of abuse and target marketing by unscrupulous financial planners, lawyers, or even care facilities seeking ill or elderly veterans. The pension is a needs-based benefit with need determined using thresholds on annual incomes and assets or net worth. For example, a wartime veteran with no dependents can qualify for all or a portion of the basic pension benefit if they have income, including Social Security, less than \$12,907 annually. If income is \$10,000, for example, the benefit would be calculated by the maximum annual pension rate of \$12,907 minus \$10,000, for a total of \$2,907 annually.

However, the pension benefit is unique in that it allows veterans to apply medical expenses to offset income calculations and raise the benefit. Even higher amounts are payable if the veteran or surviving spouse is housebound, and more aid and attendance dollars are available if claimants need help with daily activities. A married veteran needing aid and attendance can qualify for at least some pension monthly if their income doesn't exceed \$25,525. A survivor's pension is smaller but also based on need with consideration of medical expenses.

The other threshold to determine eligibility is net worth. If assets other than primary residence and vehicle exceed \$80,000, then the VA can't assume eligibility without a closer determination. Again, medical-related expenses can be critical. For example, if a veteran with assets totaling \$100,000 moves into an assisted living facility that costs \$5,000 a month, a VA service officer could determine the asset threshold would be reached quickly and find the veteran eligible for pension. Veterans and survivors who believe they might qualify should contact the veterans service office for their county to fill out required forms. More program information can be found [here](#).

A key purpose of regulatory reforms aimed at VA pension benefits is to ensure they are used by low-income veterans or those facing exorbitant medical expenses they can't pay, rather than be used as a tool to preserve family wealth. One provision in the VA's draft rule would impose a three-year look-back provision on assets to discourage

new claimants from hiding assets. Other changes would reset the asset ceiling to the higher and “brighter line” used by Medicaid, and more clearly define medical expenses that can reduce income calculations. The new rule would not leave the threshold on assets open to interpretation as it is now.

Legislative reforms, which show signs of life, take a different approach. As Rep. Matthew Cartwright (D-PA) testified last month on behalf of his bill, H.R. 3122, it would direct the VA and other federal agencies to work with state officials and outside experts to establish state and federal standards to end “dishonest, predatory, or otherwise unlawful practices” targeting VA aid and attendance dollars. “Unscrupulous actors are increasingly exploiting this assistance program by preying on our older veterans' vulnerability” to waste federal dollars and turn “this well-deserved benefit into a financial nightmare for those who can least afford it,” said Cartwright. Some charge veterans “a nonexistent application fee to obtain the benefit,” he added. Others collect “consultation fees” with “promises to expedite the application process. Yet another scam is an offer to help veterans qualify for the benefit even when their net worth is too high to qualify.” In this way, Cartwright explained, financial planners gain control of the veteran's assets and “move them into an irrevocable trust or annuity, which the elderly veterans often cannot access for many years.”

Increasingly, he said, retirement homes are recruiting veteran residents with promises they will qualify for VA aid and attendance to cover cost of the home. “If the [Aid and Attendance pension] claim is later denied, however, the nursing home then demands back payment from the veteran. This is a practice that leaves vulnerable elderly veterans with the undesirable choice of draining their own remaining assets or giving up their new home,” Cartwright said.

He first introduced his bill on learning of companion legislation in the Senate (now S. 1198) from Sen. Elizabeth Warren (D-MA). The bill now has bipartisan support in the subcommittee. Witnesses for the VA and veterans service organizations expressed support. Cartwright promised some changes to reflect concerns from the GAO that it shouldn't be given a role in establishing the new protection standards given its existing responsibilities for reviewing how the standards are implemented. With no costs attached, the bill is expected to clear the subcommittee this fall. Full committee action and passage by the House isn't expected this year. [Source: MOAA Leg Up | Tom Philpott | October 12, 2017 ++]

Iraq Vets ► Chong Kim | Fighting Deportation

An immigration judge in Washington state declined to release an Iraq War veteran from custody in Seattle 4 OCT while he fights the government's efforts to deport him. Chong Kim, a South Korean immigrant and green card holder from Portland, Oregon, struggled with drug addiction, homelessness and post-traumatic stress following his time in Iraq in 2009 and 2010, leading to convictions for burglary and other charges.

Kim's lawyer and friends have said he has done well since completing a substance abuse treatment program run by the Department of Veterans Affairs early this year. But immigration agents arrested him in April and brought him to a detention center in Tacoma, Washington. They plan to deport him because of his convictions. "It's just wrong to be deporting an Army veteran," said Matt Luce, 41, of Troutdale, Oregon, who attended high school with Kim and traveled with three other former classmates to the hearing Wednesday. "Despite his convictions, he was on and continues to be on the right path. This is just a travesty of justice."



Kim's attorney, Tim Warden-Hertz of the Northwest Immigrant Rights Project, said that Immigration Judge Theresa Scala found that the government met its burden to show that Kim posed a danger to the public or a risk of flight, though he said she did not explain her rationale in court. Warden-Hertz planned to appeal the decision, which he said illustrates the difficulty of obtaining bond in the immigration detention system. U.S. Customs and Immigration Enforcement did not immediately respond to an emailed request for comment Wednesday. In an earlier statement, the agency said Kim had been arrested after "it was determined he has a prior felony conviction in Multnomah County for attempt to commit arson in the first degree, among other charges."

Kim joined the National Guard in 2005 and served in Iraq in 2009 and 2010 before being honorably discharged. He came to the U.S. more than 35 years ago, at age 5, and he became a legal permanent resident in 1981. He does not speak Korean, his friends have said. His immigration troubles stem primarily from two incidents — a burglary and another case, which his lawyer described as a "dumb prank," in which he filled a beer bottle with gasoline, lit it on fire and threw it at a concrete outer wall at the back of a hardware store. After the first matter, in 2013, he faced deportation. The judge let him go — but warned him not to get in trouble again, former Staff Sgt. Ryan Kell, who was Kim's team leader in Iraq, told the Associated Press in July.

Last year, though, he was convicted of attempted arson in a special veterans court following the second incident. He participated in a 4½-month, inpatient substance abuse treatment program run by the Department of Veterans Affairs, and had been doing well. "He admits he had a drug problem and that he committed crimes when he was under the influence — he's not proud of it," Warden-Hertz said. "To find he's a danger or a flight risk now doesn't make any sense."

In petitioning for Kim's release pending deportation proceedings, Warden-Hertz submitted letters from a clinical psychologist who detailed Kim's success in the substance abuse program as well as from a clinical nurse manager at the Portland VA Health Care System, where Kim began working in January as a housekeeper at a cardiology and oncology unit. "Mr. Kim demonstrated exceptional team work," the nurse manager, Cynthia Fahy, wrote. "It was regularly reported to this manager that he often went out of his way to assist other housekeepers and nurses."

Jason Phebus, 31, of Gresham, Oregon, is an Air Force veteran who began drinking heavily — and later using harder drugs — as he had a difficult time transitioning into civilian life. He said 4 OCT that he met Chong in the VA's substance abuse program, and he credited Chong's friendship and advice with helping him make it to where Phebus is today — in recovery with a steady job. His response to the notion that Chong might be deported is "a string of explicit," he said. "He was man enough to stand up and serve this country, in combat no less," Phebus said. "Now he's not fit to be here?" [Source: Associated Press | Gene Johnson | October 5, 2017 ++]

Vet Job Resume Writing Update 04 ► Five Blunders to Avoid

When Søren Kierkegaard wrote, “Life can only be understood backwards; but it must be lived forwards,” he might have been referring to the job seeker’s resume since a resume provides a look backwards to understand future value for potential employers. Your resume is a list and description of the jobs, roles, successes and results you achieved in your previous work. Employers require a resume to see proof that you have the skills, experience and training to perform the work for which they are hiring. What a resume typically doesn’t do is shed light on who the individual is, what they value, and where they can add value based on their experience. For many transitioning servicemembers, the resume is a list of military skills and training that is not applicable and seemingly irrelevant to private sector employers. To ensure your resume attracts the attention of employers, avoid making these mistakes:

1. Fonts. While the type font of your resume needs to be easy to read, there are rules and guidelines around style and flare. As job seekers try to make their resume stand out in a sea of similarity, some people opt for fonts that are creative (e.g. Comic Sans) or expressive (e.g. Papyrus). Avoid distracting typography on a resume. Hiring managers discourage this – if they must spend extra time deciphering or decoding the resume, that’s time taken away from understanding it’s value and applicability. Some fonts are too widely spaced (e.g. Lucida Console) while other fonts are too heavy and bold (e.g. Impact). Instead opt for fonts that are clean, readable and classic. Good suggestions are: Georgia, Gill Sans, and Calibri.

2. Keywords. Do you refer to your experience and skills using different language than your target employer? Even the best resume will not get the attention of critical hiring managers if the key words and phrases are missing. Read through job descriptions and posts made by your desired employers. What terms, phrases and words are they using? Do they list, “expert” or “specialist”? Are they looking for a “project manager” or “program manager”? (Hint: those are very different jobs!)

3. Targeting. A resume that feels generic, or un-specific, will not get the attention of a hiring manager. Readers want to know how you are qualified for THEIR job, not just A job. They want to see patterns of commitment, passion and experience in skills and talents that benefit their company and this job. Consider this: Let’s say you research a company and see that they have a fun, work-hard-play-hard, collaborative culture from what you find online and by talking to some former workers. Would you send a resume that looks sophisticated and stoic? Or, would you consider adding a section at the front that enables you to insert some personality? Maybe you would talk about your ideal work environment and how important it is to feel passionate about the cause you are serving. A company with this kind of culture is likely seeking employees who share their fun, lively and outgoing personality.

4. Personality. Many of you leaving the uniform will find it tempting to strip all sense of personality out of your resume – “just to be safe.” After all, if you expose your personality or style, someone could reject you. Instead, you’d rather the employer evaluate you solely on experience and skills. The challenge with this approach is that civilian companies hire on skills, talents, experience AND fit in the company (see #3 above). They look for employees, leaders and team builders who will fit in with others already employed. Add some of your personality to your resume to ensure the hiring manager who is looking for you can find you. Look for an opportunity to infuse your passion, goals, dreams and values into your resume as you tell the story of your career.

5. Focus on results. Does your resume include lists of results achieved against goals for every position you held during your military career? Many job seekers simply list what they were responsible for, and forget to mention the actual results achieved. For each job listed on your resume, explain what you were engaged to do, and the outcomes. If you have enough room, you might explain the process you took. Employers want to see that you can set or meet goals.

The Bottom Line

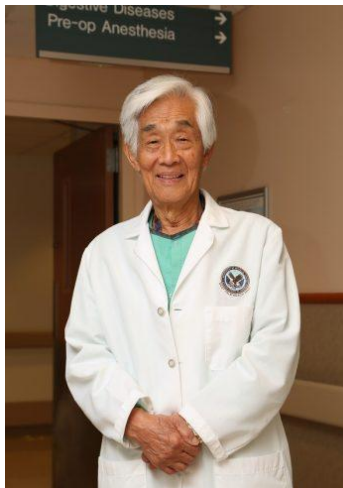
Consider the function of your resume and keep perspective on its role. Your resume is a look backwards, and tells a story of how you got to this point. In your cover letter, social media profiles, application and interview you

will build on your experience to help the hiring manager see the value you can add in the future. [Source: Military.com | Lida Citroën | September 26, 2017 ++]

Korean War Vets ▶ Dr. Kuang S. Kim

The overhead lights reflect a metallic shine off the top of Dr. Kuang S. Kim's silver mane as he briskly walks down the hall to the Surgery/Anesthesia clinic. "Is this where you want me to stand?" he asks the photographer with a smile. It's nearing the end of another busy work day for the physician who consults for the West Palm Beach VA Medical Center's anesthesia clinic. Unless you knew him personally, you would never know by his appearance or watching him move about that he had been practicing medicine for nearly seven decades. At 90, this Korean War Veteran and anesthesiologist is the most senior practicing physician in the medical center, if not the entire field of anesthesia.

Dr. Kim began working at the West Palm Beach VA in 2004 after being retired for nearly three years. He applied at the suggestion of a former colleague he ran into during a visit to the medical center. "To tell you the truth, retiring got kind of boring so I came back to work," he explained. "Initially I only planned to stay with VA for maybe one or two years but 13 years later I'm still here. I truly enjoy working with Veterans and the staff here. If I had known more about the VA health care system before I would have come here sooner."



Born in 1927 in Seoul, Korea, Dr. Kim began his career at the Seoul National University's medical school. Just a few months shy of his graduation, the Korean War broke out. As a leader of an anti-communist group at his medical school, Dr. Kim felt compelled to join the fight against North Korea. He joined the South Korean army on June 26, 1951 and went on to serve in both Korean and American M.A.S.H units. A few years after completing his medical degree, Dr. Kim immigrated to the United States. After completing his internship at Good Samaritan hospital in Phoenix, Arizona and his residency at Boston City Hospital, he eventually took a position at St. Michael Hospital in Milwaukee, Wisconsin where he remained for the next four decades.

During his time at St. Michael, he built its anesthesiology department from the ground up and served in various leadership roles. Although he has fond memories of his time in the private sector, he feels his work at VA has been some the most meaningful. "Here at VA, patients come first." "In the private sector, you have to cut down your time with patients as much as possible to make money for your hospital," he said. "Here at VA, patients come first and you have more time to get to know the person you are treating. That's one of the many things I really came to appreciate about working here and why I've stayed on staff."

Although he no longer performs procedures in the operating room, he still conducts patient history and physical examinations prior to procedures and supervises certified registered nurse anesthetists. He also serves as a mentor who over the years has left a lasting impression on his colleagues and hospital leadership. “He is truly a role model for everyone in the whole medical center on how to treat and approach patients,” said Dr. Ernest Shwaryi, Chief of Surgery Service. “He exhibits the utmost kindness toward colleagues and Veterans. He is one of the most impressive physicians I have ever met.”

Dr. Howard Maisel, Chief of Anesthesia refers to Dr. Kim as his idol – a dedicated, caring and most responsible person he’s ever met. “He is altruistic in the truest sense of the word and always goes the extra 100 miles for his patients,” said Dr. Maisel. “I’ve had the honor of working with him for the past 11 years he is just an absolutely amazing person. I don’t know of anyone who would ever say a bad word about him.” In a time where most working adults are dreaming of or counting down to retirement, the length of time Dr. Kim practiced as an anesthesiologist is truly fascinating. Although he celebrated his 90th birthday this year, it doesn’t appear he’ll be retiring any time soon. [Source: VAntage Point | October 5, 2017 ++]

Vet Deportations Update 12 ► VA Urged to Increase Services & Outreach

House Democrats are urging Veterans Affairs officials to increase services and outreach to deported veterans, arguing their immigration status shouldn’t overshadow their military service. “These are still veterans,” said Rep. Mark Takano (D-CA), vice ranking member of the House Veterans’ Affairs Committee. “Most of them are just caught up in a broken immigration system. But you wore the uniform, you served, you shouldn’t be subject to these sort of problems.”

Last week, Takano and four other Democrats on the committee traveled to the Deported Veterans Support House in Tijuana, Mexico. The site, which provides housing and aid to about 60 deported U.S. veterans living in the area, has been a focus in recent months of immigration activists critical of President Donald Trump’s policies. But Takano said the purpose of his recent visit was to focus on whether deported veterans have reasonable access to benefits they’re still eligible to receive, and what changes should be made by Congress or VA officials to help them. In meetings with the lawmakers, veterans at the Support House relayed stories of untreated mental health problems and other lingering medical issues, with limited medical help available. Takano said one veteran he met just started receiving VA disability checks, an income stream that he described as “life-changing” given his medical problems and unfamiliarity with how to find work in a foreign country.

An American Civil Liberties Union report in 2016 estimated that around 250 U.S. veterans have been deported in recent years for a variety of crimes, ranging from violent felonies to citizenship disputes. The deportations came despite laws on the books for decades that give non-citizens serving in the U.S. armed forces eligibility for citizenship. Takano said many of the individuals he has met with either didn’t know how about that eligibility or did not know how to start the process, leading to a surprising exit from America when problems arose. “A lot of these guys (in Tijuana) are just learning Spanish, because they lived in America their whole lives,” he said.

Takano has sponsored legislation that would allow some of those veterans to retroactively apply for citizenship, and has petitioned the Department of Homeland Security not to deport any veterans while the debate is underway. But he and other committee Democrats also want to see VA administrators do a better job providing health care and benefits services to eligible individuals. Despite their deportation, many still qualify for disability payouts and VA-backed medical care. “But to get it, some of these guys have to travel 26 hours by bus to Mexico City for an appointment,” Takano said. “They only get reimbursed for the travel weeks afterwards. And if they miss the appointment, they get nothing.” He wants to see VA officials make more telehealth services available to veterans in foreign countries, or more arrangements for the veterans to see local doctors. Democrats on the committee are also

inquiring whether the Veterans Crisis Line can be used by veterans overseas to receive emergency mental health counseling.

Takano is hopeful he'll get support from Republicans on his committee to push VA into administrative action, even though the veterans are viewed as criminal foreigners by many conservative groups. "Many of the vets we met with were older guys, who ran into problems with drugs because of post-traumatic stress disorder issues," he said. "But because of paperwork and other mistakes, they end up outside the U.S. "Some of these people are real criminals and shouldn't come back. But for many of these veterans, I think the public would be upset if they knew what has happened to them." [Source: MilitaryTimes | Leo Shane III | October 11, 2017 ++]

Vet Unaccompanied Burial ► 10 at Camp Butler National Cemetery

The gloomy weather matched the somber tone as 10 veterans were honored for their sacrifice to our country. "The unaccompanied honors veterans ceremony is a way we show respect to veterans that come to our cemetery without family members or without being accompanied by their loved ones," said Antonio Henderson, assistant director of Camp Butler National Cemetery. A 21-gun salute, and the playing of tap, payed homage to those who were lost. "We are honoring and respecting the selfless service that the veterans gave to our nation," added Henderson. "Every veteran should have a ceremony like this and for whatever reason many don't get that opportunity," said Sam Montalbano with the Inter Veterans Burial Detail.



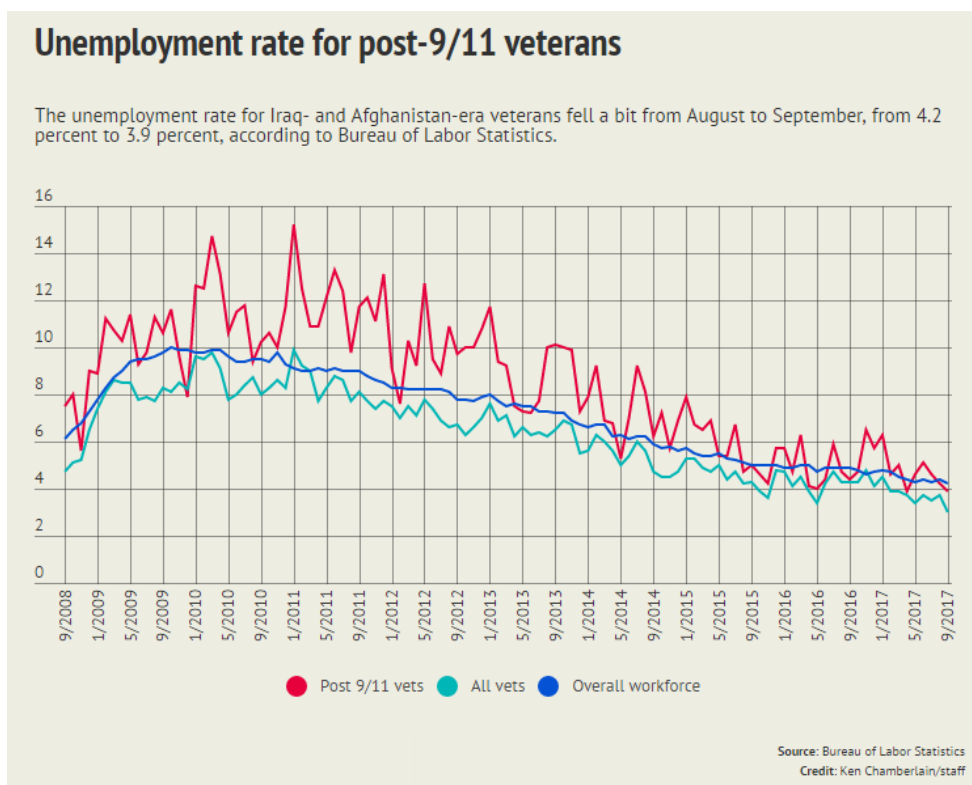
Spc. Matthew Brown from the Illinois Army National Guard Military Funeral Honors program presents a U. S. flag to Emile Bouvet during the ceremony. Bouvet, who is with the Vietnam Veterans of America, Chapter 534, accepted the flag on behalf of 10 recently interred unaccompanied veterans.

Many of those who took part in the ceremony are veterans themselves. "I'm a veteran as well," added Henderson. "I feel that it is also my duty and responsibility to give back for those who have laid the ultimate sacrifice," "It's giving back for all the things that they do while they are in the service," says Montalbano. "So, it's a good feeling for me personally." While there's nothing we can do to bring them back, those involved say they hope the lost are always remembered. "We are their brothers and sisters. It's our responsibility to let them know that they are not alone on their final salute," added Henderson.

The next unaccompanied veteran's ceremony will be held on April 5th, 2018 and Camp Butler National Cemetery. Go to <https://www.cem.va.gov/cems/nchp/campbutler.asp> for more information about the cemetery. [Source: WAND 17Springfield IL | October 4, 2017 ++]

Vet Unemployment Update 13 ► Dropped to 3.0% in SEP

Veteran unemployment hit a record low in September, according to federal data released 6 OCT. Figures from the Bureau of Labor Statistics show a drop to 3 percent, compared to a 3.7 percent unemployment rate in August. This marks the lowest unemployment rate for the group since 2006, the earliest year for which data is publicly available. Experts warn against putting too much stock in these numbers, however, as the veteran unemployment figures are drawn from a much smaller sample size than the overall population. Unemployment among Iraq and Afghanistan-era veterans continued its downward trend to 3.9 percent — down from 4.2 percent in August. Nonveteran unemployment also decreased slightly. While the national unemployment dipped 0.2 percentage points in September to 4.2 percent, the U.S. actually lost jobs over the previous month for the first time in seven years, The New York Times reports.



The Bureau of Labor Statistics attributes the overall loss of 33,000 jobs largely to Hurricanes Harvey and Irma. The natural disasters particularly affected employment in the food service and drink industries, which had added an average of 24,000 jobs each month over the last year. [Source: MilitaryTimes | Natalie Gross | October 6, 2017 ++]

Starbucks Vet Question Campaign ► Ask Better Questions

Has anyone ever asked you, as a veteran, if you've ever killed anyone or if you have Post Traumatic Stress Disorder? Starbucks has a new campaign that wants to help the public to ask better questions when they talk to veterans about their service. Their new video spot playing on television now is called "Starbucks Military Commitment: Ask Better Questions," featuring Starbucks civilian employees talking to veteran and military spouse employees about how they once asked pointed questions about the military and these veterans' service.

Starbucks' reasoning for the campaign is that far fewer Americans know someone who has served in the military and so they may have misconceptions about their service, according to their website. "Since I met you it's been definitely an eye opener," said one civilian employee to a Navy veteran in the video. "I just think people should be more open-minded," the same civilian says later in the video. The veteran is shown replying, "Just get to know the person." The company cites that since 2013 they have hired 10,000 veterans and military spouses, and they have a new goal to hire 15,000 more.

According to their site, they partnered with [Team Red White and Blue](#), [Blue Star Families](#), and [Team Rubicon](#) to come up with better questions to ask veterans and military spouses in conversations geared towards getting to know them. Some of those questions include: "What do you miss about serving?", "Why did you choose the branch you did?", "What has your career path been while your spouse is in the military?", and "How's your family doing?" You can see the full list of questions by going to: <https://1912pike.com/we-asked-veterans-and-military-spouses-what-questions-do-you-love-to-answer>. [Source: CBS Newsletter | Caitlin M. Kenney | August 25, 2017 ++]

Obit: Donald Malarkey ► 30 Sep 2017

World War II paratrooper Donald Malarkey, who was awarded the Bronze Star after parachuting behind enemy lines at Normandy to destroy German artillery on D-Day, has died. He was 96. Malarkey was one of several members of Easy Company to be portrayed in the HBO miniseries *Band of Brothers*. He died 30 SEP in Salem, Ore., of age-related causes, his son-in-law John Hill said 1 OCT.



Donald Malarkey (left) in 2015 attending ceremonies to commemorate allied D-Day landings in northwestern France. Scott Grimes (right) played Donald Malarkey in HBO's 'Band of Brothers' miniseries

Malarkey fought across France, the Netherlands and Belgium and with Easy Company fought off Nazi advances while surrounded at Bastogne during the Battle of the Bulge in December 1944. He was often praised for his actions

during the war, and was presented with the Legion of Honor Medal — the highest honor awarded by the French government — in 2009. Malarkey was haunted by memories of combat and the devastation of losing fellow soldiers and friends, his family members said. Still, the release of *Band of Brothers* was cathartic for him and helped him come to terms with the emotional scars of the battle, Hill said.

Malarkey was born on July 30, 1921, in Astoria, Ore. He was a freshman at the University of Oregon when he was drafted into the Army in 1942 and volunteered to become a paratrooper. He returned to the university after the war, receiving a bachelor's degree in business in 1948. While a student at the school, he met and fell in love with Irene Moore. The two married in 1948 and had four children: Michael Malarkey, Marianne McNally, Sharon Hill and Martha Serean.

Malarkey met with historian Stephen Ambrose in 1987, and in 1989 traveled with other members of Easy Company to Europe to provide oral histories of their war experiences. Those recollections became the basis for *Band of Brothers*, executive produced by Steven Spielberg and Tom Hanks, and the source book of the same name written by Ambrose. The veteran also detailed his experiences in a 2008 autobiography written with Bob Welch, *Easy Company Soldier*. Malarkey was frequently asked to speak about his experiences in WWII, and he lectured at West Point and made trips to Kuwait and Germany to meet with wounded soldiers from the Iraq War.

He remained close to the other surviving members of Easy Company and attended his final Easy Company reunion in Portland, Ore., in August. "You could look back and with great pride realize that you had done a very significant thing and acted responsibly in what amounted to saving the world," Malarkey told Oregon Public Broadcasting in 2012. Malarkey is survived by his daughters and his sister, Molly Rumpunkis. [Source: USA Today | October 1, 2017 ++]

Obit: Harold Beasing ► 7 Aug 2017

Harold Beasing was 25 when he was drafted on 25 April 1968, so old compared with other soldiers that they called him grandpa. His service in Vietnam with the U.S. Army included recovering the bodies of fallen soldiers he considered kids. He received his honorable discharge January 25, 1970. He would have nightmares for years. When he returned home to Rock Port, Missouri he never received a thank you for his service, his wife of 53 years, Edie, said. She remembered a story her husband had told her: A man in a coffee shop — who knew Beasing had been overseas — noticed his tan face from the sun in Southeast Asia and sneered, "So you been on vacation?" But hours before he died, the 73-year-old Beasing would finally receive a special thank you and be honored by a young soldier he had never met. Several relatives — Marla Hampe, Marcy Saniuk and Marveta Volker — found a way to make it happen before it was too late.



Beasing, a retired truck driver, suffered a major stroke at his home in Rock Port on 5 AUG. He was taken to the Nebraska Medical Center in Omaha and put on life-support. One of his relatives works at the VA hospital in Des

Moines and knew about a ceremony in which veterans are presented with a pin to recognize their service. Beasing's ceremony had to be pulled together within several hours. Beasing's wishes were to not linger long on life-support. Another relative called a friend whose husband, Stephen Condon, serves in the Nebraska Army National Guard and asked if he could help. Condon, a first lieutenant, didn't hesitate. He quickly contacted his unit's chaplain to get details on the ceremony, then put on his dress uniform and drove to the medical center.

Beasing's family couldn't locate a military pin to present to him, so a relative stopped at a Walmart and bought an American flag. A dozen family members gathered in his hospital room on a Sunday evening. Beasing couldn't talk, and the right side of his body was paralyzed because of the stroke. But he was conscious and alert. His niece read a prayer for soldiers, then "God Bless America" played over a cellphone. Condon, a combat veteran who deployed twice to Iraq, held Beasing's hand. The old veteran's eyes followed the young soldier. Condon told Beasing simply: Thank you for service. What you did for your country was appreciated. He thanked Beasing's wife, then softly laid the flag on the veteran's chest. Beasing died the next morning, but his family knows he was happy and proud that his thank-you had finally arrived. [Source: Omaha World-Herald | Michael O'Connor | October 11, 2017 ++]

WWII VETS 145 ► **Harold Berg | Guadalcanal Memories**

When Harold Berg stepped onto the white beach of Guadalcanal in late July, he carried memories of the battle he participated in 75 years ago, and also of his buddies he left behind. "That to me, is the greatest thing. I didn't know the men who died but I'll be representing the Marines that should be there. I feel that I am doing that," he said. "I feel that I am representing the Marines who should be there." Berg, 91, is among the last of the World War II Raiders, an elite unit that was the precursor of special operations in the U.S. military. And this soft-spoken, former insurance salesman from Central Peoria is the only veteran of that battle able to make the trip to the Solomon Islands for the dedication of a new memorial to honor the Raiders who fought and died there.



In this July 18, 2017 photo, Harold Berg, right, 92, talks with a friend at Berg's home in Peoria, Ill.

And what a trip. He flew from Peoria to Los Angeles to a small airport in the Fiji Islands. From there, he caught a connecting flight to Guadalcanal, a mere five hours away. Also to be present were members of the modern Raiders, the Marines with the U.S. Marine Corps Special Operations Command, which carries on the namesake of their World War II brethren. Berg was asked to participate because he is among the last of those who served in the original Raider battalions, which were based upon British commando units. The two-year experiment was a way to bring the fight more quickly to the Japanese who, until Guadalcanal, had ridden roughshod across the Pacific. Raiders weren't designed to win big battles. They conducted small unit raids. Essentially, they were to land on

Japanese-held islands before the main force of Marines, disrupt the beach defenses and to cause as many casualties and destruction as they could. They were on their own, without much support.

Berg dropped out of Woodruff High School as a junior and enlisted in the Marines when he was 17. "It might not be politically correct, but I wanted to fight the Japanese," he told the Journal Star late last year. And he did, participating in Guadalcanal, where he waded ashore in early 1943. The bulk of the fighting was over, but thousands of Japanese soldiers still were on the island looking to kill as many GIs as they could. He also was wounded in Guam and participated in the battles for Saipan, Bougainville and New Georgia. After the Raiders were folded into the 4th Marine Regiment, he participated in Okinawa as a squad leader. All 12 of his men were killed or wounded during the fighting. He, too, was injured in the Pacific's last big campaign.

Berg wants to go not just to honor his fallen Marines but also to bring history to life for the younger generation. For many, he says, the war has become nothing more than words on paper. By talking at memorials or reunions or functions, Berg shows a more human side and that it was, indeed, real. "I have a lot of friends that I meet every week and I tell them what I see," he said of his frequent outings with area veterans. And his son, Brad Berg, agrees. "This is a chance to tell his story and for others to hear it. Am I nervous? Yes, he's going a long way, but he's going back there to help and to honor the Marines and others," his son said. "I am proud of him." [Source: Journal Star via AP | Andy Kravetz, | August 22, 2017 ++]

AFL Q&A 07 ► VA Individual Unemployability Eligibility

Q. *How do I qualify for Individual Unemployability?* I have been approved for compensation under agent orange for my heart condition. Just recently, I had a heart attack and my cardiologist said I am no longer fit to work. Besides my heart condition, I also have slip disc and spinal stenosis (which VA denied) which is making it so difficult for me to walk even with a cane. Per doctor, an operation is a last option (when my legs are already numb, and urination and bowel movement occurs. Other doctors however advised me never to go for an operation specially for the spinal stenosis for I could either get out of the operating room healed or paralyzed. Rather for me to take extra precaution since a bad slip or fall could render me paralyzed.

-o-o-O-o-o-

A1: I have spinal stenosis and had to have 2 operations for vertebrae breaking apart. You must be employable for unemployment. I had to apply for Social Security Disability. It took 1 1/2 years to get it though. The doctors are right surgery is last attempt at repair. I have nerve damage affecting both legs. I have other friends dealing with this to. Mine occurred at 39 and had 2 back injuries in Navy. Still trying to get my records to prove it. Take care. (KD) 11/30/16

A2: You have at least one service-connected disability rated at least at 60%, or two or more service-connected disabilities, at least one of which has a 40% or more disability rating, and a combined rating of 70% or more. You are unable to maintain substantially gainful employment as a result of service-connected disabilities. Marginal employment, such as odd jobs, is not considered substantially gainful employment for VA purposes. (AP) 12/2/16

A3: The way you describe your disabilities the VA will not approve IU because they will say that the Unemployability is caused by a service connected disability and a non-service connected disability. What I would do is to file a notice of disagreement on the finding for the spinal stenosis and slipped disc based upon the condition being secondary to the IHD/CAD. A non-service connected disability that is aggravated by the service connected disability is a secondary condition. Especially if the other condition prevents it from being alleviated. I have used this argument for other conditions and they were service connected, but with your doctor stating that you cannot be operated on because of the IHD that is a good start. I would also file for IU at the same time as the effective date would go back to the date that you applied when they service connect the secondary conditions. (CP) 12/19/16

A4: Contact your closest Disabled American Veterans, D.A.V. and turn it over to them to work it for you. (BB)
3/21/17

-o-o-O-o-o-

If you have a question you want answered you can submit it at <http://www.armedforceslocator.com/ask-a-question.html>. Armed Forces Locator was developed to help veterans, active duty, servicemembers, Reservists, National Guard members and ROTC members locate old friends, current colleagues, and family members who serve or have served in the armed forces. Their mission is to provide an opportunity for those who served to reconnect again with war buddies. Also, locate many topics that are of interest to veterans, active duty servicemembers, and veterans organizations. [Source: <http://www.armedforceslocator.com> | October 15, 2017 ++]

Retiree Appreciation Days ► Scheduled As of 15 OCT 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\veternans 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, mouse over or click on the event under Event Location. Please report comments, changes, corrections, new RADs and other military retiree\veternans 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**

| RETIREE APPRECIATION DAYS | | | | | |
|---|------------|-----------------|--------------------------|------------|-------------------|
| Attend and receive benefits information, renew acquaintances and ID Cards, get medical checkups, and receive other services. Some RADs include dinners or golf tournaments. For more information, contact the Retirement Services Officer sponsoring the RAD. | | | | | |
| Location | Date | Contact | Location | Date | Contact |
| JB Myer-Henderson Hall, VA | Oct. 6 | (703) 696-5948 | USAG-Ansbach | Oct. 25 | 0981-183-3301 |
| Carlisle Barracks, PA | Oct. 7 | (717) 245-4501 | USAG-Italy | Oct. 26 | 0039-0444-61-7493 |
| JB Ellington Field-Houston, TX | Oct. 7 | (210) 221-9004 | Fort Meade, MD | Oct. 27 | (301) 677-9603 |
| Fort Knox, Ky | Oct. 13 | (502) 624-1765 | Fort Rucker, AL | Oct. 27 | (334) 255-9124 |
| Rock Island, IL | Oct. 14 | (563) 445-0191 | Fort Hood, TX | Oct. 27-28 | (254) 287-5210 |
| JB San Antonio, Fort Sam Houston, TX | Oct. 14 | (210) 221-9004 | Wiesbaden, Germany | Oct. 28 | 0611-705-5338 |
| Fort Wainwright, AK | Oct. 14 | (907)353-2099 | Fort Leavenworth, KS | Oct. 28 | (913) 684-2425 |
| Camp Humphreys, Korea | Oct. 14 | (315)753-8839 | Fort Hamilton, NY | Oct. 28 | (718) 630-4552 |
| Fort Carson, CO | Oct. 14 | (719)526-2840 | Fort Benning, GA | Nov. 3 | (706) 545-1805 |
| Rheinland-Pfalz/Ramstein, Germany | Oct. 18 | 0631-411-8838 | Fort Gordon, GA | Nov. 4 | (706) 791-2654 |
| Stuttgart, Germany | Oct. 19 | 07031-15-3442 | Daegu, Korea | Nov. 4 | 0503-353-3872 |
| Fort Riley, KS | Oct. 20 | (785)239-3320 | Yongsan, Korea | Nov. 18 | 0503-323-3735 |
| Schinnen, Netherlands | Oct. 20 | 0032-65-44-7267 | Fort Huachuca | Feb. 10 | (570) 533-5733 |
| Fort Bragg, NC | Oct. 20-21 | (910) 396-5304 | Fort Stewart, GA | Feb. 24 | (912) 767-5013 |
| BENELUX-Brussels | Oct. 21 | 0032-65-44-7267 | Peoria, IL | Apr. 7 | (309) 676-9725 |
| Fort Polk, LA | Oct. 21 | (337) 561-0402 | Fort Jackson, SC | May 17-19 | (803) 751-6715 |
| USAG-Bavaria | Oct. 24 | 0964-183-8709 | JB Langley-Eustis, VA | May 19 | (757) 878-5884 |
| | | | Presidio of Monterey, CA | Jun. 9 | (831) 915-7342 |

[Source: RAD List Manager & Army Echoes | Milton Bell | October 15, 2017 ++]

Vet Hiring Fairs ▶ Scheduled As of 15 OCT 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. refer to the Hiring Our Heroes website <http://www.hiringourheroes.org/hiringourheroes/events>. Listings of up upcoming Vet Job Fairs nationwide providing location, times, events, and registration info if required can be found at the following websites. You will need to review each site below to locate Job Fairs in your location:

- <https://events.recruitmilitary.com>
- <https://www.uschamberfoundation.org/events/hiringfairs>
- <https://www.legion.org/careers/jobfairs>



[Source: Recruit Military, USCC, and American Legion | October 15, 2017 ++]

Vet State Benefits & Discounts ► Massachusetts 2017

The state of Mississippi provides several benefits to veterans as indicated below. To obtain information on these refer to the attachment to this Bulletin titled, “**Veteran State Benefits –MA**” for an overview of the below those benefits. The below are available to veterans who are residents of the state. For a more detailed explanation of each refer to <http://militaryandveteransdiscounts.com/location/mississippi.html> & <http://www.mass.gov/veterans> .

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

[Source: <http://www.military.com/benefits/veteran-state-benefits/massachusetts-state-veterans-benefits.html> | October 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. Bills are normally initially assigned to a congressional committee to consider and amend before sending them on to the House or Senate as a whole.

VA Health Care Access Update 57 ► S.1153 | Vet ACCESS Act

Senator Tammy Baldwin (WI) introduced S. 1153, the **Veterans Acquiring Community Care Expect Safe Services (ACCESS) Act**. This bill would give VA the authority to deny, revoke, or suspend the eligibility for certain community health care providers from treating veterans based on having a medical licensure violation or when a private provider has entered into a settlement agreement for a disciplinary charge related to the practice of medicine.

This measure ensures the safety of veterans and is in accordance with DAV Resolution 173, which calls for, "...strengthening, reforming and sustaining a modern, high-quality, accessible and accountable VA health care system" and "... creating integrated networks with high-quality community providers where needed..." S. 1153 would contribute to improving the quality of providers within such integrated networks by helping to preclude certain health care providers when VA is aware they have a documented record of endangering patient health or safety.

Readers are invited to join DAV in supporting this legislation to ensure that only the best health care practitioners treat our nation's ill and injured veterans. Towards this DAV has prepared an editable preformatted email to send to your Senators encouraging them to vote for this bill. To access and send the email refer to the

<https://www.dav.org/learn-more/legislation> and click on Action alerts. [Source: DAV Action Alert | October 2017 ++]

VA Budgeting ► New Legislation Pushed to Mandate New Oversight

Tired of emergency funding requests from Veterans Affairs officials, a bipartisan group of senators is pushing new legislation mandating new outside oversight of the department to spur better budgeting practices. “Over the past several months, we’ve seen the VA lurch from funding crisis to funding crisis because of its inability to effectively manage its budget,” said Sen. John McCain (R-AZ) and one of the proposal’s sponsors. “Our veterans deserve to have certainty that their access to quality care in the community through the Veterans Choice program will continue uninterrupted. Our legislation would require the VA to responsibly and accurately manage its budget to eliminate future funding crises and give veterans the confidence in their care they deserve.”

The move comes just days before congressional lawmakers and VA officials are expected to unveil plans to overhaul the department’s community care programs, which allow veterans to receive medical care from private-sector physicians with federal dollars. That plan could become the third major piece of legislation passed by Congress this year related to the VA Choice program, created in 2014 to help alleviate medical wait time problems within the Veterans Health Administration. But multiple times since then, lawmakers have had to intervene with funding changes — including a \$2.1 billion boost in August — because of problems with estimating spending and usage rates with the program.

The new legislation would require a third-party review of all VA financial processes, including those spending rates. It would also mandate that any VA funding requests be addressed at least 45 days before a program’s funding is set to run out. “The VA’s inability to provide Congress with an accurate budget is hurting veterans and taxpayers across this nation,” said Sen. Jon Tester (D-MT), and ranking member of the Senate Veterans’ Affairs Committee, said in a statement about the new proposal. “We can’t keep throwing money at the VA without more accountability over their budget and spending practices. This bill will give us more confidence in the VA’s ability to budget in a way that ensures veterans are getting the very best care.”

McCain said without the new oversight, “our effort in Congress to develop a plan for consolidating veterans health care in the community will continue to face difficulty.” The proposal is also supported by Sens. Tim Kaine (D-VA) and Joe Manchin (WV). Republican House lawmakers met with veterans groups last week to discuss plans for the upcoming community care program changes. VA officials have warned that Congress must act on an extension of the Choice program before the end of the year or risk disrupting care for thousands of veterans. [Source: NavyTimes | Leo Shane III | October 9, 2017 ++]

VA AL-TBI Update 01 ► HR .3819 | Pilot Program 5-Month Extension

The Assisted Living for Veterans with Traumatic Brain Injury (AL-TBI) pilot program provides specialized residential care and rehabilitation to eligible Veterans with traumatic brain injury to enhance their rehabilitation, quality of life, and community integration. Veterans meeting eligibility criteria are placed in private sector TBI residential care facilities specializing in neuro-rehabilitation or neurobehavioral rehabilitation. Key Elements of the AL-TBI Pilot

- VA's AL-TBI pilot began in 2009 and was programmed to operate until October 6, 2017
- AL-TBI pilot places Veterans that meet the eligibility criteria in private sector TBI residential care facilities specializing in neurobehavioral rehabilitation.

- The program offers team-based care and assistance in areas such as memory, communication, and mobility.
- Since 2009 VA has enrolled over 200 Veterans in the AL-TBI pilot in 47 different facilities located in 22 states.
- Veteran eligibility criteria include: Enrolled in VA care; Received hospital care or medical services provided by VA for moderate to severe TBI; and Unable to manage two or more routine or instrumental activities of daily living without supervision and assistance.
- VA continues to accept new referrals for eligible Veterans. Veterans and families who are interested in learning more about the AL-TBI pilot program should contact the local VA Case Manager at their supporting VA medical center. Go to www.va.gov/directory/guide/home.asp to locate one

On 29 SEP, Trump signed into law P.L. 115-62, **Department of Veterans Affairs Expiring Authorities Act of 2017**. Among the provisions is a five-month extension beyond the 6 OCT termination date of the assisted living pilot program for veterans with traumatic brain injuries. This will enable VA to transition currently participating veterans into other existing programs for ongoing support and rehabilitation. The bill also extends caregiver support payments, a pilot program for newly separated women veterans to receive counseling in retreat settings, and a temporary increase in payments for travel to vet centers.

The legislation extends several other health-care related provisions, such as collection of co-payments and recovery from third parties for care provided in some instances for non-service connected care. Authorities in both benefits and homeless veterans programs were also extended. The measure also included some technical corrections to the recently enacted Harry W. Colmery Veterans Education Assistance Act of 2017 (P.L. 115-48), where were requested by the Trump administration. [Source: American Legion Dispatch | James Oxford| October 9, 2017 ++]

Vet Asbestos Claims ► H.R.906 | Slow Fund Depletion

There are some hard truths embedded in the history of asbestos: Exposure to the deadly mineral continues to claim thousands of lives a year, with military veterans in their 60s and older overrepresented among the victims. And there is a limited amount of money to pay for their injuries. Uncontrolled litigation and gaming the system are depleting the funds available for sick veterans. The Furthering Asbestos Claim Transparency Act is a much-needed reform to a system that currently favors unscrupulous lawyers at the expense of legitimate asbestos claimants.

Veterans deserve the right to sue over their exposure to asbestos, which was ubiquitous in Navy ships and military installations until the 1970s. But recovery options are limited, and plaintiffs' lawyers have driven virtually all the big asbestos manufacturers into bankruptcy. This leaves a dwindling number of companies and asbestos bankruptcy trusts with a limited pool of assets to pay future claims. These trusts are typically under the control of the plaintiffs' lawyers themselves – the equivalent of putting the foxes in charge of the henhouse. An audit of one of the biggest trusts found that 41 percent of claimants had no disease or a less severe condition than claimed. More recent investigations have uncovered evidence of widespread fraud.

People only have one set of lungs and when they receive the tragic diagnosis of mesothelioma, the deadly cancer associated with asbestos exposure, they need all the help they can get. And by preventing the trusts from sharing information among themselves, with civil courts or with outside entities like Medicare and the Veterans Administration, lawyers can quietly multiply a single legitimate case into numerous fraudulent claims. Lawyers typically collect 30 percent or more of what their clients receive, and by manipulating claims to boost their fees they leave less money for future, equally deserving victims.

The roughly 60 asbestos trusts outstanding currently hold more than \$30 billion in assets, but they are being drained at a rapid pace. Lawyers have clustered their cases in jackpot districts to maximize recoveries at the expense of future claimants. The situation is particularly dire for veterans, who genuinely can claim to have been exposed to asbestos in multiple locations as they moved from ship to ship or from barracks to depot. I'm not suggesting they

shouldn't be able to recover based on such varied work histories. But it is important for multiple claims to be disclosed and made available to a judge so everybody involved knows up front what a person has claimed and what they've been paid for so far.

The Furthering Asbestos Claim Transparency (FACT) Act of 2017 Act would address some of this gamesmanship by requiring the trusts to make quarterly reports with the bankruptcy court detailing claimants' names and their claims against the trust. It doesn't require them to disclose settlement amounts, and it doesn't require disclosure of sensitive information like Social Security numbers. Ohio passed its own version of FACT in 2013. Despite the claims of plaintiffs' lawyers, there has been no appreciable delay in the resolution of cases since the law went into effect. It's time to enact federal legislation to bring order and transparency to the entire asbestos bankruptcy system. [Source: The Journal Gazette | James Bauerle | October 3, 2017 ++]

VA BRAC Update 01 ► Draft Legislation Under Consideration

House lawmakers took the first steps 12 OCT toward shutting down hundreds of Veterans Affairs facilities through a process similar to military base closure rounds, saying the move is critical to keep the department from wasting millions of dollars on underused, aging buildings. But some of the largest veterans groups said they have serious concerns with the proposal, saying it's ripe for abuse and could tempt VA officials to outsource more veterans' medical care to private-sector physicians. Even supporters admitted the plan will be a difficult sell on Capitol Hill. "This bill is bold, transformative and controversial," said Rep. Phil Roe, (R-TN), chairman of the House Veterans' Affairs Committee. "Moving forward with it will require a significant amount of political courage and, let's face it, members of Congress are not known for that."

At issue are the roughly 6,300 facilities owned VA spread across the country. Department officials have said more than 57 percent of those locations are more than 50 years old, and hundreds of others provide little value to veterans care or department management. VA Secretary David Shulkin in June announced plans to close at least 430 vacant or mostly vacant buildings over the next year, a move that is expected to save about \$7 million annually. But he also has pushed for further authorities to close other locations, to better match department resources with future needs. The VA base-closure-style plan — dubbed the **Asset and Infrastructure Review Commission** — would establish an eleven-member outside panel to recommend facility closings and resource shifts based on facility needs criteria to be established by the VA secretary.

That would involve an in-depth review of VA real estate and health care strategies, complete with public hearings. The final commission recommendations would need to be approved by the president. Congress would have 45 days to override the White House decision if they disagree with the planned closings and moves. Much like the military base closing commissions, the set-up is designed to separate facility closing choices from political whims. Roe and committee ranking member Rep. Tim Walz (D-MN) said the commission could also recommend setting up new facilities in underserved areas, using savings from other closings to pay for the new sites.

But veterans groups who testified before Roe's committee on 12 OCT said they have serious concerns that an outside panel could focus on savings instead of seeking the best care options for veterans, creating major problems for a system already dealing with wait time and access challenges. Carl Blake, associate executive director at Paralyzed Veterans of America, said his group could support the idea "assuming the intent is to right-size the VA and not simply use this opportunity to reduce the footprint of VA for the purpose of fulfilling a promise for greater community care access and cutting spending." Officials from Disabled American Veterans said they support a full review of the department's national footprint but aren't convinced the base-closing commission is the right path for that discussion. Officials from the American Legion said their group would not support the plan unless veterans groups had the opportunity to veto recommendations they deem harmful to veterans care.

But even without those concerns, any federal facility closing process faces a difficult path in Congress. Defense Department officials have been petitioning lawmakers for five years to hold another military base closing round, only to have the proposal rebuffed annually. Government Accountability Office researchers said the last five BRAC rounds have produced nearly \$12 billion in annual federal savings. But the last round conducted in 2005 still has not recouped its original costs, which has led many in Congress to question the value of such cutbacks. Roe insisted this plan is different, because the focus isn't on generating savings but instead better preparing the department to respond to veterans needs. The proposal for now is only draft legislation, but he said he hopes to move forward on the issue in coming weeks.

Veterans groups said they would continue to work on the issue with lawmakers but emphasized their skepticism. Acting VA Deputy Under Secretary for Health for Policy Regan Crump said department officials are not backing the idea of an outside asset commission yet, but do support "the need for more flexibility" with VA facilities. As the congressional debate continues, VA officials are reviewing another 784 non-vacant but underused facilities to determine if they can close or restructure them in coming months. Go to <https://www.youtube.com/watch?v=B6nBQ1ZzFz8&feature=youtu.be&t=507> to view the House Committee on Veteran Affairs hearing. [Source: MilitaryTimes | Leo Shane III | October 12, 2017 ++]

*** Military ***



MSL(V) Landing Craft ► \$1B Mike Boat Replacement Contract Awarded



The Army has awarded a nearly \$1 billion contract to the Oregon-based shipbuilder Vigor Works to replace its aging Mike Boats with a larger, faster Maneuver Support Vessel (Light). The contract announced 26 SEP is a firm fix-price contract for \$979,794,011 with an estimated completion date in 2027. The MSL(V) replaces the Landing Craft Mechanized 8, a 74-foot boat with a top speed of 9 knots that first entered service in the late 1950s. The MSL(V) will be 100 feet and can haul one M1A2 Abrams tank, two Stryker armored vehicles with slat armor or four

joint light tactical vehicles with trailers. It will have a top speed of 18 knots. [Source: Defense News | David B. Larter | September 30, 2017 ++]

Military Holiday Mailing 2017 ► Deadlines

It's not even Halloween yet, but it doesn't hurt to start your planning for those end-of-year holiday cards and packages going to or from military locations overseas. Military postal officials and the U.S. Postal Service have released some suggested deadlines to make sure those goodies reach their destinations in time for Christmas. To get them there in time for Hanukkah, which starts on 12 DEC this year, subtract 13 days from the deadlines.

The deadlines for various methods of shipping are the same for all the APO/FPO/DPO (diplomatic post office) ZIP codes, with the exception of some mail going to APO/FPO/DPO ZIP 093, which covers overseas contingency areas. The deadlines:

- USPS Retail Ground Mail (formerly known as Standard Post): **Nov. 6.**
- Space Available Mail (SAM): **Nov. 27.**
- Parcel Airlift Mail (PAL): **Dec. 4.**
- First Class and Priority Mail (letters, cards and packages): **Dec. 11** except for contingency ZIP 093, which is **Dec. 4.**
- Priority Mail Express Military Service: **Dec. 16** (note: not available for ZIP 093).
- Domestic mail (not APO/FPO) to sailors on ships in port or on shore duty in the U.S.: First Class by **Dec. 19**, Priority Mail by **Dec. 20**, Priority Express Mail by **Dec. 22.**

You can get information about shipping to military locations overseas, including information about free shipping supplies, at the U.S. Postal Service Military and Diplomatic Mail web page. <https://www.usps.com/ship/apo-fpo-dpo.htm> Those who ship Priority Mail Large Flat-Rate Boxes to an APO/FPO address receive a \$2 discount. [Source: Military.com | Karen Jowers | September 29, 2017 ++]

Army Recruiting ► Pilot Program Combines All 3 Components

The U.S. Army has launched a pilot program to bring all three components -- active, Guard and Reserve -- under one recruiting mission as leaders wrestle with the challenges of adding more soldiers to the force. Last December, the fiscal 2017 National Defense Authorization Act (NDAA) halted the Army's planned drawdown to 450,000 and ordered the active force to grow to 476,000. The move increased the active-duty recruiting mission for U.S. Army Recruiting Command from 62,500 to 68,500, a significant challenge for recruiters who normally start their mission Oct. 1, the beginning of the fiscal year, according to Maj. Gen. Jeffrey Snow, commander of Army Recruiting Command.

"It's a tough mission, and getting that mission one quarter into [fiscal 2017] -- that was the largest in-the-year-of-execution mission increase we have had since we have been an all-volunteer force," Snow told Military.com at the 2017 Association of the United States Army's annual meeting. Despite the hurdle, Snow's command exceeded its fiscal 2017 active goal by more than 300 soldiers. The Reserve component's recruiting goal did not go as well, he admits. Recruiting Command fell short of its fiscal 2017 Reserve recruiting goal of 14,400 soldiers by 1,228

soldiers, Snow said, explaining that some of those soldiers may have gone to the National Guard, which recruits separately from the Army active and Reserve components.

Now a new pilot program, launched in June, will study the possibility of bring the Army's active, Reserve and National Guard under one recruiting umbrella, he said. "The Army has obviously got three components; we only recruit for two of those in this command," Snow said. "United States Army Recruiting Command has responsibility for two components -- that's Reserve and Active." The National Guard falls under the adjutant generals, who work for state governors, he said. "It's a challenge because, right now in many parts of the country, the states put their National Guard ahead of the regular Army and Army Reserve," Snow said.

Recruiting as one Army would mean "we leverage recruiters to recruit for all three components, which I have always felt this is the right thing to do," he said. "It's a multi-year pilot ... because there are some things we are going to have to work through," Snow said. Right now, in 40 out of 50 states, it is actually more advantageous for a young person to join the National Guard than it is to join the Army Reserve, according to Snow. "What the states do, particularly if [potential recruits] have the desire to pursue post-secondary education, the states add state benefits, predominantly in the form of educational benefits, on top of the federal benefits," he said. Recruiting as one Army may be beneficial to the National Guard as well because there are some parts of the country where the Guard struggles to make its mission, Snow said.

For now, he is focused on his fiscal 2018 mission, which features a Reserve recruiting mission increase from 14,400 to 15,600 soldiers. But the real challenge, Snow said, is the proposed increase in the active mission -- from 68,500 to 80,000 soldiers -- which could change once the fiscal 2018 NDAA is finalized. "We don't know what the appropriations are going to be," he said. "Whatever our political leaders decide, if we have to reduce the mission, it's easier to take a mission decrease than a mission increase." [Source: Military.com | Matthew Cox | October 11 2017 ++}

Army Recruiting Update 01 ► Generation Z Impact

According to U.S. Army Recruiting Command, there are 33.4 million Americans ages 17 to 24, the Army's prime demographic for enlisting and commissioning. But there's one hitch: When you whittle that number down for standards, quality and interest? Only about 136,000 are left. The Army's accession standards aren't coming down, so the service must do a better job of conveying to Americans what the Army is and what soldiers do, USAREC Sgt. Maj. Anthony Bowers said Wednesday at the AUSA annual meeting in Washington, D.C. "In recruiting command, our soldiers who come out and recruit, we tell them to be giving guests. They show the community itself what the Army is all about," he said. "We dispel a lot of the rumors, a lot of the stigma that is involved with the military."

That stigma comes from several places. One is that "**Generation Z**," as it's been dubbed, is much less likely to want to leave home and see the world than others, Bowers said. "Many of today's youth are not inclined to want to leave their family and friends," he said. "Family and friends, they oppose them joining the military service." And according to a study, many young Americans see the Army as a last resort, not a top choice for their future. "It was kind of sad for me to find out, me being a prior soldier, the American public thought of the Army as the lower left-hand quadrant, and [that people join] the Army because they had nothing else to do," said James Cox of the Army Marketing Research Group.

Generation Z

A large number of people who join the Army do so because they have a family member who serves or served, Bowers said, and they have a more accurate picture of what the military is like. It has become a family business, Bowers said. And as the number of Americans who serve — about 1 percent — shrinks, so does the number of their family members who might be interested in joining. That interest is key. Of the 33.4 million target population, only

9.7 million are qualified to join the Army, according to USAREC statistics. Reasons for disqualification include fitness and weight standards, medical issues, misconduct, substance use and mental health.

Then they have to be available to join, i.e. they're not already enrolled in college. That brings the number down to 5.7 million. And because the Army isn't looking for just the bare-minimum qualifying recruits, USAREC says only 1.7 million of those young people are of the high quality they want. Finally, of those 1.7 million, USAREC estimates that just 136,000 young people would even be interested in joining the Army. The Army managed to get 6,000 more recruits and officer candidates in the door this year than it had originally planned, thanks to big incentives like bonuses and two-year contracts.

The Army is also focused on social media outreach, Cox said, through recruiting videos and interaction with potential recruits. But it's tough to even catch their eye online. "We have found out we're dealing with the Generation Z population right now," he said. "They are, on average, 21 years old, are using five devices, and have an eight-second attention span." A high school student's likelihood of joining increases, Cox said, if they have some face time with a real soldier. "What we do, when we go into the schools, we try to show them the benefits of joining the Army or the Army Reserve, [that they] still have that ability to go to college," Bowers added. The USAREC mission isn't likely to slow down anytime soon, as the Army is asking to add another 17,000 soldiers to the total force next year. [Source: ArmyTimes | Meghann Myers | October 12, 2017 ++]

Navy UUVRON 1 ► First Underwater Drone Squadron

The Navy has in recent years expanded its use of unmanned, underwater vehicles, colloquially known as drones. And now, the sea service has taken its next step in embracing the rapidly growing technology with the standing up of its first underwater drone squadron. Unmanned Undersea Vehicle Squadron 1, or UUVRON 1, was formally established 26 SEP during a ceremony at the Naval Undersea Warfare Center in Washington state. "Standing up UUVRON 1 shows our Navy's commitment to the future of unmanned systems and undersea combat," Capt. Robert Gaucher, recently departed head of Submarine Development Squadron 5, said in a statement.



Sailors assigned to Explosive Ordnance Disposal Mobile Unit 5 recover an underwater drone in the Pacific in May.

The squadron's mission will be to sustain undersea advantages and extend the reach of the military. When launched from surface ships or submarines, the vehicles can perform mine clearance, ocean floor mapping or reconnaissance, among other missions. "In addition to providing a rapid, potentially lower cost solution to a variety of mission sets, UUVs can mitigate operations that pose increased risk to manned platforms," Submarine Force

Pacific spokesman Cmdr. Corey Barker said in an email. Things are still in the early stages, but the new squadron will eventually operate and maintain all classes of fleet underwater drones, from micro to extra-large vehicles, squadron executive officer Lt. Cmdr. Steve Boatwright said in a statement. [Source: NavyTimes | Geoff Ziezulewicz | October 11, 2017 ++]

USAF Pilot Shortage Update 01 ► VRRAD Program Open Till Dec 2018

The Air Force is encouraging retired pilots to return to active duty to fill rated staff positions and help alleviate manning shortages within the pilot community, the Air Force Personnel Center said in an announcement 2 OCT.. Air Force Secretary Heather Wilson approved the Voluntary Retired Return to Active Duty Program on 11 JUL. It is one of many initiatives the Air Force is implementing to try and retain qualified pilots and improve their quality of life, said Air Force Personnel Center spokesman Michael Dickerson. This includes making sure pilots are used effectively, Dickerson said.

The Air Force is trying to increase the number of new pilots it trains each year by 200, while simultaneously increasing retention bonuses as an incentive to those thinking of separating, Wilson said in an 21 AUG editorial board meeting with Air Force Times. “We are a service that is too small for what’s being asked of us,” Wilson said. “We’ve got to come up with a better way of assessing manpower needs.”

Volunteers for the Voluntary Retiree Return to Active Duty (VRRAD) program would help fill positions where pilot expertise is necessary, said Maj. Elizabeth Jarding, VRRAD rated liaison, in a press release 2 OCT. “We will match VRRAD participants primarily to stateside rated staffs that don’t require re-qualification in a weapon system, with emphasis on larger organizations like major command staffs,” she said. “They’ll fill critical billets that would otherwise remain vacant due to the shortage of active-duty officers available to move out of operational flying assignments.”

- Eligible retirees holding the Air Force Specialty Code 11X can apply on the Retiree Officer Assignment landing page of mypers.af.mil . Individuals who do not have a myPers account can request one at <http://www.afpc.af.mil/myPers>
- Pilots under the age of 60 who retired within the last five years at the rank of captain, major or lieutenant colonel, are eligible to apply. Participation is limited to only 25 retired pilots, with the active duty tour lasting 12 months, Dickerson said.
- Applicants must be medically qualified for active duty with a flying class II physical and must have served in a rated staff position within the last 10 years, or have been qualified in an Air Force aircraft within the last five years, according to the press release.
- The AFPC will accept applications until Dec. 31, 2018, or until all openings are filled, whichever happens first. Retired pilots returning to active duty will only deploy if they volunteer, but will not be eligible for an aviation bonus.

[Source: AirForceTimes | Kyle Rempfer | October 2, 2018 ++]

USMC Parris Island ► Mascot Cpl Legend Dies

Cpl. Legend, a mascot who has served as a Parris Island morale booster since 2011, died on Sept. 17, according to a release from the Marine Corpsdepot. The English bulldog was found unresponsive and taken to the depot's veterinary clinic where he was pronounced dead, according to the release. It states a funeral ceremony will be held at 2 p.m. Oct. 13 at the depot's mascot cemetery.



Cpl. Legend, the depot's 20th mascot, was diagnosed with a heart condition earlier this year and placed on a limited work schedule pending his retirement, according to the release. "Legend was a very relaxed dog," Lance Cpl. Alicia Stull, administrative clerk with Headquarters and Service Battalion and Legend's caretaker since August 2016, said in the release. "It taught me how to be more patient as a person, since he was a very laidback dog." As a morale booster, he participated in the motivational run on family day, the depot's morning colors ceremony, and graduation, the release stated.

Cpl. Legend enlisted in the Marine Corps on Nov. 4, 2011, and graduated from Hotel Company, 2nd Recruit Training Battalion, as an honor graduate, earning him meritorious private first class. He was preceded by Sgt. Archibald Hummer, who died in September of that year. "Each time I left my room, he would run behind me and look at me like I was never going to come back," Stull said. "So I always took him with me wherever I went. He was like my baby."

Opha Mae is set to take over the post as the depot's first female mascot. She is currently in training with Platoon 4044, Papa Company, 4th Recruit Training Battalion and is scheduled to graduate on 17 NOV. "She is excited about anything or everything you put in front of her," said Cpl. Cameron Philips, an administrative clerk with Headquarters and Service Battalion. "She is very social and energetic; her people skills are why she will fulfill her new role excellently." [Source: The Island Packet (Hilton Head Island, S.C.) | Teresa Moss | October 1, 2017 ++]

USS John S. McCain (DDG-56) Update 03 ► Repairs To Be Done in Japan

The U.S. Navy will heavy lift the damaged destroyer John S. McCain to Japan where it will be repaired, according to a Navy release 4 OCT. McCain has been in Singapore since 21 AUG, when it collided with an oil and chemical tanker near the Straits of Malacca, an accident that claimed the lives of 10 sailors. "Damage assessments conducted while the ship was moored in Singapore since the 21 AUG collision revealed the scope of work could be completed in Japan at the lowest estimated cost and returns the ship to full service at the earliest opportunity," the release said. The work will be completed at the U.S. Naval Ship Repair Facility-Japan Regional Maintenance Center in Yokosuka. The Navy did not provide a cost estimate.

The accident was the second of the summer for the Navy. In June, the destroyer Fitzgerald collided with a container ship near Japan, killing seven sailors. The collisions, along with two other safety incidents in 2017, led to a wholesale house cleaning in the Pacific. Pacific Fleet head Adm. Scott Swift fired the three-star U.S. 7th Fleet Commander, followed by a later announcement that he himself would retire after being passed up for U.S. Pacific Command by the Chief of Naval Operations. The head of the surface Navy, Vice Adm. Thomas Rowden, has also announced he plans to retire early. Additionally, the head of the Japan-based Task Force 70, Rear Adm. Charles Williams, and the destroyer squadron commander were both fired by new 7th Fleet boss Vice Adm. Philip Sawyer. The collisions are part of a broader investigation into fleet operations by Fleet Forces head Adm. Phil Davidson.

The McCain's skipper, Cmdr. Alfredo J. Sanchez, and the ship's second-in-charge, Cmdr. Jessie L. Sanchez, were relieved 11 OCT in Japan, according to a 7th Fleet release. "While the investigation is ongoing, it is evident the collision was preventable, the commanding officer exercised poor judgment, and the executive officer exercised poor leadership of the ship's training program," the release states. Both officers, who are not related, were relieved due to a loss of confidence, according to the command. Alfredo Sanchez was reassigned to Naval Forces Japan, while Jessie Sanchez has been moved to Ship Repair Facility in Yokosuka, Japan. Cmdr. Ed Angelinas, former CO of the destroyer McCampbell, has assumed command of the damaged ship, which is scheduled to undergo repairs this month in Japan. Lt. Cmdr. Ray Ball, a chief engineer from the cruiser Antietam, will serve as acting XO of the McCain. Adm. [Source: DefenseNews & NavyTimes | David B. Larter | October 4 & 11, 2017 ++]

USS Shiloh (CG-67) ► USS Bread and Water

Sailors aboard the cruiser Shiloh during the 26-month command of Capt. Adam M. Aycock often worried about the CO's use of one of the Navy's most arcane punishments: confinement for three days in the brig while being fed only bread and water. Over time, Aycock's proclivity for using bread and water to punish junior sailors became well-known on the Yokosuka, Japan, waterfront, where the Shiloh is based, according to sailor comments in three of the ship's command climate surveys. "I do not wear my ballcap at the (Navy Exchange store)," one sailor wrote. "Even the taxi drivers on base know us for being the 'USS Bread and Water.'" "We are known for beating our people down for bread and water," another wrote. "Not the work we do."

Fears about bread-and-water punishments were among several recurring complaint themes in the three surveys during Aycock's command, obtained by Navy Times. Aycock declined to comment for this story via a spokesperson at the Naval War College, where he is now stationed as a researcher. On July 6, 2015, less than two weeks after reporting to the Shiloh, Aycock handed down what records indicate was his first bread and water sentence. That first sailor had been late for curfew and absent without leave, according to records obtained by the Navy Times via a Freedom of Information request. At least six other Shiloh sailors would receive bread and water under Aycock, for offenses that included curfew violations and underage drinking, the records show. One sailor got bread and water in part for lying about his mother living "in a dangerous area," according to records. Several sailors wrote in the surveys that the infractions were the type of thing that should have been corrected by enlisted leadership.

Wallace Lovely, a retired captain who led Destroyer Squadron 31 and the frigate Samuel B. Roberts, recalled giving out bread and water once, at the urging of his chiefs, instead of administratively separating a troubled sailor. Other retired skippers also said the action is rare. "To hear that [bread and water] was used with frequency is unnerving," Lovely, who retired last year, said in an email. "And to hear time and time again that threats of punishment were held over heads is unfortunate." The command surveys reveal sailors outraged by bread and water, worrying that minor, on-the-job mistakes would get them taken to captain's mast.

- "If SN Timmy shows up for work 20 min [sic] late or gets into...what anyone would call a minor incident they are sent to the brig and get the Command Bread and Water special," one sailor wrote in the August 2015 survey.

- “The most absurd charges are used to send sailors to the brig and put them on bread and water,” another wrote. “The poor treatment of this command’s sailors has led to more than one sailor changing their career plans and choosing to leave the Navy rather than stay in and deal with any more of this garbage.”

The first sailor that records show Aycock disciplined with bread and water was a Fire Controlman 3rd Class, an E-4, according to records. Navy regulations state bread and water can only be dished out to sailors ranked E-3 and below. But records from that case show the sailor was busted down a paygrade for the same infraction. Emails obtained by Navy Times also show officials with Regional Legal Service Office were asking questions about Aycock’s use of bread and water. Those records were heavily redacted when provided in response to a Freedom of Information request, and Navy Times is appealing the redactions as well as whether all requested emails were provided. “The CO is very strict and we’ve had at least five Article 15s with Bread and Water punishments since I’ve been here!” a ship secretary wrote in a 2015 email.

Navy officials declined to say where the Shiloh sailors served the three-day punishments, but the Navy has a brig facility at Yokosuka, where the cruiser is based. Officials were also unable to provide a number regarding how many bread and water punishments have been handed down by COs of other 7th Fleet vessels. “To date, confinement on bread and water remains a valid punishment,” Naval Surface Force spokesman Cmdr. John Perkins said in an email. Ending bread and water is one of a set of military justice reforms included in last year’s defense bill that are awaiting President Trump’s signature. “Bread and water is a punishment that I feel should be reserved for those that commit the highest of offenses,” one Shiloh sailor wrote in a survey. “Ship, shipmate, self is often preached onboard this ship but I believe it needs to be revised. A happy crew is a healthy crew that will stick up for each other and band together.” [Source: NavyTimes | Geoff Ziezulewicz | October 9, 2017 ++]

Military Capabilities Assessment ► Warning From Heritage Foundation

U.S. military capabilities continued to stand still or erode as world threats proliferated during 2017, a new study is warning. Those are the findings of The Heritage Foundation’s 2018 Index of U.S. Military Strength, which offers reviews of the past year’s defense issues. The index, which was to be released 5 OCT, may take on extra influence this year. While previous editions were well regarded, Heritage is the think tank with the closest ties to the Trump administration and is viewed as having a major influence on discussions within the White House and conservative members of Congress. The report comes as several major policy reviews of the Trump Pentagon are pending, including a broader national security review, a missile defense review and a nuclear posture review.

Broadly speaking, the index covers two pots of information — a look at the global operating environment and an internal assessment of U.S. military strength. All topics are rated on a one-to-five scale with various descriptions, such as “very weak” or “marginal” attached. Defense News was given an exclusive interview with Heritage expert Dakota Wood, who edited the over 400-page report, ahead of its formal release. The full report can be read at <https://www.defensenews.com/pentagon/2017/10/05/a-significantly-weaker-america-major-study-warns-of-eroding-us-military/Heritage.org/Military>.

International instability

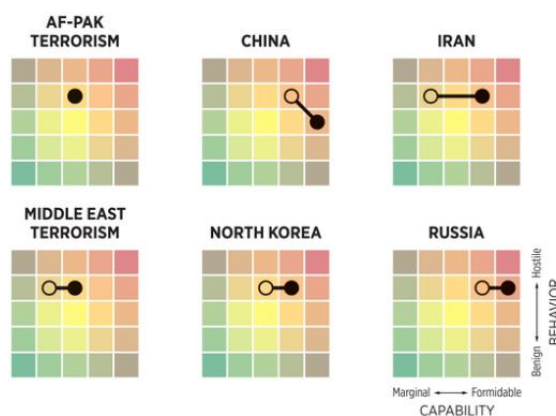
“For decades, the perception of American strength and resolve has served as a deterrent to adventurous bad actors and tyrannical dictators,” the report reads. “Regrettably, both that perception and, as a consequence, its deterrent effect are eroding. The result is an increasingly dangerous world threatening a significantly weaker America.” Wood said, “Unless someone drops a nuke on New York City, events kind of move slowly,” “You want to see a significant change in order to say, all things considered, out of a full year, this is a meaningful shift.”

A good example of that thinking shows in the fact that Heritage did not change North Korea's threat ranking from 2017 despite a series of missile and nuclear tests and increasingly heated rhetoric. "They haven't moved any different types of forces closer to the South Korean border. They haven't shelled an island or sunk a ship. The missile shots are clearly very provocative, but they haven't put a warhead on the end of them, even a conventional warhead, to blow something up," explained Wood. "Do we look at testing and improving their nuclear sets of capabilities as worrisome? Absolutely. Does it look like it's heading in a direction we'd rather not see it go? Absolutely," he continued. "Does it shift it into the worst category in terms of a threat to the United States? We weren't quite ready to make that leap."

However, changes did occur, particularly in the Asia Pacific region. Overall, Heritage downgraded alliances in the region from "excellent" to "favorable" and political stability from "favorable" to "moderate." Tied into that is a change in posture from China, which saw its capability raised by its threat downgraded. In essence, Wood said, China has stopped being as aggressive towards its neighbors since it has successfully militarized islands around the South China Sea. "You can get more capable and your behavior becomes less worrisome," Wood noted. "You can do that once you've established your positions." In positive news, Heritage judges that the behavior of threats of Middle Eastern terrorism actually decreased over the last year from "hostile" to "aggressive."

Growing Threats to the U.S.

Since 2015, most threats to the U.S. have grown in capability and maintained their aggressive behavior. 2015 ○ 2018 ●



SOURCE: Index of U.S. Military Strength.

heritage.org

Graphic from the Heritage Foundation's 2018 Military Strength Index showing the shift from 2015 to now.

The above index gauged America's armed forces' as "marginal" in their ability to win wars against two major adversaries simultaneously, its yardstick for what the nation needs. In the report, Heritage calls for an Army of 50 brigade combat teams, a Navy of 346 ships and 624 strike aircraft, an Air Force of 1,200 fighter/attack aircraft and a Marine Corps of 36 battalions. Any buildup would be a tall order under current Capitol Hill dynamics. Lawmakers championing a larger military have for years run into the cross-currents of Republican opponents of deficit spending and Democratic allies of nondefense spending — all pressurized by statutory budget caps passed in 2011.

Heritage gave the Navy, Air Force and nuclear suite a collective grade of "marginal" for total power — a kind of D grade — compared with a top score of "very strong." The Marine Corps, meant to be the nation's expeditionary armed force, which sustained decreases in amphibious ships and available aircraft as aging aircraft have been decommissioned. The index downgraded its readiness from "marginal" to "weak," alongside its capacity — attributed to a number of aging air and land platforms. "The Marine Corps dropped because of their aircraft woes and its general readiness," Wood said. The index cited the USMC's reporting at the end of 2016 that only 41 percent of its fixed-wing and rotary-wing aircraft were flyable.

The Heritage index judged the Army's capacity and readiness as "weak" and its capability as "marginal." Despite end-strength increases, modest progress with the Oshkosh Joint Light Tactical Vehicle and the BAE Armored Multi-Purpose Vehicle and inadequate procurement budget levels won the Army a "weak" for "capability of equipment." Heritage cited congressional testimony from Gen. Daniel Allyn, who served as Army vice chief of staff from August 2014 to June 2017. According to Allyn, a third of its BCTs, a quarter of its combat aviation brigades and half of its division headquarters are ready — and only three BCTs would be ready to "fight tonight." The 2017 defense policy bill reversed the Obama administration's planned cuts to set the active Army's authorized end strength to 476,000, the Reserve to 199,000 and the National Guard to 343,000. Still, the Army has decreased to 31 BCTs, with only 10 considered "ready."

Heritage calls the 276-ship Navy's capacity "marginal" and pushes for increases of aircraft carriers from 11 to 12, large surface combatants from 88 to 104, attack submarines from 48 to 66 and amphibious ships from 34 to 38. Its readiness was downgraded from "strong" for 2017 to "marginal," and its ability to surge to meet combat requirements went from "weak" to "very weak," as the service has sacrificed long-term readiness to meet heavy operational demands. The Navy experienced three ship collisions and one grounding during 2017, where 17 sailors were killed. That led to a brief operational stand down and fueled calls on Capitol Hill to increase defense spending. "People were really quick to talk about readiness, and it was too low in the defense budget or [budget caps], but we did not make that jump because the investigation isn't complete yet," Wood said. "But it does indicate [a deficiency] in basic attention and ship-handling skills."

The Air Force remained "marginal," but its capacity was downgraded from "strong," as Heritage highlighted the service's fall from 70 combat-coded active-duty fighter squadrons in Desert Storm to 32 currently. Also of concern: the remaining fleet's old age and hiccups in the F-35 joint strike fighter and KC-46A air tanker aircraft. "Of 36 squadrons, only four are assessed as full-spectrum mission-capable, so pilots have enough hours to fly the various profiles, fly high, fly low, fly in contested airspace," Wood said. "If you aren't flying as many hours, you have to pick and choose what you train to do." Heritage, in part, highlighted recent congressional testimony from Air Force Secretary Heather Wilson that the service is too small to meet mission requirements and that the Air Force is at its least ready in its history.

[Source: DefenseNews | Joe Gould & Aaron Mehta | October 4, 2017 ++]

Army COS ► Pray For Peace, Prepare For War

The Army chief of staff has a message for his commanders: If it doesn't increase combat readiness, don't do it. Gen. Mark Milley on 10 OCT also called out North Korea as the No. 1 threat to U.S. national security and asked the officers leading operational units to be ready to meet that threat and any other, taking their own units' readiness into their hands. "Do not wait on orders and printed, new regulations and new manuals. Do not wait on force structure changes. You and you alone are responsible for the readiness of your unit," he said during the annual AUSA meeting in Washington, D.C. "Put simply, I want you to get ready for what might come, and do not do any tasks that do not directly contribute to increasing combat readiness in your unit."

Readiness has long been Milley's No. 1 priority, but the time when the Army might need to call on that readiness is closer than ever, he said. "Why is it that we must be ready?" Milley asked. "Well, you don't have to have access to top secret intelligence. All you have to do is pick up a newspaper or watch the news." That news, increasingly, is of threats from North Korea. "It is on the Korean peninsula where, in my view, we find the most dangerous near-term threat to the U.S.," he said. Not only will well-trained, well-equipped soldiers give the Army the capacity to fight wars, but they also can be the key to preventing them, he added. "Readiness deters enemies. It can end war quickly," he said. "So, as soldiers, as America's sentinels of freedom, we will pray for peace every day. But at the same time, the U.S. Army will prepare for war."

But it's not only up to commanders to keep the Army ready, Milley said. "While commanders will prepare our force for today, we, the institution, must prepare our force for tomorrow," he said. To support that goal, the Army is standing up a modernization command. "Faster results will be obtained through significant streamlining of processes, to a SOCOM-like model of 'buy, try, decide and acquire' – rather than the current industrial age, linear model that takes years to establish requirements, decades to test – and it may take a long, long time to go from idea to delivery," Milley said. The Army has to stay on the offense, he added, and they have to do it by staying ahead of competitors and ready to fight. [Source: ArmyTimes | Meghann Myers | October 10, 2017 ++]

Space Warfare ► Strategic Review Underway

On 5 OCT was what we'll call Space Day for the Trump Administration, with perhaps the most national attention ever paid to military and intelligence space in public by the senior officials of a White House and the military. Here's a summary of the news from the meeting of the reborn Space Council and a later speech by Air Force Secretary Heather Wilson:

A full-scale strategic review (a "Strategic Framework") of space warfare is underway, guided by four objectives laid out by National Security Advisor H.R. McMaster.

- Strengthen the safety, stability and sustainability of space activities. McMaster said he might add resilience;
- Deter and, when necessary, defeat adversaries space and counterspace threats that are hostile to the United States and our allies;
- Partner with the US commercial sector to ensure that American companies remain preeminent;
- Maintain and extend the US human and robotic presence beyond earth to enhance knowledge of ourselves, our planet, the solar system and the universe.

The framework will be forward to President Trump within 45 days for approval. Pence said he wanted to see it within 45 days.

Secretary Heather Wilson seemed to commit the US to more "offensive" weapons for space war later in the day. "We have to be able to do something if things are going wrong," Wilson said at the Center for Strategic and International Studies. "Offensive" weapons will be needed. "We need the ability to create effects, defend ourselves and deter actions," she said. Her comments are the latest in what is clearly a serious increase in attention — if not funding — for offensive space weapons. It began under the Obama administration and has escalated considerably over the last three years. Most of the rest of her remarks were standard restatements of the need for improved space situational awareness and related issues. Wilson did mention an "overarching" review, that certainly sounded like McMaster's mention of the Strategic Framework.

What did independent experts think of the Space Council meeting? "There was a strong effort by Pence to cast the US as 'behind, in space,'" the Secure World Foundation's Brian Weeden wrote in an email, "but that was not supported by the actual remarks from the panelists. Several of them pointed out the US was actually ahead of other countries in many areas." Both Weeden and Theresa Hitchens, a space expert now at the University of Maryland, pointed to the focus on regulatory actions discussed by the council. Predictably, Gwynne Shotwell, president of SpaceX, called for her company and other so-called new space ventures to be freed of regulation. Pence called for a 45-day turnaround on a review of regulations, which Hitchens notes is incredibly fast for such a thorny mix of commercial, military, civil space issues, including ones that could have long-term safety and strategic implications.

Weeden says OMB Director Mick Mulvaney and Pence, “jumped on the issue for ‘de-regulating’ space, and asked for a decision within 45 days. And in some areas that’s true, mainly on national security restrictions. But the bigger issue is that there’s not enough regulation, in the sense that there’s no framework for enabling new/innovative private sector activities.” The US has not decided who will handle space launch monitoring for the commercial sector as it expands and increasingly uses non-governmental launch sites. There are also a wide range of issues about the management of space debris and related items that are really managed in a careful but ad hoc fashion.

One persistent issue we will about again and again is the creation and management of international norms and standards for space launch, control of satellites once in orbit and their eventual disposal. Retired Adm. James Ellis, former head of Strategic Command, pressed the need for a space version of the Incidents at Sea agreement we hammered out in the early 1970s with the former Soviet Union. The issues of space norms and TCBMs (Transparent and Confidence Building Measures) has been hotly debated within the US government and with China and Russia for close to a decade.

“The emphasis that Ellis put on the need for rules of the road and the need for the US to be involved in leading the international community in developing those was a very welcome sign for me,” says Hitchens, a longtime supporter of such an approach. But there’s also the larger question of whether the Space Council will really mean anything or just be a very grand talking shop. This first meeting “was more substantive than I thought it would be, especially for a public meeting,” avers Hitchens. Weeden, a former Air Force missileer, was a tad less charitable. “If it gets senior leader buy-in on important decisions in the future,” the council may prove fruitful, he says. [Source: Breaking Defense | Colin Clark. | October 6, 2017 ++]

USMC Infantry Squads ► Plans to Make Them More Lethal Than Ever

The Marine Corps is investing millions of dollars for new equipment to make infantry squads more lethal than ever. Now, senior leaders are also talking about a fundamental reorganization of the rifle squad to put older and more seasoned noncommissioned officers in charge of those expanding capabilities. Plans under discussion would -require infantry squad leaders be staff -sergeants, who might have eight to 10 years of experience, rather today’s sergeants and corporals who might still be at the end of their first term of enlistment. The proposal also calls for creating a new position of “assistant squad leader,” which would be a sergeant who is second in command and will focus on technology, according to Marine Corps officials familiar with the proposal.

That would amount to the biggest change in the structure of Marine rifle squads since the Second World War. It could have far-reaching impacts on the Marine Corps’ culture, force structure, career paths and ground-level operations. The idea of having staff noncommissioned officers fill squad leader billets reflects the Marine Corps’ desire to have more mature, experienced Marines lead increasingly lethal rifle squads. “The complexity of the battlefield and the operating environment today is so much more complex than it was for me in the Gulf War or Somalia,” said 2nd Marine Division Gunner, CWO 5 Christian Wade, a longtime Marine who is leading an experiment with reorganized squads. “With the information environment, with technologies, with connectiveness — we have essentially taken combat responsibilities and pushed them one level lower than when I was a young sergeant,” Wade said.

For decades, Marine sergeants have typically served as squad leaders, but lower ranking Marines often fill the position when there aren’t enough sergeants for the job. Wade noted that while the demands on squad leaders have grown over the past 30 years, the time it takes Marines to get promoted has shortened by years. When Wade entered the Marine Corps in the 1980s, he said, it typically took Marines an average of seven or eight years to make sergeant, he said. Now that the Corps’ promotion scale is aligned with the rest of the Defense Department, Marines can be promoted to sergeant after four years and staff sergeant after eight years. “The rifle squad leader is — in my opinion — the most important Marine in the Marine Corps,” Wade said. “He is the leader of our base unit around

which the rest of the Marine Corps revolves. The success of that squad is directly dependent on his credibility, his maturity, his experience, his decision-making and his skill and will.”

Information overload

Today’s rifle squads are getting more gear than ever before. The Corps is buying thousands of powerful M27s to replace M4s. And more Marines are getting suppressors for their weapons. Gear in the testing phase includes new squad-level drones, anti-tank missiles and laser range-finders that could allow Marines to call in artillery or airstrikes without having a joint terminal attack controller on the ground. Marine officers are worried that today’s squad leaders are confronted with far more information, intelligence and communications equipment than ever before.

Lt. Col. Daniel Wittnam, who heads the ground combat element for the Marines’ Plans, Policies and Operations office, framed the question as an across-the-Corps talent management problem. “How much information can one -person process?” Wittnam said at the annual Modern Day Marine military expo in Quantico, Virginia, in September. “How do we shape the force to not overload the assistant squad leader or squad leader?” he told a crowd of -attendees at the expo. Wittnam said the assistant squad leader position would function like a chief technical officer for the squad, coordinating and pushing capabilities to the squad leader.

The Corps is testing the new rifle squad structure with the “Übersquad” from 1st Battalion, 6th Marines, which is experimenting with many ideas that the Corps’ top brass is considering for the entire infantry force, including special operations gear, fully automatic rifles and suppressors. Wade is overseeing the Übersquad and right now, he is looking for a staff sergeant to serve as squad leader, he said. He wants a Marine about 25 years old because that’s the age when the human brain is fully formed, he said. If his idea is approved, the staff sergeant could lead the Übersquad in the next month or two.

He wants to “take what we now call and think of conceptually as a staff sergeant, who has been through the Infantry Unit Leader’s Course — that’s the guy I want to put in charge of my Übersquad,” Wade said. “That Marine that I’m looking for is a staff sergeant. But in relative terms, he’s what during the ’80s we would have considered a sergeant because of time and maturity.” For the Marine Corps, the current structure that saddles young Marines with big responsibilities is a source of pride. In the Army, on the other hand, staff sergeants are already serving as squad leaders and sergeants serve as team leaders. Special operations forces teams also often have more seasoned leaders with higher rank. [Source: MarineCorpsTimes | Jeff Schogol | October 9, 2017 ++]

Armored Multi-Purpose Vehicle ► Vietnam-era M113 Replacement



AMPV



M113

The Army's replacement for the Vietnam-era M113 armored personnel carrier has taken another step forward, with one of the first production models of the Armored Multi-Purpose Vehicle (AMPV) on display at this week's Association of the US Army conference. No. 13 off BAE's production line, this general-purpose AMPV is a heavily armored workhorse intended to keep up with M1 Abrams tanks and M2 Bradley infantry fighting vehicles, hauling supplies, troops, and if need be casualties. The Army's also buying specialized ambulance, engineer, mortar carrier, and command post models.

Lucky 13 comes straight to AUSA from the Army's Aberdeen test center, and it's fully equipped with smoke launchers, radio jammers to defeat roadside bombs, bar armor to stop rocket-propelled grenades, and reactive armor tiles (not armed with actual explosive) to blunt the impact of anti-tank rounds. For a video on the AMPV go to <https://youtu.be/1FOfQLI0uzM>. [Source: Breaking Defense | Sydney J. Freedberg Jr. | October 09, 2017 ++]

Army Field Manual 3.0 ► A New Way to Fight

After nearly a decade, the Army is rolling out a new field manual – its cornerstone document for soldier operations. The reason for the update is simple. Future wars are projected to be vastly different from what troops experienced in OIF and OEF. “Today’s operational environment presents threats to the Army and joint force that are significantly more dangerous in terms of capability and magnitude than those we faced in Iraq and Afghanistan,” writes Lt. Gen. Michael Lundy, the Army’s Combined Arms Center commander, in a forward to the new Field Manual 3-0 Operations.

The manual, essentially an Army commander’s bible, made its debut at the AUSA convention. “Major regional powers like Russia, China, Iran and North Korea are actively seeking to gain strategic positional advantage,” Lundy writes. “These nations, and other adversaries, are fielding capabilities to deny long-held U.S. freedom of action in the air, land, maritime, space and cyberspace domains and reduce U.S. influence in critical areas of the world.” And, Lundy notes, some adversaries “already have overmatch or parity, a challenge the joint force has not faced in twenty-five years.”

A new way to fight

The new field manual acknowledges through doctrine that the Army needs to divert some of its attention away from small scale contingencies it’s been engaged in over the past 17 years and focus on how it might have to go up against peer-level threats — essentially through large-scale combat operations, Lundy told Defense News in an interview shortly before AUSA. The field manual also aligns with the Army’s shift to a new battle concept — Multi-Domain Battle — which requires commanders to fight in multiple spheres, some of which didn’t exist on the battlefield until recently.

Gen. David Perkins, the commander of the Army’s Training and Doctrine Command, who has been one of the most public and vocal proponents for Multi-Domain Battle driving the force of the future, told Army Times in an interview that the field manual is the Army’s “first run at a battlefield framework,” which will evolve over time. The manual is one of many steps in overhauling war fighting, it is a doctrine, which guides how the Army organizes itself, he said. And that doctrine will far exceed current capabilities as the Army transforms. “There are gaps, clearly, as we go through this doctrine. It might be in capacity. We may not have enough of something or a certain capability. It might be in the range of the system so you get, say, greater risk if you maneuver that system closer to the line,” Lundy said. “What we have in this manual is very doable. But it also highlights that we can do it much better with the new capability coming in as we modernize, so we will continue to evolve the doctrine.”

Perkins gave a personal example, recalling how when he was a young officer in the early 1980s, new terminology from the Army’s then-new concept of Air Land Battle cropped up. This was before major equipment and technology changes such as the M1 Abrams tank, were even a reality. “When I came into the Army back in the dark ages, Air

Land Battle ‘close, deep and rear’ were new terms,” Perkins said. Guiding doctrine outlined in the manual will influence planning, training, operations and Army structure as the capabilities, such as cyber, vehicle systems and missiles evolve and are implemented. “I didn’t get an M1 tank until I was a major,” Perkins said. “Generally, we would train Air Land Battle with M60 (tanks).” But the concepts were there, Perkins said.

Similarly, cyber capabilities are not yet ingrained at every level of a Brigade Combat Team nor at the battalion level, but the new manual lays out the use of cyber in some aspects of the battle. “Fires combining both lethal and nonlethal effects in the cyberspace, EMS (Electro Magnetic Spectrum) and information environment are the primary tools of division deep operations,” the manual states.

But the manual goes far beyond tossing in a few novel words and gives a nod to lessons of past battles such as the deep strike strategies of Union Army generals Ulysses S. Grant and William T. Sherman in their combined East and West campaigns to tie down and divide the Confederate Forces in the Civil War. Authors draw lessons from the multi-domain throttling of the British by the Japanese during the invasion of Malaya and Singapore.

Preventing combat

Though offensive and defensive operations and maneuvers on the battlefield take up multiple chapters in the manual, a large portion is dedicated to preventing actual steel-on-steel combat. And the manual’s architects have considered steps short of combat but still involving military measures such as preventative operations. For instance, the Army would work alongside diplomatic, economic and informational powers of both the United States and allies, seeking to stop fighting before it starts. Or at least to gain an advantage for when fighting erupts, according to the manual. “These actions alone may disrupt an adversary’s assumptions, plans, or timelines,” the manual said. “Operations to prevent create the conditions required to quickly transition, if necessary, into large-scale ground combat.”

When the battle begins

The authors do not take recent decades of military dominance for granted, referring to “forcible entry” requirements in an age of anti-access/area denial capabilities of adversaries. They note Army forces must be able to deploy and fight to gain access to areas, as compared to large-scale operations in the Persian Gulf War and Iraq, where major forces massed in friendly countries for weeks or months before combat began. “Swift and decisive victory in these cases requires forcible entry and the ability to surge follow-on forces,” authors wrote.

They do not shirk the challenges of urban operations, either. “Due to the complexity of an urban environment, commanders must carefully arrange their forces and operations according to purpose, time, and space to accomplish the mission,” the manual states. “Most urban operations, the terrain, the dense population, military forces, and unified action partners will further complicate this arrangement.” The authors make clear that there will be times in future near-peer conflicts when Army units are outnumbered. But, they counsel, “a numerically inferior force capable of bold and aggressive action can create opportunities to seize and exploit the initiative.”

But after the fighting has ended, the mission is not yet complete. Authors advocate for “consolidation of gains” at every opportunity. They caution that the term is not a “synonym for stability, counter-insurgency or nation-building.” “It describes activities designed to make the achievement of the military objective enduring. As such, it encompasses a broad array of tasks combined in variable ways over time in a specific operational context,” they wrote.

Taking lessons learned from the Iraq invasion, they note that the consolidation includes seizing areas with weapons, fuel, server farms and other key assets; controlling enemy security services, rapid physical control of population centers and “rapid and comprehensive use of information operations to shape public opinion, discredit enemy narratives and promote friendly narratives.” The manual also places a new emphasis on operating with multinational and joint forces because “all warfare is going to be multi-domain warfare or a multi-domain battle. That’s real today,” Lundy said. Exercises like the U.S. Army-led Saber Guardian, which took place in Romania,

Bulgaria and Hungary over the summer, showed the Army and its allies can conduct multi-domain battle operations now.

Bringing FM 3-0 into the fold

FM3-0 sets up a framework that will cascade down into other manuals within the Army, Lundy said. “This year we’re updating all of what we call the capstone field manuals, which are really about tactics,” whether it be special operations, sustainment or maneuver support, he added. The manual is also driving other doctrine such as how the Army sets up and operates its headquarters. For instance, Lundy said, “We’ve been focused largely on limited contingency operations so our command post has kind of been geared towards that, so we’re rewriting the command post manuals on how we go to multiple smaller command posts that are able to move very rapidly.”

The process of implementing the field manual from higher echelons to the individual soldier will not “happen overnight,” Lundy said. Yet, the Army has already made some “pretty significant changes” over the past several years in combat training programs that align with the manual. [Source: DefenseNews | Jen Judson & Todd South | October 10, 2017 ++]

M-1A2SEPV3 Tank ► 1st of ~1000 Received on Time & On Budget

The U.S. Army just got a new tank. But you wouldn’t know it from the way the ground-combat branch describes the vehicle. On Oct. 4, 2017, the Army’s program office for ground vehicles announced that the service had accepted the first M-1A2SEPV3 “on schedule and on budget.” General Dynamics Land Systems builds the tank in Lima, Ohio, using existing M-1 hulls as a starting point. The Army asked to buy 56 M-1A2SEPV3 tanks in 2018, against a total requirement for around a thousand of the new vehicles — enough to equip all of the branch’s active-duty tank brigades. At present, a V3 costs around \$20 million. The price should drop as the production rate increases.

While officially a variant of the nearly four-decade-old M-1 tank, the SEPV3 is, in all the ways that matter, essentially brand new. The preceding variant, the M-1A2SEPV2, entered service in 2007. “Principal improvements are in lethality, survivability and sustainability,” Don Kotchman, a General Dynamics vice president, said in late 2015. The M-1A2SEPV3 boasts improved inertial navigation to achieve what Kotchman described as “better round dispersion” — in other words, improved main-gun accuracy. There’s also a data-link for programmable munitions, making the SEPV3 compatible with new, “smart” cannon rounds that are beginning to enter the Army’s arsenal. The V3 tank also has tougher front and rear armor than the V2 does — plus a built-in jammer for defeating radio-triggered improvised explosive devices.



Some of the most important improvements are seemingly the most boring. The V3 comes with a new auxiliary power unit installed underneath the armor. This APU allows a tank crew to power their vehicle's electronics without turning on the main engine. That way, a tank can quietly and efficiently monitor the battlefield for hours at a time without guzzling a full tank of gas. Kotchman said the power unit makes the new tank a third more fuel-efficient compared to earlier variants. The V3 features a 1,000-amp generator that Kotchman said would be able to power the new digital radios that the Pentagon is developing. To support the radios' digital datalinks, the V3 has an ethernet architecture and better line-replaceable units — in essence, black boxes for computer motherboards.

The V3 does not come with a new engine. The Army decided against replacing the M-1's gas turbine with a more efficient diesel engine. "Right now, as the Army balances priorities, there doesn't appear to be interest," Kotchman said. Likewise, the V3 has the same 70-ton suspension that the V2 does. Kotchman said the SEP3 is still under 70 tons, but could grow heavier with future upgrades. "We're looking at future opportunities for potential suspension upgrades," he said. Even though it shares the engine, suspension, main armament and basic layout of the older M-1A2SEP2, the V3 is a much harder-hitting and better-defended tank with a new power system and network architecture.

Fifty years ago, the Army might have given a vehicle with so many new features a new designation — at the very least, referring to it as the M-1A3. But in recent decades, the military has preferred to downplay many of its technological advancements. Sometimes, the name game represents an effort to avoid Congressional and taxpayer scrutiny. In the early 1990s, the Navy was stinging from its failed effort to develop a brand-new stealth fighter-bomber called the A-12. So when the sailing branch tapped Boeing to supply a new fighter to replace the A through D models of the F/A-18, it insisted on calling the new jet the F/A-18E/F. Never mind that the latter has a larger and aerodynamically-distinct airframe and wing, new engines, a new radar and a greatly improved cockpit compared to the original F/A-18.

By the same token, as long as the Army continues to produce new tanks under the M-1 appellation, it can argue to Congress and taxpayers that it's still using 40-year-old tanks — and needs more money to acquire something new. In fact, the M-1A2SEP3 is new. Even if it looks like a 40-year-old tank ... and shares its name. [Source: WIB Land | <http://warisboring.com/46306-2> | October 9, 2017 ++]

Transitioning Servicemembers ► 3 Tips From Former VA Secretary

Bob McDonald, who served as Veterans Affairs secretary from 2014 through January, said connecting with others and not limiting yourself will help service members transition from the military to civilian life. McDonald, an Army veteran, was recently named chairman of the board of directors for RallyPoint, an online network for those in the military community. The former VA secretary said he joined RallyPoint as a way to stay involved in the veteran space. Army Times spoke with McDonald on 11 OCT at AUSA's annual conference about what service members can do to ease their transition out of the military. His response:

1. Connect, connect, connect.

"Don't try to do everything yourself," McDonald said. "Connect with people who have already done it, and connect with people who may be interested in hiring you." It's so much easier today to connect with others than it was when McDonald got out of the Army in 1979-80, he said. "I wrote letters to about 130 different companies ... and waited to hear back from them, then interviewed with about 30 companies," he said. During that process, he said, it was interesting how every one of the companies wanted to put him in a box they created for him. "West Point grad, engineer student, military veteran," he said. "Let's put him in manufacturing." He said companies thought running a manufacturing line was a lot like running a platoon. "Or let's put him in sales because military people have confidence. They're assertive. They'd be great in sales," he said. But McDonald said he didn't want to

do any of that. “As a service member getting out, don’t allow yourself to be stereotyped,” he said. “One way to do that is connect with other people.”

2. Translate experience into civilian language.

McDonald said companies aren’t lacking people or assets — it’s leadership they need. “What we need to do as veterans is to tell companies about the leadership experiences we have,” he said. “And how those leadership experiences have led to better outcomes with the people we serve.”

3. Don’t undervalue education.

Going to school is harder to do the older you get, he said. “You might have a family that might inhibit that,” or a job or location that inhibits it, he added. “Think about using the GI Bill as a transition point,” McDonald said. “Once you figure out what you want to do, then get the education you can get in order to make yourself even more successful in that new role.” McDonald said he finds that a lot of service members undervalue the role of education, “which arguably to me is one of the most transformative experiences in life.”

[Source: AirForceTimes | Charlsy Panzino | October 11, 2017 ++]

Ammunition Update 01 ► Underwater 50-Caliber Round

DSG Technology has a new .50-caliber round that can travel an impressive 60 meters underwater, according to Jon Andre Garberg, the CEO of the Norwegian company. The company produces a line of what he describes as “ground breaking” technology that allows gunners to fire bullets underwater. Currently in production are the 5.56 mm, 7.62 mm and .50-cal. rounds, which use CAV-X technology. It’s that technology that allows the rounds to travel underwater, Garberg explained. The round “opens up water and creates a bubble,” allowing the round to travel underwater, he said. The rounds can be used to shoot air-to-air or air-to-water, Garberg explained. This is technology that didn’t exist just three months ago, he said.



The new technology can be very advantageous to the U.S. Navy, Garberg said. Currently, if U.S. Navy vessels want to engage small vessels out at sea, there is a danger in using traditional ammunition. Standard ammunition will ricochet off the surface of the water, potentially putting other U.S. ships in harm’s way, Garberg said. To solve this problem, U.S. Navy ships have been using expensive 30 mm rounds. However, the new DSG rounds with CAV-X technology solve this issue, Garberg said. Ships can fire without fear of a round skimming the surface. The round will just penetrate the water, Garberg said.

This also could be useful in large scale swarming attacks by smaller craft, Garberg explained. U.S. vessels in the tightly congested Persian Gulf have been routinely harassed by Iranian small boats. The CAV-X round could

provide U.S. warships with a new capability to engage these craft with minimal risk to other U.S. or allied ships. A representative at U.S. Navy Surface Warfare Center told Military Times that they are currently testing the rounds. [Source: NavyTimes | Shawn Snow | October 10, 2017 ++]

Overseas Troops ► Cpl. Rachel Warford



U.S. Marine Warford is part of the Female Engagement Team, which is deployed with male infantry units and tasked to help communicate with local families and women.

* **Military History** *



Revolutionary War Death Ship ► HMS Jersey

King George III of Great Britain declared American forces to be traitors in 1775, which denied them prisoner of war status. However, British strategy during the early conflict included the pursuit of a negotiated settlement allowing officials to decline to try and/or hang them, the usual procedure for treason, to avoid unnecessarily risking any public sympathy the British might have enjoyed in the Americas. Great Britain's neglect resulted in starvation and disease. Despite the lack of formal executions, neglect achieved the same results as hanging. Space in British jails on land soon ran out, and the British began housing prisoners aboard the abandoned or decommissioned warships anchored in Wallabout Bay, the small part of Upper New York Bay. As a result, the most horrific struggle of the

American Revolution occurred just 100 yards off New York, where more men and boys died aboard a rotting prison ship were lost to combat during the entirety of the war. The most infamous of the prison ships was the HMS Jersey which was an old converted sixty-four-gun man-of-war, stripped of all its fittings except for the flagstaff. To read about how Americans and their remains were treated on this ship refer to the attachment to this bulletin titled, "**Revolutionary War Death Ship**". [Source: Together We Served Newsletter | Mike Christy | September 2017 ++]

Navy Birthday Update 01 ► Navy Turns 242-Years Old

October 13 marked the birthday of the U.S. Navy, which traces its roots back to the early days of the American Revolution. On October 13, 1775, the Continental Congress established a naval force, hoping that a small fleet of privateers could attack British commerce and offset British sea power. The early Continental navy was designed to work with privateers to wage tactical raids against the transports that supplied British forces in North America. To accomplish this mission the Continental Congress purchased, converted, and constructed a fleet of small ships -- frigates, brigs, sloops, and schooners. These navy ships sailed independently or in pairs, hunting British commerce ships and transports.

Two years after the end of the war, the money-poor Congress sold off the last ship of the Continental navy, the frigate Alliance. But with the expansion of trade and shipping in the 1790s, the possibility of attacks of European powers and pirates increased, and in March 1794 Congress responded by calling for the construction of a half-dozen frigates, The United States Navy was here to stay. With thousands of ships and aircraft serving worldwide, the U.S. Navy is a force to be reckoned with. Below are just some of the Navy's notable accomplishments over the past two centuries:

IMPORTANT FIRSTS IN NAVAL HISTORY

- First use of submarines: While the Navy's first commissioned designs for a submarine were handed over in 1875, it wasn't until 1898 that the first Holland submarine launched successfully.
- First use of modern battleships: While America had battleships before the 1908 South Carolina class dreadnought, which started with the USS Michigan and was based on British ships, these were the first in the new era of battleships.
- First use of Naval aircraft: In 1911, the U.S. Navy bought its first airplane, the Curtiss A-1 Triad.
- First aircraft carrier: The first flight from the deck of a U.S. Navy cruiser in 1910 led to the 1927 Lexington-class aircraft carriers, the first operational aircraft carriers in the U.S. Navy.
- First use of Rigid Hull Inflatable Boat: Introduced in 1992, these rubber boats were originally meant for life boats in the 1960s, but the Navy now uses them for SEALs due to their lightweight, high speed, all-weather specifications.

[Source: Military.com | October 11, 2017 ++]

Battle of Tarawa Update 01 ► A Homecoming 70-Years Late

On the first day of the World War II Battle of Tarawa in the central Pacific, Marine Corps 2nd. Lt. George Bussa was assigned to take his platoon and assault a huge Japanese bunker on Red Beach 3. Bussa, a battle-tested veteran, had earned the Silver Star for gallantry a year earlier at Guadalcanal as a platoon sergeant. He had a wife - and a baby girl he had never seen - back in California and several brothers in the service. As the platoon attacked, it was assailed by enemy soldiers inside the bunker. Bussa, who was 29, was killed, and his men were driven back. After the battle, his body was buried in a trench, but after the war, it could not be found and he was declared lost.

On 10 OCT, 73 years after his death, Bussa's body, recently recovered and identified, was buried in Arlington National Cemetery as his daughter, Jerilyn Heise, 75, his grandchildren and great-grandchildren looked on. Next week, another Marine killed at Tarawa, Cpl. Walter Critchley, 24, of New Rochelle, New York, is scheduled to be buried in Arlington. On 14 NOV, a third Marine killed and lost in the battle, Cpl. Anthony Guerriero, 21, of Boston, is to be buried there. And on 8 DEC, a fourth killed and lost at Tarawa, Archie Newell, 22, of Faith, South Dakota, is scheduled for burial there.

The funerals are the result of work by the Defense Department and the nonprofit Florida research group History Flight, which have recovered scores of lost or unknown remains from the battlefield and a cemetery in Hawaii in the past two years. More than 1,000 Marines were killed in the multi-day battle in late November 1943 in the amphibious landing on Betio Island in the Tarawa Atoll, 2,400 miles southwest of Hawaii. Most were buried on the island in dozens of scattered plots. But after the war, some of the plots could not be found, and the bodies of hundreds of Marines were never located and brought home, according to History Flight.

The bodies of other Marines were found after the battle but could not be identified. They were eventually reburied in a cemetery in Hawaii, known as the Punchbowl, according to the Defense POW/MIA Accounting Agency (DPAA). Last year and earlier this year, the Pentagon, spurred by scientific advances in identification processes, exhumed all 94 Tarawa caskets from the Punchbowl to try to identify those within.



Members of the Marine Corps Logistics Base Albany funeral detail transport the casket of Marine Pfc. James O. Whitehurst to his final resting place at Cowarts Baptist Church Cemetery in Cowarts, Alabama, April 12, 2017. Whitehurst was killed in action at the battle of Tarawa during World War II, Nov. 23, 1943.

In 2015, History Flight said it had recovered and subsequently turned over to the Pentagon 35 sets of remains found in a lost burial plot on Betio. In 2016, it found at least a dozen more - Bussa's included, it turned out, the organization said. His remains were found under a building that had to be jacked up to gain access to his grave. In July, History Flight announced that it had found and turned over an additional 24. The DPAA's website indicates that 57 servicemen killed at Tarawa, most of them Marines, have been identified since 2014. Hundreds more may still be on the island, said Mark Noah, executive director of History Flight. Some of them may never be found on the now-densely populated island, he said. "We've recovered Marines underneath houses . . . underneath roads, underneath pigpens," he said.

Bussa, who hailed from Chicago but was living in Van Nuys, California, had suffered multiple fractures of the skull, limbs and ribs from "blast injuries," according to a Pentagon report on his case last April. His flashlight, canteen and toothbrushes, among other items, were reportedly found with him, the report said. His body was identified using DNA comparison with his family as well as dental and anthropological examination and material evidence, the Pentagon said.

In January 1944, Bussa's wife, Ellen, 28, who had grown up on a farm in Kansas, wrote the Marine Corps commandant, asking for more details. *"I have a little daughter 15-months-old whom he never saw," she wrote. "I*

would like to tell her where and the date her daddy lost his life. . . . It's hard enough to lose them, then not to know where and how they were buried make it much worse." That May, on a parade ground in Los Angeles, a military officer presented Ellen Bussa with the Silver Star her husband earned at Guadalcanal in 1942. The Los Angeles Times reported that daughter Jerilyn, not yet 2, "looked on in wonderment."

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The heavily fortified enemy outpost and airstrip at Tarawa was targeted for elimination as the United States began to roll back the Japanese tide of conquest in 1943. But when the attack was launched by the Marines on Nov. 20, the massive American naval and air bombardment had failed to knock out many of the enemy positions. In addition, to their consternation, the assault forces found that their landing boats couldn't get over Betio's outlying reef. Many men had to leave their boats and wade hundreds of yards in neck-deep water to the beach under heavy enemy fire, according to historians Eric Hammel, John Lane and news accounts.

Casualties were enormous, and the water was soon littered with dead Marines. Once ashore, the Americans encountered two days of fierce fighting as they assaulted Japanese bunkers with flamethrowers, grenades and machine guns. In the end, the enemy garrison of several thousand was wiped out, and the burials began. "Initial burials . . . were made by Marines with no graves registration training and resulted in poor [location] records . . . and in trench burial methods," DPAA historian Heather Harris wrote in 2006 memo. And after the battle, military construction projects on Betio moved many grave markers without moving remains, she wrote, making rediscovery all but impossible.

Many of the Marines were buried with their gear, helmets and boots on. "There was no time for the modern conveniences," Noah, of History Flight, said in a telephone interview last week. War correspondent Robert Sherrod, who covered the battle, remembered of the burials: "The bulldozer scoops a long trench, three feet deep." "The bodies, not even covered by a blanket or poncho, are brought over and placed in the trench, side by side," he wrote. "A man's last ceremony should be dignified, but this isn't. The bulldozer pushes some more dirt in the Marines' faces and that is all there is to it."

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Jerilyn Heise was 14 months old when her father was killed. Her mother remarried when Jerilyn was about 5, and she learned only "bits and pieces" of her father's life over the years, but "not a lot." "I went to visit my grandparents that lived in Chicago," she said in a telephone interview from her home in Minden, Nevada. "I definitely should have asked more questions as I got older, but didn't." Her mother died in 2012. And last May, she got a call from the Defense Department saying that her father had been identified. "It was a surprise, and it's still a surprise to me," she said. "After 74 years, how would I even expect that I would be able to have his remains brought back to the United States." She said it was important that he be buried at Arlington. "I just felt that that was a very special place," she said. As for the Silver Star, she still has a copy provided by the government, but the original, given to her mother in 1944, has been lost. [Source: The Washington Post | Michael E. Ruane | October 10, 2017++]

Holocaust Denial ► Illegal in Belgium

A court in Brussels has ordered a former Belgian lawmaker to visit five Nazi concentration camps and write about his experiences as punishment for publicly denying the Holocaust, a crime in Belgium. **Laurent Louis**, a far-right politician and self-proclaimed "anti-Zionist," was convicted of Holocaust denial in 2015 after he wrote blog posts publicly doubting whether Jews were killed en masse in Nazi gas chambers during the Second World War. He received a roughly \$20,000 fine and a six-month suspended prison sentence. But recently, the Brussels Court of Appeal put the prison sentence on hold and instead ordered him to take one trip per year for the next five years to Nazi death camps, including the infamous Auschwitz camp in Poland, Agence France Press reported. Following

each visit he must write at least 50 lines describing what he saw in the camps and "the feelings he experienced," according to AFP. He is required to submit the texts to the court and post them on his personal Facebook account, where he has some 50,000 followers.

More than a dozen countries in Europe have passed laws banning Nazism and outlawing various degrees of Holocaust denial. Promoting the Holocaust, minimizing its impact or denying it outright are illegal under a 1995 Belgian law and punishable by fines and prison time. Louis, a 37-year-old who served in Belgium's parliament from 2010 to 2014, cheered the sentence as a "total victory" in a series of Facebook posts but offered his apologies to "those who were hurt by my words." "All that I have left to do is do the reports from the death camps. No doubt the court recognized my talents as a writer," wrote Louis, who recently self-published a book on his political views. "More seriously, I will abide by the court's ruling and go and repent every year in a death camp," he continued. "In addition to being very instructive and very powerful on the human level, this will be an opportunity also to denounce current genocides."

During his roughly four years in Belgium's Chamber of Representatives, Louis seemed to take pride in being a political insurgent. He was voted in as a member of the country's center-right conservative party but was kicked out after just a few months amid tension with its leadership. He briefly joined the country's Islamic party but was booted there after trying to proclaim himself party president. He went on to found the far-right *Debout Les Belges!* (Belgians, Rise Up!) movement. In 2014, Louis accused then-prime minister Elio Di Rupo of being a pedophile in a speech in parliament. He was later convicted of slander and received an eight-month suspended prison sentence.

He has a long track record of inflammatory and conspiratorial remarks about Jews and Israel. He argued on Facebook and in Parliament that Zionists had bankrolled the extermination of Jews by the Nazis, saying "the Holocaust was set up and financed by the pioneers of Zionism." He once trampled an Israeli flag during a demonstration in support of Syrian President Bashar Assad. And he is fond of giving the "quenelle," a gesture similar to the Nazi salute that is popular among neo-Nazis in France. Members of Parliament and outside organizations have repeatedly condemned Louis as anti-Semitic, and advocacy groups have filed a complaints saying his remarks were an incitement to violence.

The Belgian League Against anti-Semitism was among the plaintiffs in Louis's trial. When he was convicted of Holocaust denial in 2015, the judge ruled that he made multiple statements downplaying the atrocities committed by Nazis in World War II and criticized his conduct in the courtroom. "During his trial, Mr. Louis seemed to think he was in parliament rather than in a court of law," the judge said, according to the Times of Israel. "He expressed little regret toward the people he offended and offers little evidence in the way of correcting his ways."

Louis's sentence is unusual but not unheard-of. In 2013, a court in Hungary ordered a Holocaust denier to visit Auschwitz, the Holocaust Memorial Centre in Budapest or Israel's Yad Vashem and write about the trip. The man was convicted of carrying a sign in public that read "the Holocaust never happened" in Hebrew. It was the first punishment issued under Hungary's Holocaust denial law, which took effect in 2010, according to the Jerusalem Post. Such a prosecution is virtually unfathomable in the United States, where Holocaust denial and other forms of controversial speech enjoy sweeping protections under the First Amendment.

But a judge handed down a sentence not unlike Louis's earlier this year to five teenage boys who spray painted a historic black school in Ashburn, Virginia, with swastikas and racist graffiti. Rather than give the boys jail time or community service, the judge ordered them to read books by black, Jewish and Afghan authors, write a research paper on hate speech and visit the U.S. Holocaust Memorial Museum. [Source: The Washington Post | Derek Hawkins | September 25, 2017 ++]

Abandoned Military Bases [09] ► Flak Tower



Flak towers operated in pairs—gun towers known as *Gefechsturm* and command towers known as *Leitturm*. They would utilize massive radar dishes that could retract and detect bombers up to 50 miles away. Each tower was equipped with an auto cannon armory that would protect forces from low-flying planes. The towers held an astonishing eight 123-millimeter guns that could fire 48 shells towards enemies per minute.

Insanely Daring Air Raids ► No. 8 | Operation Jericho

Air raids were one of the military strategies that were used to attack enemies using fighter planes which would drop bombs and blow buildings apart. This task was perhaps the most dangerous and terrifying mission during the times of war. However, many brave aviators risked their lives and conducted daring raids against insane odds. Following covers one often of the most daring raids to ever been conducted in history, the story behind the raids and the crews who flew the military planes.



Operation Jericho was the name given to one of the most audacious air raids carried out by the RAF on 18 February 1944. The operation was a low-level attack by Mosquito bombers on a prison on the outskirts of Amiens in northern France where the Germans were holding many resistance fighters and other political prisoners. The aim of the operation was to eliminate two Allied intelligence officers who had been captured and were being held at Amiens Prison.

While no one can exactly tell the intelligence the two officers had, it is believed that their capture posed a threat to Operation Overload where the Allied forces had planned to invade Europe and liberate it from the hands of the Nazi Germany. In that case, the Allied forces attacked the prison to either rescue or eliminate the two men.

Eighteen Mosquitoes, supported by Typhoons took off from RAF Hunsdon in Hertfordshire. As they hit the very poor weather, four Mosquitoes turned back as they had lost contact with the other fourteen. The crews later reported that the weather was the worst they had ever experienced.

Military History Anniversaries ▶ 16 thru 31 OCT

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 OCT.** [Source: This Day in History <http://www.history.com/this-day-in-history> | October 2017 ++]

Medal of Honor Citations ▶ Fryar, Elmer E | WWII



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

ELMER E. FRYAR

Rank and organization: Private, U .S. Army, Company E, 511th Parachute Infantry, 11th Airborne Division

Place and date: Leyte, Philippine Islands, 8 December 1944

Entered service: 1940 in Denver, Colo

Born: February 10, 1914 Denver, Colo

Citation

For conspicuous gallantry and intrepidity at the risk of his life above and beyond the call of duty. Pvt. Fryar's battalion encountered the enemy strongly entrenched in a position supported by mortars and automatic weapons. The battalion attacked, but in spite of repeated efforts was unable to take the position. Pvt. Fryar's company was ordered to cover the battalion's withdrawal to a more suitable point from which to attack, but the enemy launched a strong counterattack which threatened to cut off the company. Seeing an enemy platoon moving to outflank his

*** Health Care ***



TRICARE Changes 2018 Update 03 ► Unanticipated Twist Will Raise Copays

Timing is everything- and we are now into the fall, and marching ever closer to the Jan. 1, 2018, start date for anticipated changes to the TRICARE program. As part of this process, TRICARE late last week announced its formal requirements for implementing portions of last year's National Defense Authorization Act (NDAA).

The Interim Final Rule (IFR) guides the implementation of TRICARE Select, the new preferred provider organization option, which combines the current TRICARE Standard and Extra plans. Other significant changes are forthcoming as well, many of which are addressed in the MOAA TRICARE questions and answers series you may have seen before:

Part 1: [Who's affected by the new TRICARE changes?](#)

Part 2: [How will TRICARE's new enrollment rules work?](#)

Part 3: [Will TRICARE changes affect my access to care?](#)

But shockingly, the story took an unanticipated twist.

Along with implementation of the new TRICARE Select option, and without any prompting or open discussion, *a new set of cost shares and fees unexpectedly appeared* in the IFR. These new fees are targeted at existing beneficiaries who currently, by law, are grandfathered into the current TRICARE Standard/Extra program fee structure.

Recall that a key feature of last year's package of sweeping TRICARE reforms was that all those currently serving, as well as those retiring prior to Jan. 1, 2018, would be *grandfathered* into the existing fee structures. New entrants into the services after Jan. 1, 2018, would be subject to newer, much higher fees. The whole goal of the grandfathering was to keep fees where they currently are, at what we believe to be a reasonable level, for beneficiaries in the service prior to Jan. 1, 2018. Now this commitment seems to be slipping away. Many of these new TRICARE Select fees water down any benefit of grandfathering. In most cases, there will be higher fixed fees and cost shares for both retirees and active duty families who choose the new Select option.

In many instances, new entrants who join after Jan. 1, 2018, will be paying *less* than current beneficiaries, who should be grandfathered into the previous, lower fee structure. To focus on a few of the most glaring TRICARE Select examples under the IFR guidance:

- A current, would-be grandfathered, active duty family member's cost for a primary care visit will be \$27 for a network provider. Contrast this with a new entrant family member after Jan. 1, 2018, who will pay \$15.
- The same grandfathered member above would pay \$34 for a specialty care visit, while a new entrant family member would pay \$25.
- Grandfathered retirees under age 65 would pay \$35 for an in-network primary care visit. Future retirees who entered after Jan. 1, 2018, would pay \$25.

- Grandfathered retirees under age 65 will pay quite a bit more for inpatient hospitalizations than future entrants - \$250 a day, versus \$175 per admission.

This new structure leaves us scratching our heads, with more questions than answers. How can it be that existing grandfathered beneficiaries will pay *more* for their health care than those newly entering the service? Are grandfathered beneficiaries being saddled with disproportional increases as to cover costs of other programs? Why would DoD unveil these new fees, couched as necessary to stabilize costs, before a defense bill is resolved and presented to the president? Not to mention the Senate's version of the pending defense bill, which has its own designs on increasing TRICARE pharmacy copayments. What led DoD and the Senate to change their level of support to currently serving and retired servicemembers?

MOAA is concerned these changes will result in cost increases for many beneficiaries, increases which bypassed open dialogue among military service organizations. As the Armed Services committees begin to take on their annual defense bill negotiations in conference committee, these fee changes muddy the waters, as noted above. Adding to the confusion, a provision in the FY18 NDAA would repeal the grandfathering clause from last year's defense bill, subjecting all beneficiaries to the fee structure for new entrants. But according to the IFR, the fee structure for new entrants after Jan. 1, 2018 is marginally better than what would be put in place should grandfathering remain.

MOAA hopes beneficiaries aren't being coaxed into picking between two bad choices: leave grandfathering alone and take disproportional fee hikes anyway, or repeal grandfathering and take on newer, smaller - but still disproportional - fee hikes. The latter also would achieve one of DoD's objectives: to have only one fee system for all beneficiaries, old and new. It seems this strategy of two choices ensures DoD wins either way. A peculiar and frustratingly confusing strategy should be concerning for all TRICARE beneficiaries. As MOAA has said from the beginning, timing is everything. We will be using the comment period following the IFR release to demand clarification that will reveal the underlying intent of these changes. [Source: MOAA Leg Up | October 5, 2017 ++]

TRICARE Changes 2018 Update 04 ► Fiscal to Calendar Year Shift

Starting Jan. 1, 2018, [cost changes for TRICARE benefits](#) transition from a [fiscal year October 1 - September 30](#) period to a calendar year period. Changing from fiscal year (Oct. 1 – Sept. 30) to calendar year (Jan. 1 – Dec. 31) makes the TRICARE benefit consistent with civilian health plans. The change will largely affect those plans which have an enrollment fee and are currently billed by the fiscal year. This includes retirees and their family members in TRICARE Prime, TRICARE Retired Reserve, TRICARE Reserve Select and those in TRICARE Young Adult plans. This change is one of several [changes that TRICARE is adopting in 2018](#).

TRICARE is changing. Here is what you need to know:

Enrollment Fees

Enrollment fees apply to retirees and their family members enrolled in [TRICARE Prime](#), those enrolled in the premium-based plans, and several others to include:

- [TRICARE Young Adult-Prime Option](#)
- [TRICARE Young Adult-Standard Option](#)
- [TRICARE Retired Reserve](#)
- [TRICARE Reserve Select](#)
- [Continued Health Care Benefit Program](#) (this will continue to follow a fiscal year cycle)
- [US Family Health Plan](#)

Transition Period

If you're in a plan now that requires enrollment fees, there will be a transition period, from Oct. 1, 2017 to Dec. 31, 2017, so you won't experience additional costs in 2017. During this time, you'll continue to pay your enrollment fees. However, enrollment fees will be prorated for the three-month period and billed accordingly for enrollees who pay on a monthly or quarterly basis. If you pay enrollment fees on an annual basis, you'll be billed for the fees to cover the three-month period and sent a billing notice for the annual fee for calendar year 2018.

Catastrophic Caps and Deductibles

TRICARE will extend payments (for example, catastrophic caps and deductibles) that usually reset on Oct. 1 through the end of the calendar year. Any enrollment fees you pay during the transition period will continue to count against the catastrophic cap until it resets on Jan. 1, 2018. This means that if you reach your fiscal year 2017 catastrophic cap, you will not have additional out-of-pocket costs for authorized [TRICARE-covered services](#) for the last three months of the year. On Jan. 1, 2018, [new rules for deductibles and catastrophic caps](#) will apply to some costs.

This is your benefit. Here is what you need to do:

Automatic Payments

If you pay your enrollment fees by allotment, you don't need to do anything. You will continue to pay your enrollment fees automatically. Unless you cancel your allotment, TRICARE will continue to deduct enrollment fees starting Jan. 1, 2018. If you pay enrollment fees by electronic funds transfer (for example, debit card, credit card and electronic check) and are in an area where a [new regional contractor](#) will be delivering services, you will need to update your payment method with your new regional contractor in December.

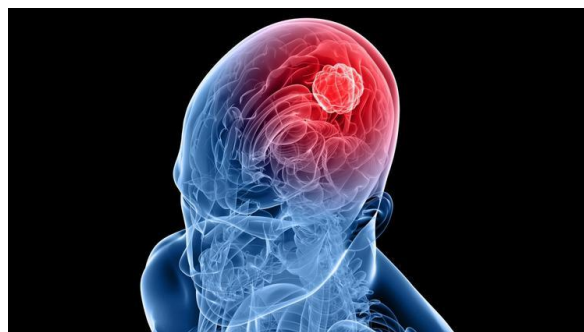
Are you ready?

Visit the [TRICARE Changes](#) page to learn more about the upcoming changes to your benefit. You can also stay in the know by [signing up for TRICARE's email updates](#). Take command of your health care by staying informed!

[Source: TRICARE Benefit Update | October 12, 2017 ++]

Glioblastoma ► Brain Cancer Tumor

Senator John McCain's staff announced on 19 JUL that he has a brain tumor called a glioblastoma. The diagnosis was based on a biopsy of the tissue removed from his brain on Friday during surgery at the Mayo Clinic Hospital in Phoenix. Glioblastoma is the most aggressive type of brain tumor. It originates in the brain. The cause is not known. This tumor has no relation to melanoma, the skin cancer for which Mr. McCain was treated in the past. About 23,000 adults, more of them men than women, are diagnosed with various types of primary brain cancers a year, according to Cancer.net, a web site of the American Society of Clinical Oncology. Unlike most other cancers, brain tumors do not spread to other parts of the body. They kill by interfering with normal body function, depending on their location.



An illustration of a glioblastoma tumor in the brain.

An estimated 12,390 new glioblastoma cases were expected in 2017, according to the American Brain Tumor Association. The risk that it will develop increases with age. Like most cancers, glioblastoma is treated with surgery to remove as much of the tumor as possible, then radiation and chemotherapy. The tumor almost always grows back in less than a year. When it recurs, surgeons usually operate again. Dr. Mitchel S. Berger, a neurosurgeon and glioblastoma expert at the University of California, San Francisco, said the tumor should be genetically sequenced to look for mutations indicating that the cancer might be especially sensitive to a certain drug, possibly an experimental one.

Because they keep returning, glioblastomas are almost never cured, and the prognosis is poor. With treatment, the median survival — which means half of patients live longer than this, and half die sooner — is 12 to 18 months. Senator Edward M. Kennedy died of glioblastoma in 2009, 15 months after it was diagnosed. Beau Biden, son of former Vice President Joseph R. Biden Jr., died of the same cancer in 2015, nearly two years after diagnosis. “We’ve made a fair amount of progress, but it’s been very slow,” Dr. Berger said. “Thirty years ago, no more than 1 or 2 percent of patients survived more than two or three years. Now, at least 25 percent survive three to five years and beyond.”

Possible symptoms include headaches, seizures, blurred vision and sometimes difficulty with thinking or speaking. New treatments that unleash the immune system against malignancies can help patients with several kinds of cancer, including metastatic melanoma and lung and bladder cancers. But while there are many clinical trials testing immunotherapy for glioblastoma, so far the studies haven't shown a meaningful survival benefit, experts say. What led to Mr. McCain’s diagnosis has not been disclosed. It is not possible to determine whether the tumor had anything to do with his somewhat Confused Questioning Of James B. Comey, The Former F.B.I. Director, In June. [Source: New York Times | Denise Grady | July 20, 2017 ++]

Medicare Coverage Update 01 ► Non-Working Spouse Eligibility

Medicare isn't just for people who retire after many years of working. In fact anyone can get Medicare, as long as he or she is a U.S. citizen or a legal resident for at least five years and meets one or more of these eligibility requirements:

- Age 65 or older
- Under age 65 with a qualifying disability
- Have End-Stage Renal Disease (permanent kidney failure requiring dialysis or a transplant)

Yet one common question is: Can my non-working spouse get Medicare? The short answer is: Yes, if he or she is eligible (see Medicare eligibility requirements above). But there's more to it than that. Employed individuals pay Medicare taxes through payroll deductions. You need to work and pay taxes for at least 10 years to qualify for premium-free Medicare Part A coverage (hospital insurance) when you turn 65. If you qualify, then your non-working spouse may qualify based on your work record when he or she turns 65, too. In addition, you both would qualify for Medicare Part B coverage (medical insurance). Each covered individual pays a monthly Part B premium to Medicare.

Of course, many spouses turn 65 at different times or even in different years. When one of you becomes eligible for Medicare before the other, what then?

- **If Your Non-Working Spouse is Younger** -- You should enroll in Medicare at age 65, whether or not you are still working. Additional decisions such as whether to enroll in just Part A or in both Part A and Part B will depend on your specific situation. Until your spouse turns 65 and becomes eligible for Medicare, he or she will need other health insurance. This may be through your employer if you continue working. Some

employers offer COBRA or other health insurance options for younger spouses of retired employees as well. Your health plan administrator can help you understand your spouse's choices. Your spouse may also buy individual coverage through the Health Insurance Marketplace in your state until he or she turns 65.

- **If Your Non-Working Spouse is Older** -- Your older spouse may qualify for Medicare on your work record at age 65, even if you're not getting Social Security or Medicare yourself—but only if you are at least 62 years old. That's because you qualify for Social Security at age 62. You don't have to actually file for Social Security benefits in order for your spouse to get Medicare; you just need to be old enough to file if you wanted to.
 - ✓ If your spouse is covered by your employer health insurance, he or she may want to enroll only in premium-free Medicare Part A until you retire or your employer coverage ends. Part B—along with its premium—can be added later without penalty as long as your employer coverage is creditable, which means the benefits have to be at least as good as what Medicare provides.
 - ✓ If your spouse is more than 3 years older than you, then he or she may buy Medicare Part A until you turn 62 and the premium-free benefit kicks in. The Part A monthly premium is \$426 in 2014.
- **A Note About Part D** -- It's important to pay attention to timing when first enrolling in a Part D prescription drug plan. You and your spouse must each enroll in a Part D plan during your individual Initial Enrollment Periods—or have other creditable drug coverage—to avoid paying a premium penalty later. If you have other coverage and decide to delay Part D enrollment, you must enroll in a Part D plan within 63 days of your other coverage ending to avoid the penalty.

For more information, explore www.MedicareMadeClear.com or contact the Medicare helpline 24 hours a day any day at 1-800-633-4227, TTY 1-877-486-2048. [Source: <https://blog.medicaremadeclear.com> | September 2017 ++]

Terminal Patients ► Experimental Drugs Access

Matt Bellina was a 30-year-old officer in the U.S. Navy flying out of the Pacific Northwest to protect the country when he started showing symptoms of the deadly Lou Gehrig's disease in 2012. Now he's taken on a new fight: a law making it easier for terminally ill patients to get access to experimental drugs. He's getting closer to his goal, with the House now the last stop for the effort known as **Right to Try** after the Senate unanimously passed similar legislation in August. "I need to know before I die that if my children find themselves in this unenviable position, that this nation that I proudly served will respect their liberties and their right to make their own decisions about their medical treatments," Bellina, a father of three boys, said 3 OCT at a health subcommittee hearing at the House Energy and Commerce Committee.

On the surface, Right to Try is a no-brainer. President Donald Trump and Vice President Mike Pence have voiced support, as have many Democrats, and a federal law would reinforce legislation already passed in 37 states and under consideration in the remaining 13. But it's more complicated than that. Critics including drugmakers, researchers and ethicists say tending the urgent needs of one person, no matter how compelling, can lead to greater harm and slow development of medicines for thousands of others. They say there's already a system in place, called compassionate use, that gives access to experimental drugs after an independent reviewer and the U.S. Food and Drug Administration have signed off. Under the Right to Try bills, the entire process takes place between the patient, the doctor and the company, leaving out all others.

The FDA commissioner said at the House hearing 3 OCT that legislation should be used narrowly, for patients expected to die within months -- which isn't what people with progressive diseases like Bellina's are pushing for. And a federal law isn't going to improve the approval rate of requests for compassionate use, which already stands

at 99 percent, FDA Commissioner Scott Gottlieb said. The main hurdle to get to the treatments isn't the regulator, said Gottlieb, who was treated himself for cancer with a drug therapy that wasn't approved for his condition. "There is a perception that there are certain companies and products that aren't necessarily being offered under the current construct, and the Right to Try legislation might provide more of an opportunity for companies to offer products in a different setting," the commissioner said. "The biggest obstacle to offering drugs through expanded access is supply constraints."

Neither the FDA nor lawmakers can compel companies to make their experimental products available, not under the existing compassionate use framework and not under Right to Try bills. To critics like Ira Loss, an analyst who has been tracking the FDA for four decades at Washington Analysis, that renders any law useless. "This is an unfortunate effort that will only lead to disappointment in the end for those who try to take advantage of it," Loss said in a phone interview. "It's not necessary in my view." PhRMA, the pharmaceutical industry's trade association, hasn't taken a formal position on the matter in the past and declined to comment after the hearing.

For drugmakers, Right to Try can be fraught with risks: Patients who are already terminally ill may suffer complications or die after taking their experimental medicine, potentially jeopardizing clinical studies for other patients. Consequences could be devastating for biotechnology startups, the center of some of the most daring medical innovation, as they have a limited supply of their novel therapies. Opponents favor improving existing programs such as compassionate use. The FDA took such steps Tuesday, with measures that may make manufacturers more willing to provide drugs. The agency will allow companies not to publicly report side effects and serious adverse reactions for compassionate-use patients if there's no evidence suggesting the drugs caused the problem. The goal is to ease concerns that complications arising from compassionate use put development of the medicines on hold -- and scare away investors.

There's no timetable scheduled yet for a House vote on the two Right to Try proposals under consideration. The two bills -- one for drugs and the other for both medicines and medical devices -- allow terminally ill patients to use unapproved products without the permission of the FDA and without any ramifications for the manufacturer if anything goes wrong. For patients like Bellina, a national law is necessary. His disease, formally known as amyotrophic lateral sclerosis, attacks nerve cells in the brain and progressively takes away the patient's control of voluntary muscles -- the brain itself isn't affected. Most die from respiratory failure within three to five years. There are very few treatments, but several companies are experimenting with therapies. Bellina hopes that removing barriers for drugmakers to make their products available to people like him will eventually help the quest for a cure.

"It's not that they are heartless and don't want to, but they are afraid," he said by email after the hearing. "The company could always say no, but this bill makes it a lot easier to say yes." [Source: Bloomberg | Michelle Cortez | October 4, 2017 ++]

Alzheimer's Update 13 ► **Vets At Higher Risk Than Civilians**

Veterans face a higher risk of developing Alzheimer's disease than civilians who never served in the military, presenting a major medical challenge to the country's responsibilities for veterans' health care, advocates said in a new report 2 OCT. The analysis — compiled by the new group Veterans Against Alzheimer's — note that post-traumatic stress disorder, traumatic brain injury and even more minor neurotrauma associated with military service all significantly increase the risk of developing the fatal disease.

The number of Department of Veterans Affairs enrollees with Alzheimer's doubled from 2004 to 2014, and is expected to grow higher still in years to come. More than 750,000 older veterans nationwide suffer from the disease or associated dementias. "This is a looming pandemic, and promises to be the health issue of the 21st century," said George Vradenburg, chairman of Us Against Alzheimer's, the parent organization for the new group. Advocates'

goal with the new venture is to find ways to partner with existing veterans groups, medical researchers and care coordinators to both help families dealing with the disease already and find ways to prevent it in veterans who may be predisposed to the illness. It also includes working to connect affected veterans with additional health options, including clinical trials, both inside the VA system and in the private sector.

Ryan Gallucci, director of the National Veterans Service at Veterans of Foreign Wars, said that may include new legislation to expand VA medical care options for individuals with Alzheimer’s and increasing awareness of available resources among their members. “Education is critical,” he said. “We’re not experts on treating Alzheimer’s or dementia, but we know that our members cope with this. And we have the ability to reach them in ways that VA and the health care advocacy community may not be able to.” Gallucci said the work with the new group also serves as an extension of the group’s outreach on mental health issues, which have been focused in particular on younger veterans. More than one-fifth of combat injuries from the recent wars were brain injuries, putting the latest generation of service members at extra risk of contracting Alzheimer’s.

Recent research has shown that a future dementia diagnosis is twice as likely for veterans with PTSD as those without the disorder, and may be as high as four times more than civilians who never served. Symptoms of depression and other brain trauma also appear connected to higher rates of Alzheimer’s later in life. Shawn Taylor, president of Veterans Against Alzheimer’s — whose father and grandfather were both veterans who contracted the disease — said those indicators show the need for more research into mitigation and prevention efforts earlier in life, as the average age of veterans nationwide continues to climb upwards. “Trauma rewires the brain, we know that for a fact,” she said. “We must do more to help veterans who have done so much for this country. We need to understand so much more why brain injury sustained in battle put veterans at a greater risk.” For more information, visit www.VeteransAgainstAlzheimers.org. [Source: ArmyTimes | Leo Shane III | October 2, 2017 ++]

Aging Update 02 ► Home Modifications to Assist You Age in Place

Eighty percent of older Americans plan to age in their own homes, making some remodeling necessary to keep homes safe and accessible. While home modifications can add comfort and convenience, they can come at a high cost and be a stressful endeavor. Even worse — some changes may not be good investments or even wrong for your situation. Here are six basic things to consider about remodeling your home:

Think long-term — aging is a progression: Modifications that serve you well over the next two years might not be sufficient three years from now. Check your local senior center, or agency on aging, for referrals to design experts or programs that can help you assess your home and determine what’s needed. Senior fairs and home shows that cater to the needs of the over 60 – set are a good place to learn about design trends, technologies and aids that can be included as part of your home modification plan.

One-floor living: Most experts on home modification agree that one floor level is the optimal choice. Yet one of the most common pieces of equipment for aging-in-place is the stair glide — a simple chair lift that runs straight up and down your stairs. While it can help some people, stair glides have draw – backs depending on your health conditions, and cost from \$3,000 to \$12,000 to purchase and have installed. If you use a walker or wheel chair, you may still need help getting into, or out of, the stair glide. This is one modification that can wind up idle if it doesn’t help the way you hoped.

Widen the doors: Walkers and motorized wheel chairs, even new robotic technology, promise to allow more people to age in place, but altering doorways can be difficult. The number of doors, hidden wiring, mechanical systems, and how the structural load of floors and roofs in the upper stories would be affected can impact your project and costs.

Install ramps and indoor thresholds: Outdoor ramps can help you avoid steps up to porches or entryways. But installing mini-ramps indoors is important too. Floors that vary in level between rooms become a challenge not only for people who use wheel chairs and walkers, but also those who navigate wearing bifocals. Threshold ramps provide a smooth transition from one area to the next, making it safer to get around your home.

Get things within reach in the kitchen and bathroom: Countertops and cabinets can be too high or too wide if you are in a wheel chair. You may need to lower the counters and the sink. Microwaves may be better located on a stand rather than a raised cabinet. Roll out storage in under-counter cabinets can help you more quickly locate items without having to stoop or get down on your hands and knees.

Focus on safe entry and exits for bathing: A walk-in shower with a bench to sit on could be a safer choice than a traditional bathtub. If the expense is more than the budget allows, a less expensive choice is to add safety bars or purchase a bathtub transfer bench or chair that allows you to sit while you lift legs one at a time over the bathtub sides.

Get rid of flooring that slips or trips: Shaggy older carpet, and throw rugs can be difficult to vacuum and often dangerous to maneuver. New carpeting with shorter nap is a better choice for use of walker and wheel chairs. Hardwood, tile, vinyl and laminate flooring are easy to clean but can be more slippery. When throw rugs are used, they need to be firmly secured to the floor to prevent trips and falls.

[Source: Senior citizens League | The Advisor | SEP/OCT 2017 ++]

Brain Tumors ► Do you Know The Symptoms?

A tumor in the brain isn't like tumors in other parts of your body. It has limited room for growth because of the skull. This means that a growing tumor can squeeze vital parts of the brain and lead to serious health problems. Learning about the possible symptoms of brain tumors can help you know when to tell a doctor about them.

A tumor is an abnormal mass of cells. When most normal cells grow old or get damaged, they die, and new cells take their place. Sometimes, this process goes wrong. New cells form when the body doesn't need them, and old or damaged cells don't die as they should. The extra cells can form a tumor. A tumor that starts in the brain is called a primary brain tumor. People of all ages can develop this type of tumor, even children. And there are many different ways they can form. "There are over 130 different types of primary brain tumors," says Dr. Mark R. Gilbert, an NIH brain tumor expert. About 80,000 people in the U.S. are diagnosed with a primary brain tumor each year.

Cancer that has spread to the brain from another part of the body is called a metastatic brain tumor. Metastatic brain tumors are far more common than primary tumors. Both primary and metastatic brain tumors can cause similar symptoms. Symptoms depend mainly on where the tumor is in the brain. "The symptoms of brain tumors can be either dramatic or subtle," Gilbert says. A seizure is an example of a dramatic symptom. About 3 of every 10 patients with a brain tumor are diagnosed after having a seizure, he explains. Other symptoms are less obvious. For example, you might notice memory problems or weakness on one side of your body. Until symptoms develop, you may not know you have a brain tumor. For a list of common symptoms of brain tumors, see the Wise Choices box.

If you have symptoms that suggest a brain tumor, tell your doctor. Your doctor will give you a physical exam and ask about your personal and family health history. You may need to have additional tests. Tumors can be detected by imaging methods such as MRI or CT scans. "Brain imaging technology has really changed the way we are able to visualize abnormalities," Gilbert explains. It allows brain surgeons to learn as much as possible about the tumor and remove it more safely. NIH researchers are continuing to look for ways to better detect and treat brain tumors. Treatments differ depending on the type and location of the tumor. Treatment can involve surgery, radiation (beams of high energy rays aimed at the tumor), or drugs that kill or block the growth of cancer cells.

Usually, brain tumor treatment requires a team of health care professionals. This may include surgeons, cancer specialists, nutritionists, nurses, and mental health providers. The team does more than treat the tumor. They also try to minimize its impact on a patient's quality of life. "There is a definite advantage to being cared for by people who do this on a routine basis," Gilbert says. A person who has been diagnosed with a brain tumor may want to seek treatment at a nearby cancer center, if possible. To look for a cancer center near you, visit www.cancer.gov/research/nci-role/cancer-centers. [Source: NIH | News in Health | October 2, 2017 ++]

Prosthetics ► New System Can Learn From Its User

Amputees can control their prosthetic arm essentially by thinking about the movement they want to perform, and their prosthetic fitted with an electrode array picks up neural signals and triggers the movement. In a demonstration 9 OCT at the AUSA show, retired Sgt. 1st Class Glen Lehman showed how it works. Lehman lost his arm when he was deployed to Iraq in 2008. Now he wears a prosthetic arm equipped with the neural-control technology, and demonstrated six movements he can prompt the arm to do. The technology is called the Coapt pattern recognition system, developed with support from the U.S. Army Medical Research and Materiel Command.



"Using a prosthetic can be very tiring, like doing Crossfit eight hours a day," Lehman said during the demonstration. With the pattern recognition system, as long as you can maintain a pattern of movement, you can train the prosthetic, and that becomes easier for the user, he said. "I don't have to constantly readjust my arm, I can retrain it myself. The arm learned me," said Lehman, who spent six months recovering from his wounds at Walter Reed Medical Center, medically retired from the Army in 2010 and has gone through many prosthetic devices since then.

The Coapt system makes it easier for amputees to be functional with their prosthetic, he said. "It used to take six months to get used to an arm, now it takes six weeks," Lehman told an audience at the show. "In half an hour of use, you can almost master it." There are other benefits to the technology, he said. It reduces the amount of time an amputee would need to spend with a clinician. With advanced robotic technology, the challenge is how you make the neural connection to the user, and make it effective, said Blair Lock, CEO of Coapt. "Our nervous system is an electrical system," he said. "Muscles in our body can act as amplifiers for the nervous system's signals." A noninvasive array of electrodes decodes the neurological information sent to it to permit prosthetic control, Lock said. The more the user wears it, the better it gets, Lock said.

It's an advantage over the incumbent style of prosthetic control, and has a calibration feature not normally found in prosthetics, Lock said. Training is virtual-game based. The system is sold as an add-on kit that fits into many of the prosthetic devices on the market. It is commercially available, said Jason Ghannadian, science officer at Army

Medical Research and Materiel Command and Congressionally Directed Medical Research Programs. The technology is not new, and the system has been available for about four years, he said. Those interested in using the system should talk to their clinician, Lehman said. [Source: DefenseNews | Kathleen Curthoys | October 9, 2017 ++]

History Of Medicine ► Indigestion



A man suffering from indigestion, suggested by little characters and demons tormenting him. Colored etching by George Cruikshank, 1835, after Alfred Crowquill.

TRICARE Podcast 418 ► Women's Health | Infants/Nurse | Bullying Prevention Month

Women's Health -- Each October, women are reminded to put themselves first and make time for their health. Making your health a priority helps you stay in shape and keeps illnesses and disease at bay. Women often put their families' needs ahead of their own, ignoring minor symptoms year after year until they affect their health. Using preventive care is one of the best ways to stay healthy. Each year, get a well-woman exam. At this exam, you should have your blood pressure checked and talk to your health care provider about what other screenings, immunizations or family planning you might need based on your age, health habits, family and medical history. TRICARE covers annual preventive women's health services that may include a Pap smear, pelvic and breast exam and mammogram at no cost. There are other actions you can take to live a healthy life:

- Maintain a healthy weight
- Exercise for a least 30 minutes at least five days a week
- Limit alcohol use and

- Get 7 to 8 hours of sleep per night

It's important to get screenings, especially if you are at a higher risk for certain diseases like breast cancer or diabetes. Talk to your health care provider about family, emotions, stress and non-physical concerns as well. Life events can bring higher stress with symptoms of anxiety, depression, and sleep difficulties. These concerns are just as important to discuss as your physical health in order to stay or become healthier. For more information about TRICARE, visit www.TRICARE.mil/coveredservices .

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Infants & Nurse Advice Line -- New parents have a hard job. And after sleepless nights, new emotions and just trying to figure out the whole parenting 'thing,' your new addition isn't feeling well. Did you know that you can call TRICARE's Nurse Advice Line 24 hours a day, seven days a week? This makes it a great resource for new parents worried about bumps, bruises, coughs, fevers or whatever else ails your little one.

The Nurse Advice Line team can help you learn about your child's health problems and help you decide on next steps. When you call, you'll need your child with you so you can evaluate his or her condition while the nurse asks questions. If your child is old enough and it's appropriate, then the nurse may ask to talk to your child on the phone. But feel free to stay on another line or use speakerphone while the nurse speaks with your child. Calling the Nurse Advice Line can help you avoid unnecessary trips to the emergency room and guide you to whatever medical care is necessary.

Call the Nurse Advice line at 1-800-TRICARE and choose option one. Learn more about the Nurse Advice Line at www.TRICARE.mil/nal.

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Bullying Prevention Month -- October is Bullying Prevention Month and TRICARE wants you to be aware of the available resources.

- Does your child have frequent headaches and stomach aches, especially on school days? It may not be a sign of physical illness. It might be a sign that your child is being bullied. Some other signs of bullying include trouble sleeping, lower grades and feelings of helplessness.
- Keep the lines of communication open between you and your child so that your child feels comfortable talking to you about any troubles with other children that may be occurring during lunch, recess or on the bus. Sometimes your child may not feel comfortable talking to you and may feel more comfortable talking to a therapist.
- And when children are being bullied, they may feel hopeless or could even engage in dangerous self-destructive behaviors such as running away from home, harming themselves, or becoming suicidal.

If your child is having trouble with bullies, there are resources available to help. TRICARE covers treatments such as individual and family therapies. Learn more at www.TRICARE.mil/mentalhealth .. If your child, or anyone in your family, does have a mental health emergency, then remember to call 9-1-1 or take them to the nearest emergency room for care. You should also check in with your child periodically to make sure that he or she is neither a bully nor being bullied. Contrary to popular belief, those who bully others don't have to be physically bigger or stronger than those whom they are bullying. For more information and resources check out www.stopbullying.gov.

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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> | October 5, 2017 ++]

TRICARE Podcast 419 ► Upcoming TRICARE Benefit Changes

Starting January 1st, 2018, cost changes for TRICARE benefits transition from a fiscal year period to a calendar year period. Changing from fiscal year, October 1st through September 30th, to calendar year, January 1st through December 31st makes the TRICARE benefit consistent with civilian health plans. The change will largely affect those plans which have an enrollment fee and are currently billed by the fiscal year. This includes retirees and their family members in TRICARE Prime, TRICARE Retired Reserve, TRICARE Reserve Select and those in TRICARE Young Adult plans. This change is one of several changes that TRICARE is adopting in 2018.

TRICARE is changing. Here's what you need to know!

Enrollment fees apply to retirees and their family members enrolled in TRICARE Prime, those enrolled in the premium-based plans, and several others including:

- TRICARE Young Adult-Prime
- TRICARE Young Adult-Standard
- TRICARE Retired Reserve
- TRICARE Reserve Select
- Continued Health Care Benefit Program and
- US Family Health Plan

If you're currently in a plan that requires enrollment fees, there will be a transition period, from October 1st to December 31st, 2017. During this time, you'll continue to pay your enrollment fees. However, your enrollment fees will be prorated for the three-month period and billed accordingly for enrollees who pay on a monthly or quarterly basis. If you pay enrollment fees on an annual basis, you'll be billed for the fees to cover the three-month period. These fees will be included in your annual billing notice for calendar year 2018.

TRICARE will extend payments, for things like catastrophic caps and deductibles, that usually reset on October 1st through the end of the calendar year. Any enrollment fees you pay during the transition period will continue to count against the catastrophic cap until it resets on January 1st, 2018. This means that if you reach your fiscal year 2017 catastrophic cap, you won't have additional out-of-pocket costs for authorized TRICARE-covered services for the last three months of the year. On January 1st, 2018, new rules for deductibles and catastrophic caps will apply to some costs.

Remember, this is your benefit. Here's what you need to do!

- If you pay your enrollment fees by allotment, you don't need to do anything. You will continue to pay your enrollment fees automatically. Unless you cancel your allotment, TRICARE will continue to deduct enrollment fees starting on January 1st, 2018. If you pay enrollment fees by electronic funds transfer and are in an area where a new regional contractor will be delivering services, you will need to update your payment method with your new regional contractor in December.
- Visit the TRICARE Changes page at www.TRICARE.mil/changes to learn more about the upcoming changes to your benefit. You can also stay in the know by signing up for our email updates at www.TRICARE.mil/subscriptions. Take command of your health care by staying informed!

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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> | October 13, 2017 ++]



Taxpayer War Costs ► **Afghanistan, Iraq, and Syria since 9/11**

As of 1 OCT, the average American taxpayer will have paid nearly \$7,500 to fund the wars in Afghanistan, Iraq, and Syria since the 9/11 attacks, according to previously unreported Pentagon budget data sent to Congress this summer. This fiscal year, each U.S. taxpayers will pay about \$289 for both wars, according to the Defense Department data. Next year — fiscal 2018 — that number would drop to \$281 per taxpayer, if Congress were to pass the White House’s spending request unchanged, which won’t happen. And there’s another reason that number is likely to change: the Trump administration’s plan to send more American troops to Afghanistan.

Americans paid the most for the wars in 2010, an average of \$767 apiece. The annual amount declined through 2016 to \$204 per taxpayer, before growing again as the U.S. ramped up its airstrike campaign against the Islamic State in Iraq and Syria. Why do we know this? The 2017 National Defense Authorization Act ordered the Pentagon and IRS to compile and publicly post the information on the Defense Department’s website. Rep. John Lewis (D-GA) added the legislation to the defense policy bill last year after numerous earlier attempts. By October of next year, the Pentagon’s share of the wars in Afghanistan, Iraq and now Syria will have collectively cost taxpayers more than \$1.5 trillion, according to the Defense Department’s figures.

But that number is far from the total cost of the wars. For one thing, the figures do not include classified amounts spent on the wars by the CIA and other intelligence agencies. But when other, far greater costs are included — such as medical and disability payments to veterans over the next 40 years, and war-related funding for the State Department and other federal departments — the total post-9/11 bill approaches \$5 trillion, according to Brown University’s Watson Institute for International and Public Affairs. For comparison, the average U.S. taxpayer will have paid more than \$4,100 for diplomacy since 9/11 through fiscal 2018, according to data compiled for Defense One by the Center for Strategic and International Studies. In 2017, that totals nearly \$285 per taxpayer, just \$4 less than cost per taxpayer for the wars in Afghanistan, Iraq and Syria. [Source: DefenseOne | Marcus Weisgerber | September 27, 2017 ++]

SSA COLA 2018 ► **Continues To Disappoint With CPI-W Measure**

The Social Security Administration announced that the annual Cost of Living Adjustment (COLA) will increase your Social Security benefits by 2% next year. Although this year’s COLA increase is the largest in five years, it is not keeping up with the increasing living costs seniors are facing. That’s because the COLA is currently tied to the CPI-W, a measure of inflation that tracks the spending patterns of young, urban workers – not Social Security beneficiaries.

According to The Senior citizen's League’s (TSCL) research, the CPI-W does NOT accurately measure the inflation older Americans experience. This year, your Social Security benefits probably only grew by \$3 or \$4, if at

all. But the average senior saw household expenses grow by \$80 or more per month! Years of inaccurate COLAs have resulted in a major loss of buying power for Social Security benefits. Since 2000, your benefits have lost 30% of their purchasing power. In the last year alone, they've lost 7%!

It's time for Congress to act and adopt a more adequate Social Security COLA – one that's based on the inflation seniors actually experience, using the CPI-E. The CPI-E measure takes into account the growing costs older Americans are facing, like Medicare premiums, prescription drug costs, and housing expenses. NOW is the time to make your voice heard. Demand a fair and just COLA based on the CPI-E! TSCL has a petition at http://wfc2.wiredforchange.com/o/8854/p/dia/action3/common/public/?action_KEY=10173 you can sign asking Congress to reverse the growing retirement crisis. [Source: TSCL | Arthur Cooper | October 13, 2017 ++]

Retiree/VA Disability 2018 COLA ► Biggest since 2012

Military retirees and those who receive disability checks and some other types of pay from the Department of Veterans Affairs will see a 2 percent pay raise in their monthly paychecks in 2018. It is the biggest cost of living (COLA) increase since 2012, equaling as much as \$310 a month for those at the top of the retirement pay charts. Thanks to the increase, the average military retirement check for an E-7 with 20 years of service will go up by \$46 a month, while an O-5 with the same time in uniform will see an \$88 monthly increase. To determine your retirement pay go to:

- <http://militarypay.defense.gov/Calculators/Active-Duty-Retirement/Final-Pay-Calculator> if you first entered the military before September 8, 1980
- <http://militarypay.defense.gov/Calculators/Active-Duty-Retirement/High-36-Calculator> if you first entered the military between September 8, 1980 and July 31, 1986
- <http://militarypay.defense.gov/Calculators/Active-Duty-Retirement/CSB-REDUX-Calculator> If you first entered the military between August 1, 1986 and December 31, 2017
- <http://militarypay.defense.gov/Calculators/BRS> If you first entered the military after January 1, 2017.

Disabled veterans will also see a bump, with the average VA disability check going up about \$3 per month for those with a 10 percent rating, and \$58 for those rated at 100 percent. To see your new payments refer to <http://www.military.com/benefits/veterans-health-care/va-disability-compensation-rates.html>. Other users, including Survivor Benefit Plan beneficiaries and those who draw Dependency and Indemnity Compensation (DIC), can also expect to benefit from the bump.

Military retirees and VA beneficiaries aren't the only ones who benefit from the COLA increase. Civil service retirees will also see the 2 percent jump in their monthly checks. And for Social Security recipients, the monthly increase will mean an extra \$25 per month for the average beneficiary. Most government payments see a COLA increase every year. The increase, which is based on the Consumer Price Index (CPI), makes sure payments keep up with inflation. Recipients can thank a big jump in the cost of gasoline due to Hurricane Harvey for the jump in the CPI that caused this year's COLA boost.

The COLA affects benefits for more than 70 million U.S. residents, including Social Security recipients, disabled veterans, federal retirees, and retired military members. That's about one in every five Americans. Last year, the COLA increase was 0.3 percent; in 2015, retirees saw their checks remain at 2014 levels. Congress is still hashing out the pay raise currently serving troops will receive for 2018. Both a proposal passed by the Senate and a White House plan mandate a 2.1 percent increase. A measure passed by the House would instead give troops a 2.3 percent increase.

A decision on just what those troops will receive -- and whether what retirees and VA users will receive is lower -- has yet to be made. Lawmakers have recently started closed-door negotiations on the proposals. Unlike that active-duty pay raise, the bump received by retirees and VA users does not require an act of Congress to go into effect. Those groups will see their pay raise in January regardless of what Congress does for current troops. [Source: Military.com | Jim Absher | October 13, 2017 ++]

Bank Fees Update 04 ► Record Highs | How to Easily Avoid Them

Having a checking account could cost you more than ever this year. Average overdraft and ATM fees have reached record highs, according to the latest annual checking account survey from Bankrate. “Banks continue to lean on fees to make money, as low interest rates and regulatory pressure have taken a bite out of profits,” Bankrate says. The good news is that it’s perhaps easier than ever to avoid such fees. For its survey, Bankrate examined fees at 10 banking institutions in each of the 25 largest markets in the U.S. The findings show the average overdraft fee is now \$33.38. That reflects a 1 percent increase since last year and is a record high. The average cost of using an out-of-network ATM is \$4.69, reflecting a 2.6 percent increase since 2016. It is the 11th consecutive year that the cost has increased. This cost comes from two different fees:

- **ATM surcharge** (levied by the bank that owns the ATM you use): Average is \$2.97
- **Fee to use another bank’s ATM** (levied by your bank): Average is \$1.72

There are multiple ways to avoid having to pay overdraft fees, including:

- **Canceling overdraft protection:** If you currently receive overdraft protection from your bank, opt out of it. If you opt out, your debit card will be declined at checkout if you try to spend more money than is available in your checking account. That way, you won’t incur an overdraft fee.
- **Signing up for alerts:** Set up an electronic alert so you receive a text message or email when your account balance falls below a certain amount that you specify. Or set up a daily alert so you are notified of your balance every day, regardless of whether it’s running low.
- **Asking for a fee to be reversed:** As was detailed in [“How to Get Credit Card and Bank Fees Reversed,”](#) many institutions will grant a courtesy fee reversal for the first overdraft occurrence or allow a certain number of overdrafts in a specified period. You never know unless you ask.

Some folks avoid overdraft fees by linking their checking and savings accounts. That way, money will be pulled from the savings account if the checking account doesn’t have enough money to cover a purchase. This can trade one problem for another, however, by whittling away your savings in the name of everyday purchases. So consider the option carefully before using it.

There are also multiple ways to avoid ATM fees, including by:

- **Using in-network ATMs:** Many folks carry an internet-connected smartphone everywhere they go. Use yours to find your own bank’s closest ATM when you’re out and about and need cash unexpectedly.
- **Planning ahead:** Carry a certain amount of cash on you at all times if you use cash often. My household tries to avoid using cash to make tracking expenses easier, but we keep a little cash at home. It’s meant primarily for emergencies — like when cash registers are down after a hurricane — but we can “withdraw” from the stash if we need cash unexpectedly. It saves us ATM fees *and* a trip to the ATM.
- **Withdrawing cash at the grocery store:** Avoid ATM fees and the inconvenience of finding an in-network machine by paying for your groceries with a debit card and getting cash back.
- Check out [“14 Ways to Avoid Paying Irritating Bank Fees.”](#) For more tips like above.

One way to avoid both overdraft and ATM fees — and possible other bank fees — is to switch to a bank that charges fewer or lower fees. As was reported in [“11 Ways to Find a Bank With More Bang for Your Buck,”](#)

multiple types of institutions tend to be cheaper alternatives to big national banks, and sometimes to brick-and-mortar banks as a whole. Online banks are an alternative you'll see commonly mentioned at Money Talks News. While online banks don't have in-network ATMs, some waive a certain amount of out-of-network fees in a specific period. Depending on your situation, though, alternatives like a community bank or [credit union might serve you better](#). If you find an institution worth switching to, check out "[5 Simple Steps to Painlessly Switch Banks](#)." [Source: MoneyTalksNews | Karla Bowsler | October 4, 2017 ++]

Social Security Number Update 01 ► Replacement System Sought

White House Cyber Coordinator Rob Joyce is seeking agency and department input on potential replacements for what he calls a "flawed" Social Security number system. "I feel very strongly that the Social Security number has outlived its usefulness," said Joyce, who spoke at the Washington Post Cyber Summit on Tuesday. "We've called for the departments and agencies to bring forward their ideas." Joyce said that he supports a public-private key system that would use public facing and changeable identifiers for less secure environments and a private and more permanent number for secure use.



Joyce explained that each time a person's Social Security number is used, the vulnerability of that number increases. And, according to the Social Security Administration website, the SSN may be the most widely used numbering system in the United States. The Social Security number was created in 1936 to track the earning histories of U.S. workers and was never intended for use as a personal identification document, according to the SSA website. However, in 1943 an executive order required all federal agencies to use the SSN for future identification purposes, and the 1960s and '70s saw legislation that mandated the use of SSN in hospitals, banks and many federal programs.

According to Joyce, a core problem of the SSN system is that it cannot be rolled back after known compromise occurs. In fact, Joyce said that he personally knows of four times his Social Security number has been compromised. The most recent major compromise of Social Security numbers and other personally identifiable information by the credit monitoring service, Equifax, also raised concern over the regulations allowing certain entities to possess Social Security numbers. "There should be a government role in some of that," said Joyce, pointing particularly to the problem that consumers don't get a choice in whether credit monitoring services get to have their personal data.

"Over half of Americans now have this private number public," Daniel Castro, vice president of the Information Technology and Innovation Foundation, told Federal Times. "That's why it's such a big deal right now." Castro explained that the kind of information obtained in the Equifax breach, such as names, birth dates and Social Security numbers, can all be used to do things like open a bank account in someone's name. "We have to stop using the Social Security number to verify someone's ID," said Castro, adding that he thinks the use of the SSN to do things like open bank accounts should be outlawed. "The problem is not having a number to identify you. The problem is having a number to identify you that's supposed to be secret but is actually shared with everyone else."

However, despite Joyce’s endorsement of finding a new digital identification process, Castro said that the federal government likely won’t have the momentum to change things any time soon, as the different branches often are “too insular on [their] outlook on this issue.” In 2015, the federal government founded a Trusted Identities Group within the National Institute for Standards and Technology facilitate the use of secure digital identity solutions, which has released guidance for federal agencies warning against the misuse and over use of the SSN. Special Publication 800-63A on enrollment and identity proofing said that “overreliance on the SSN can contribute to misuse and place the applicant at risk of harm, such as through identity theft,” but also acknowledged the need for credential service providers to use SSNs in certain circumstances.

Castro said that the Trusted Identities Group needs to be bigger to fully affect change in this space. “It’s very small. I think they’ve laid a bit of the technical groundwork for what it would look like,” said Castro. Funding also poses an issue for any potential new ID system, as Castro noted that citizens aren’t likely to pay for a government service that was previously free. He suggested mandating that organizations like Equifax who expose citizen data pay for those affected to receive digital identifiers in place of their SSN. Ideally, Castro said, a new digital identifier would offer a single identity with multiple components, so that the component required for tax forms would be separate from the component used to get a library card. [Source: FederalTimes | Jessie Bur | October 3, 2017 ++]

Top Wage Growth Jobs ► Ten Fastest

Wages are growing, but some career fields are doing much better than others, according to the latest edition of the Glassdoor Local Pay Reports. Overall, the pace of wage growth remains anemic, even though the economy has bounced back enough since the Great Recession that the Federal Reserve has raised its benchmark federal funds rate [twice so far this year](#). The latest Glassdoor statistics show that the median annual base pay for full-time workers reached \$51,491 in September. That reflects a wage growth increase of 1.8 percent since September 2016. “At today’s sluggish rate of wage growth, it will take America roughly 40 years to double the nation’s median base pay.”

September’s year-over-year increase is a smidgen better than that of August, 1.6 percent. But it’s still far from the peak wage growth of 3.5 percent seen in January. Glassdoor’s chief economist, Andrew Chamberlain, notes in a blog post: Glassdoor Local Pay Reports are based on an analysis of millions of salaries collected by the jobs data website. The 10 jobs that saw the steepest rates of wage growth in September — and their median base pay — are:

- **Barista:** \$24,305 — up 5.6 percent from one year ago
- **Truck driver:** \$52,280 — up 5 percent
- **Recruiter:** \$50,491 — up 4.8 percent
- **Bank teller:** \$28,633 — up 4.3 percent
- **Restaurant cook:** \$28,456 — up 4.3 percent
- **Solutions architect:** \$102,184 — up 3.7 percent
- **Business development manager:** \$69,503 — up 3.6 percent
- **Store manager:** \$48,701 — up 3.5 percent
- **Pharmacy technician:** \$30,688 — up 3.4 percent
- **Web designer:** \$51,767 — up 3.4 percent

Despite seeing the fastest wage growth, however, baristas earned the lowest base pay of any job in the September report. Bank tellers and restaurant cooks were also among the 10 lowest-paying positions last month. “Jobs with the highest pay growth aren’t always the ones with the highest earning potential,” Chamberlain [writes in a blog post](#). The 10 jobs with the highest earnings — and their median base pay and pay growth — are:

1. **Pharmacist:** \$127,506 — up 0.4 percent percent over the past year
2. **Solutions architect:** \$102,184 — up 3.7 percent

3. **Data scientist:** \$95,624 — up 0.6 percent
4. **Tax manager:** \$94,180 — 1.7 percent
5. **Attorney:** \$93,920 — down 1.9 percent
6. **Product manager:** \$91,035 — 1.2 percent
7. **Professor:** \$87,244 — 2.6 percent
8. **Software engineer:** \$85,806 — 2.7 percent
9. **Systems engineer:** \$78,514 — 1.8 percent
10. **UX designer:** \$77,994 — 1.2 percent

This list reflects a continuing trend. Chamberlain explains: “Once again, three fields dominated the highest paying jobs in September: Healthcare, tech, and professional services. Pharmacist, solutions architect, and data scientist again topped our list as the jobs with highest U.S. median base pay in the September Local Pay Reports.” [Source: MoneyTalksNews | Karla Bowsher | October 3, 2017 ++]

Servicemembers Credit Cards ► DoD Rate Limit Rules

New Defense Department rules on credit cards issued to service members and their dependents went into effect 7 OCT but they won't help current cardholders. Only new credit card accounts opened by service members and their dependents as of that date will be covered, so advocates expect the rules to have little immediate effect. And one of the main rules — a requirement that credit cards limit their annual percentage rate to 36 percent for military members — rarely applies, advocates noted, as most cards don't reach that figure, even with extra fees and charges included.

That interest rate cap is the main benefit under the Military Lending Act. The new DoD rule is part of an expansion of DoD's implementation of that law, to provide more protections to service members and their dependents. While most other types of credit extended to military members has been covered under DoD rules, credit cards weren't covered until now. “Service members and their families will receive the same consumer financial protections that they are currently afforded under the Military Lending Act for most forms of closed-end consumer credit,” DoD spokesman Army Lt. Col. Paul Haverstick said. “Those protections include the cost of credit not to exceed 36 percent [annual percentage rate], mandatory disclosures, and the prohibition of certain practices as a condition of credit, such as waiving one's right to legal recourse in a loan dispute.”

The rules likely will affect a narrow slice of the credit card market, said Rohit Chopra, senior fellow at the Consumer Federation of America. “Currently the vast majority of credit cards issued offer interest rates well below the 36 percent rate cap.” For example, credit unions can't charge more than 18 percent interest on their credit cards. Including credit cards in the DoD rules was important, said Christopher Peterson, a professor of law at the University of Utah, who has conducted research on payday lending and effects on the military community. There was the potential that some predatory credit cards could evolve in the future, he said.

“As it will become more difficult for payday lenders to continue to make loans to service members, there was the chance payday lenders could try to evolve their products to become credit card products,” Peterson said. “That would be unfortunate if they manage to circumvent regulations by modifying products to simply be issued with a piece of plastic. “The Defense Department is trying to close loopholes to make sure that service members get the benefit of protections the Congress provided to them.” Another key protection for service members, Peterson said, is the prohibition of clauses in creditors' contracts with service members and dependents that would prevent service members from going to court to settle disputes. That now applies to future credit cards issued. “It's a meaningful right, but not one you'd notice until there was a dispute that arose,” Peterson said.

The Military Lending Act of 2006 gave DoD broad authority to define the types of loans covered by the 36 percent interest rate cap, with the exception of mortgages or purchase-money loans. In its initial implementation of the law in 2007, DoD put narrow limits on the types of credit covered: payday loans, vehicle title loans and refund anticipation loans. Consumer advocates complained that unscrupulous lenders were skirting these narrow rules and morphing their products to be able to charge service members and their families high interest rates; they would tweak payday loan terms, for example, so they would fall within the rules. This enabled lenders to find ways to continue to charge interest rates north of 300 percent to service members and their families. So for the last several years, DoD has been working to change its rules.

In October, 2016, DoD implemented expanded rules to include all types of consumer credit, such as overdraft lines of credit, deposit advance loans and installment loans, to name a few examples. Lenders have to follow stricter rules for active-duty members and their dependents than they do for civilian borrowers. But DoD gave credit card issuers an extra year to implement credit card rules. Under the law, the rules apply to cards issued to active-duty military and dependents, but not to retirees and other veterans. The most extensive new regulations deal with how the fees are figured out. Certain fees and charges generally must be included in the interest rate calculation. For example, the basic interest rate might be 27 percent, but extra fees could bring it above the 36 percent cap under the law. But credit card issuers don't have to include "bona fide" fees if they are reasonable, such as late fees, and annual (participation) fees. There are procedures for determining what is "reasonable."

Certain fees, such as charges for voluntary credit insurance and debt cancellation contracts, must be included in the interest rate calculation. Credit card issuers don't have to include the disclosure about your effective interest rate on your statement; under Federal Reserve rules, that's optional. Other new rules include:

- Creditors can't require borrowers to waive their rights to legal recourse or submit to arbitration rather than taking the company to court if there's a dispute.
- No fees can be charged in a billing cycle when there's a zero balance, except an annual (participation) fee, which in most cases, can't exceed \$100 a year.
- Rewards programs (cash back, account credits, etc.) could be allowed to offset the calculations on the interest rate, on a case by case basis.

[Source: ArmyTimes | Karen Jowers | September 30, 2017 ++]

Pet Sales Scams ► Phony Ads and Fake Breeders

Online pet sales scams are on the rise. In fact, nearly 80% of online sponsored pet listings may be fake, according to a new BBB report on puppy scams. If you are shopping online for a new cat, dog, parrot, or other pet, watch out for this common con.

How the Scam Works:

- You want to buy a dog, so you look for breeders online. An ad directs you to a website that appears to be run by a reputable breeder. The site has photos of puppies and guarantees of their health and vaccinations, even testimonials from happy pet owners. The best part is that this breeder's prices are lower than those listed elsewhere. In some cases, the pets are even free and you just pay for shipping.
- You contact the breeder about purchasing the dog, and they agree to ship the puppy to you. In some versions, the "breeder" instructs you to pay a third-party company to transport your new pet. The "shipping service" is really a scam. Other times, the breeder asks for money to purchase a crate, buy insurance, or cover other costs. Scammers typically continue to request money for fictional expenses until the would-be owner gets fed up.

- No matter the excuse, don't fall for it. The puppy will never arrive, because the dog doesn't exist. The scammer simply stole the pictures and other information from a legitimate breeder's website. Although the scam is most prevalent with puppies, BBB found fake websites for kittens, parrots, and other animals.

Tips to avoid a pet scam:

- Always visit the breeder in person. Arrange to take a tour of the breeder's property and pick up your puppy in person. If the breeder insists on shipping the dog, that's a big red flag.
- Check references. Talk to others who have purchased pets from this breeder and the veterinarian the breeder works with.
- Pay with check or credit card. If a breeder pressures you to pay by wire transfer or prepaid debit card, it is probably a scam.
- Check BBB Tips: Many online sales scams follow similar patterns. Check www.bbb.org/webpurchasescam for more advice.

BBB recently published an extensive report about puppy scams. To read the complete report refer to <https://www.bbb.org/puppyscamstudy>. To learn more about scams, go to BBB Scam Tips (bbb.org/scamtips). To report a scam, go to BBB Scam Tracker (bbb.org/scamtracker). [Source: BBB Scam Alert | September 29, 2017 ++]

Netflix Scam ► Phony Tech Support

Trying to reach [Netflix](https://www.netflix.com) for help with your account? If so, watch out for this crafty con. Scammers provide fake customer support numbers online and fool callers into purchasing unrelated computer software.

How the Scam Works:

- You are having trouble with your Netflix account, so you search online for the customer support phone number. A quick search turns up what appears to be a legitimate toll-free number (1-888 or 1-844 number). You dial it, and a "representative" answers. This person declares that your Netflix account has been hacked. In one version, the scammer claimed a dozen people from across the globe all used a victim's account.
- Skeptical? The "representative" says they can provide proof that your account was hacked. But first, they need remote access to your computer.
- Unfortunately, granting a scammer access can open you up to the risk of identity theft. Scam artists can install malware that records passwords or hunts for personal information, such as bank account numbers. However, according to [BBB Scam Tracker reports](#), this scam appears to be a pretext for selling computer security software. The expensive software – victims report paying between \$200 and \$900 – will do nothing to fix your Netflix account, which was never hacked in the first place.

Protect yourself from tech support scam:

- **Don't ever give a stranger remote access:** Granting someone remote access to your computer permits them to install malware and access your files. Don't do it!
- **Be careful when searching for support phone numbers:** Unfortunately, Netflix isn't the only company for which scammers have posted phony customer support numbers online. Be careful and use the number on the business's website (double check the URL) or your bill.
- **Check out BBB Tips:** Many tech support scams use similar techniques, for more advice see bbb.org/techsupportscam

Get help keeping your account secure by checking out [these resources in Netflix's Help Center](https://help.netflix.com/en/node/13243) at <https://help.netflix.com/en/node/13243>. (Note: Netflix is a BBB Accredited Business. To learn more about scams,

go to BBB Scam Tips (bbb.org/scamtips). To report a scam, go to BBB Scam Tracker (bbb.org/scamtracker). [Source: BBB Scam Alert | October 6, 2017 ++]

Hurricane Relief Work Scam ► Phony Job Offers

If you are looking for work with hurricane relief efforts, beware of phony job offers. Con artists preying on job seekers are giving their plays a timely twist, according to reports in [BBB Scam Tracker](#).

How the Scam Works:

- You are looking for a job, and you want to help with hurricane relief work. You see an ad for a personal assistant or similar role posted on Indeed, Craigslist.org or another website. In one Scam Tracker report, the position was described as a "liaison" with "hospitals, orphanage homes and various other charity institutions."
- It sounds like a great opportunity, so you send your resume. You are quickly hired, without even meeting your new boss. (Some scammers may do a short interview over email or an online chat.)
- Your new "boss" emails and claims they are out of town. But they need you to complete a few errands in their absence. The "boss" sends a check, tells you to deposit it, and instructs you to distribute the money to several charities. In one BBB Scam Tracker report, the victim was asked to send money to an "orphanage" affected by Hurricane Harvey. Unfortunately, both the charities and check are fake, and you will be responsible for any money withdrawn against it.

How to Spot an Employment Scam:

1. **Watch out for on-the-spot job offers.** You may be an excellent candidate for the job, but beware of offers made without an interview. A real company will want to talk to a candidate before hiring him or her.
2. **Don't fall for an overpayment scam.** No legitimate job would ever overpay an employee and ask him/her wire the money elsewhere. This is a common trick used by scammers.
3. **Be very cautious of any job that asks you to share personal information or hand over money.** Scammers will often use the guise of running a credit check, setting up direct deposit, or paying for training. This information can then be used for identity theft, so be absolutely certain before you share.
4. **Check out BBB Tips:** Many employment and fake check scams use similar techniques, see bbb.org/employmentscam and bbb.org/fakecheckscam for more advice.

Unfortunately, this is just one of many scams – from fake charities to fly-by-night contractors - that spring up in the wake of a natural disaster. [Check out these resources](#) offered by BBB to help after a natural disaster. To learn more about scams, go to BBB Scam Tips (bbb.org/scamtips). To report a scam, go to BBB Scam Tracker (bbb.org/scamtracker). [Source: BBB Scam Alert | October 13, 2017 ++]

Survivor's Debt ► What the Widow(er) is Liable For

A wife's husband had been dead less than a week when the first collections call came. They didn't have any credit cards or loans, but there were a few lingering medical bills that hadn't been paid — largely because the couple were busy with more important matters. When the caller asked for the husband and the widow explained he was dead, she got the courtesy condolences, followed by the question of whether she was his wife. It was time to pay up, she was

nicely told. When she told them she needed to pay for the funeral first, they said goodbye, only to call back a few days later and a few days after that.

It's not uncommon for creditors to nudge grieving relatives into paying their deceased loved one's bills. In case you find yourself in a similar situation, what you should know follows. Keep in mind that laws vary by state, so this article should not be considered specific advice for your situation. For advice pertaining to your specific situation, seek out the help of a competent financial professional or estate attorney.

Most people don't need to worry about inheriting debt

If you're wondering whether you're liable for your loved one's debt, the short answer is no. Debt does not get passed down to heirs. Of course, creditors typically won't tell you that, and they are often depending on your sense of duty to pay off those debts. They may be kind and sympathetic, but ultimately their job is to cajole you into paying. That said, there are exceptions to every rule. The Federal Trade Commission cites four instances in which you might be on the hook for a debt after your loved one dies:

- You co-signed on the debt.
- You live in a community property state (more on that in a minute).
- You are the surviving spouse, and state law requires you to pay certain debts, such as health care bills.
- You were legally responsible for handling the estate but did not do so in accordance with applicable state laws.

Everyone else can rest assured they won't be responsible for paying Great-Aunt Helga's credit card balance once she leaves this earthly plane.

Estates are liable for debt

While you're generally not on the hook for your loved one's debt, the person's estate generally is. In other words, your loved one's remaining assets often must be used to pay your loved one's outstanding debts. Creditors may file claims against estate assets in court to help ensure those claims get paid. "When a person dies, their estate is born. And that estate settles up. It pays its debts, then distributes what's left to the heirs. If there's not enough to pay the debt, well, the lender loses." If an estate doesn't have enough money to pay off creditors, it's considered insolvent. In that case, the unpaid debt should disappear. However, that won't stop some companies from calling you for payment, particularly if you're the surviving spouse.

"The bottom line is this: Don't pay debts you don't owe. And when in doubt, talk it out — with a lawyer." A final note about estates: It's important to note that not all assets are considered part of an estate. Those excluded from an estate are technically known as "non-probate assets." Typically, they include assets that have a beneficiary or are jointly owned. In other words, you don't have to worry about your spouse's life insurance policy being wiped out to pay off his or her credit cards.

Community property states have different rules

Generally, spouses aren't responsible for individual debt of a husband or wife. So if John Doe opened a credit card in his name alone, Jane Doe wouldn't be responsible for paying it off — in most states. That's because most states have adopted a property ownership system known as "common law," according to the Internal Revenue Service. The federal agency says of this system, "The theory underlying common law is that each spouse is a separate individual with separate legal and property rights. Thus, as a general rule, each spouse owns and is taxed upon the income that he or she earns."

It's a different story if you live in one of the nine states that goes by what's known as "community property law." In these states, if John Doe opens a credit card in his name, the debt becomes both John and Jane Doe's responsibility." Spouses are "considered to share debts" in community property states, as the IRS puts it. The agency continues: "Depending on state law, creditors of spouses may be able to reach all or part of the community property, regardless of how it is titled, to satisfy debts incurred by either spouse." The nine community property states are:

- Arizona

- California
- Idaho
- Louisiana
- Nevada
- New Mexico
- Texas
- Washington
- Wisconsin
- Some marriages in Alaska may also be community property unions, but it's optional, the IRS notes.

[Source: MoneyTalksNews | Maryalene LaPonsie | October 3, 2017++]

Mortgage Update 07 ► Refinancing After Retirement

The below question is a stark reminder of how important it is to consider the implications of life changes before they occur.

Please help! My husband and I are retired and want to refinance to get lower interest. Wells Fargo has refused us, even though we have a great record. Four years ago both of us were working. Now we're retired. They claim we don't bring enough money in to refinance. Don't they think that maybe paying a lesser amount each month would help us stay out of trouble?

– Mary

Many retirees in Mary's situation want to get their bills as low as possible, so they attempt to refinance their mortgage thinking the lender would happily refinance them to a lower rate. Even with virtually no other bills, a flawless credit history and substantial savings, they assume incorrectly. Their problem is the same as Mary's: insufficient income. Even with sufficient money in the bank to pay off the mortgage it's not enough to get a loan. While money in the bank is always nice it cannot compare to income. How can this possibly be? Simple: Because you can take the next plane to Monte Carlo and lose your life savings. Income, on the other hand, provides the lender a verifiable source to meet future payment obligations.

In short, lenders like to see savings, but they need to see income. So here's a lesson for those of us who may someday leave the workforce to have a child, start a business, go back to school, join the Peace Corps or (as in Mary's case) retire: If there's any chance you're going to need borrowed money, grab it before you lower or drop your income. What can Mary do? She could:

- Sell a portion of the house to a close friend or relative. Then use their income to qualify for the refinance. You will most likely get a lower interest rate while maintaining a partial ownership of the house, and the buyer gets to stop paying rent and start gaining equity.
- Try a variation on this theme by seeking a co-signer. Perhaps she has an adult child with sufficient income to co-sign her loan. It's not an ideal solution, because the child will be on the hook for Mary's mortgage, and that will also reduce their ability to borrow for themselves.
- See if she qualifies for any programs designed to help homeowners refinance. Easy way to do it? Call a nonprofit, free housing counselor. They should be up to date on programs both local and national that she might qualify for. Most nonprofit credit counseling agencies also offer housing counseling. To find them, just go to <https://www.moneytalksnews.com/solutions> and click on "Budget and Debt Counseling" under the Senior Solutions section. (You don't have to be a senior to use their services.)

[Source: MoneyTalksNews | Stacy Johnson | October 6, 2017 ++]

Tax Burden for Virginia Retired Vets ► As of OCT 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 Virginia.

Sales Taxes

State Sales Tax: 5.30% The general sales tax rate for Virginia is 5.3 percent (4.3 percent state tax and 1 percent local tax). There is an additional 0.7 percent state tax imposed in the localities that make up Northern Virginia and Hampton Roads, making the rate in these areas 6 percent (5 percent state tax and 1 percent local tax). Sales of eligible food items are subject to a reduced sales tax rate of 2.5 percent (1.5 percent state tax and 1 percent local tax).

Gasoline Tax: 40.79 cents/gallon (Includes all taxes)

Diesel Fuel Tax: 50.48 cents/gallon (Includes all taxes)

Cigarette Tax: 30 cents/pack of 20

Personal Income Taxes

Tax Rate Range: Low – 2%; High – 5.7% . Tax rates do not include local option tax of 2%.

Income Brackets: Lowest – \$930; Highest – \$1,860

Number of Brackets: 5

Personal Exemptions: Single – \$3,000; Married – \$6,000; Dependent – \$4,050

Standard Deduction: Single - \$3,000; Couple - \$6,000

Medical/Dental Deduction: Partial. Individuals may deduct long-term health care insurance premiums, provided the premiums have not been deducted for federal income tax purposes. The premiums must be paid specifically for a long-term health care policy. The amount to be subtracted is the cost of long-term health care insurance premiums that has not been deducted on your federal return. The Livable Home Tax Credit applies to purchases of supplies and other items needed to retrofit existing housing or incorporate into new construction to improve accessibility and/or visitability, and meets the eligibility guidelines established by the Virginia Department of Housing and community Development. The credit, which is limited to \$2,500 per taxable year, was not previously allowed for new construction.

Federal Income Tax Deduction: None

Retirement Income Taxes: A Virginia Age Deduction allows an exemption for each of the following:

- Each filer who is age 65 or over by January 1 may claim an additional exemption.
- When a married couple uses the Spouse Adjustment Tax, each spouse must claim his or her own age exemption.
- Each filer who is considered blind for federal income tax purposes may claim an additional exemption.
- When a married couple uses Spouse Adjustment Tax, each spouse must claim his or her own exemption for blindness.

Individuals who are age 64 by midnight, January 1, 2006 may claim a subtraction of \$6,000 on their income tax returns. Individuals who are age 65 or over by midnight January 1, may be eligible to claim

a subtraction of up to \$12,000. You may not claim the age deduction if you claim the Disability Income subtraction.

Virginia law exempts Social Security and Tier 1 Railroad Retirement benefits from taxation. If you were required to include any of your benefits in federal adjusted gross income, subtract that amount on your Virginia return.

If you, or your spouse were born on or before January 1, 1947, you may qualify to claim an age deduction of up to \$12,000 each for 2011. The age deduction you may claim will depend upon your birth date, filing status and income. If your birth date is on or before January 1, 1939, you may claim an age deduction of \$12,000. If you are married, each spouse born on or before January 1, 1939, may claim a \$12,000 age deduction. For individuals born after January 1, 1939, the age deduction is based on the following criteria: If your birth date is on or between January 2, 1939, and January 1, 1947, your age deduction is based on your income. A taxpayer's income, for purposes of determining an income-based age deduction is the taxpayer's adjusted federal adjusted gross income or "AFAGI" A taxpayer's AFAGI is the taxpayer's federal adjusted gross income, modified for any fixed date conformity adjustments, and reduced by any taxable Social Security and Tier 1 Railroad Benefits. For filing Status 1, Single Taxpayer, the maximum allowable age deduction of \$12,000 is reduced \$1 for every \$1 the taxpayer's AFAGI exceeds \$50,000. For all married taxpayers whether filing jointly or separately, the maximum allowable age deduction of \$12,000 each is reduced \$1 for every \$1 the married taxpayers' joint AFAGI exceeds \$75,000.

Retired Military Pay: Follows federal tax rules. Military retirement income received by those awarded the Medal of Honor can be subtracted from federal gross income for tax purposes.

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

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

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

Property Taxes

Property taxes are administered by the state's cities, counties and towns and are based on 100% of fair market value. Tangible personal property is also taxed at the local level and is based on a percentage of the original cost. A county, city, or town may enact a program for senior citizens and disabled persons allowing for exemption, deferral (or a combination of both) for property taxes on realty and manufactured homes owned and occupied as the sole dwelling of a person 65 years of age or older. Annual family income is generally limited to \$50,000, but may be higher in certain Northern Virginia communities. Net worth limits may apply. Local tax officials should be contacted. There are no adjustments at the state level.

Inheritance and Estate Taxes

There is no inheritance tax. The estate tax has been repealed for the estates of decedents whose date of death occurs on or after July 1, 2007.

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For further information, visit the Virginia Department of Taxation site <https://www.tax.virginia.gov> or call 804-367-367-8031. [Source: <http://www.retirementliving.com> | October 2017 ++]

*** General Interest ***



Notes of Interest ► 01 thru 15 OCT 2017

- **\$1,700,000.00 Penny.** How to check if you have one! Go to <https://youtu.be/W3QvI0QL3LI> and hear a little bit of history on what the U.S mint did.
- **Bathroom Tips 2.** Go to <https://rumble.com/v30t72-7-genius-cleaning-tricks-for-your-bathroom.html> to learn 7 awesome life hacks to quickly clean your bathroom, leaving it looking shiny and new! Many common household items can be used to clean up even the worst messes and stains so save your cash.
- **Ants.** Stop the ANT INVASION with 7 of the most effective and surprisingly simple methods to control your ant problem. Prevent ants from climbing on a picnic table, how to track them to their source, how to make a homemade ant killer and more at https://youtu.be/7R1zlFR_qVA
- **Microwave Tips.** Go to <https://youtu.be/qIKAUxGfxGA> to see some tips on cleaning the inside of your microwave.
- **Home Security Tips.** Go to <http://www.dailymotion.com/video/x5a40h9> to see some backyard fixes you can make to make it harder for a thief to access your house or storage shed.
- **Running Toilet Fix.** You don't have to live with a running toilet or pay an expensive repair bill. The Family Handyman editor, Travis Larson, at blob: <http://www.dailymotion.com/eb7ff0f5-df88-45e0-a366-cd6c000fbd65> shows you how to diagnose what is making your toilet run and how fix the problem using two tools, a screwdriver and pliers.
- **Drain clog Fix.** Go to <http://www.dailymotion.com/4197a07a-4683-41e6-bd69-9551fec285f8> to see how to unclog a drain.
- **Tool Tips.** Go to https://www.youtube.com/watch?v=SQdn_TvryeE to see some very innovative uses of tools.
- **Chemical Weapons.** Russia on 27 SEP completed the task of destroying its huge, Cold War-era chemical weapons stockpiles, winning praise from an international chemical weapons watchdog. Russia has spent more than 290 billion rubles (more than \$5 billion) to destroy the 40,000 metric tons of chemical weapons it possessed
- **DPRK.** North Korea claims that 4.7 million of its citizens have volunteered to join or re-enlist in the military since leader Kim Jong Un threatened to "tame" President Trump "with fire" last week, North Korean state media reported.
- **Sexually Transmitted Infections.** Health officials are reporting another record increase in infections from three sexually transmitted infections. More than 2 million new cases of chlamydia, gonorrhea and syphilis were reported in the United States last year — the most ever.

- **Driving.** If you are driving behind a truck carrying gas cylinders - PASS IT and put it far behind you. Watch what could happen if the truck has a in a collision with someone at <https://www.youtube-nocookie.com/embed/FG1LGKieTxY?autoplay=1&vq=480&rel=0> .
- **Rules of Engagement.** U.S. forces are no longer bound by requirements to be in contact with enemy forces in Afghanistan before opening fire, thanks to a change in rules of engagement orchestrated by Secretary of Defense Jim Mattis.
- **R4+S.** The Trump administration’s Afghanistan strategy has a new acronym, one which the Pentagon’s top officials say will lay the groundwork for a stable Afghanistan in the future. Appearing in front of the Senate Armed Services Committee, U.S. Secretary of Defense Jim Mattis described the strategy as “R4+S,” which stands for “regionalize, realign, reinforce, reconcile and sustain.”
- **Doughboys.** Check out https://www.youtube.com/watch?v=l_y4l49mZso. They deserve their own memorial.
- **APR.** Fail to understand the concepts of annual percentage rate and effective percentage rate in the video <https://www.youtube.com/watch?v=RuPMsK0mQC8> and you might end up owing more on your credit card debt than you expect.
- **Presidential Salary.** Instead of taking his salary, Trump donated all \$400,000 to the Department of the Interior where it will be used for construction and repair needs at military cemeteries.
- **Bird Brain.** Go to http://wallythekat.tripod.com/A_Pages/AA-Videos-YOU-Tube/Crow-Einstein.html to view a remarkable problem solving feat by a crow.
- **Federal Budget Deficit.** The federal government ran a \$668 billion budget deficit for the just-completed 2017 fiscal year, according to a new government report. That’s \$82 billion more red ink than the government produced last year.
- **MCAS 29 Palms Commissary.** The main commissary at the Marine Corps Air Ground Combat Center at Twentynine Palms, Calif., has been closed indefinitely due to an outbreak of rodents, according to the Defense Commissary Agency.
- **Politically Correct School.** If you are baffled by how politically correct our schools have become then you might enjoy watching The World According to Billy Potwin starring Kevin Sorbo at <http://i1.cmail19.com/ei/i/4C/5E3/211/212155/csfinal/PCSchool.JPG>
- **No One Took A Knee.** Check out <https://twitter.com/i/videos/tweet/789970623871279104>.

NAFTA ► Trade Negotiations Are Underway | Impact on You

Trade negotiations are underway in Washington, D.C. Sounds like a snooze, right? But the implications of the NAFTA talks are potentially huge. As it becomes more likely the Trump administration will cause the U.S. to withdraw from or otherwise torpedo the decades-old deal, some fear it will create economic confusion or crisis. Others hope terminating the deal will bring back jobs lost to offshoring through the years. The stakes are high. NAFTA, the North American Free Trade Agreement, was finalized in 1994 by three signatories — the U.S., Canada and Mexico. It was implemented step-by-step over more than a decade to dramatically lower import tariffs and other barriers to investment and trade.

Through NAFTA, the three countries’ economies have become deeply integrated. Trade has exploded — from roughly \$290 billion in 1993 to more than \$1.1 trillion in 2016, the Council on Foreign Relations notes. U.S. direct foreign investment in Mexico shot up in that same period — from \$15 billion to more than \$100 billion. The U.S. does as much trade with Canada and Mexico as with China, Japan, South Korea, Brazil, Russia and India combined, according to the Brookings Institution, a Washington, D.C.-based think tank. Major changes to NAFTA or a U.S. exodus from the agreement will affect businesses and local economies throughout the U.S.

According to Brookings, U.S. trade with Canada and Mexico is fueled mainly by the export and manufacture of goods, such as cars and airplanes. The think tank explains that U.S. manufacturers rely on less expensive parts imported from Mexico and Canada to build and sell their products at a competitive price for the world marketplace. At the same time, there is a growing export of U.S. services, Brookings reports. In 2016, services made up nearly 50 percent of exports from America's 100 largest metropolitan areas, where major banks, consultancies and universities are located.

According to the Council on Foreign Relations report, most estimates conclude that NAFTA has had a modestly positive impact on the U.S. gross domestic product. By contrast, critics say the bill is responsible for job losses and wage stagnation. They cite negative effects such as a growing trade deficit and U.S. companies moving their production to Mexico to reduce costs. Economists have various interpretations of the data. In 2013, [Dean Baker](#), an economist and the co-director of the Center for Economic and Policy Research, argued that economic gains from NAFTA had not helped most U.S. workers. By contrast, other economists have argued that U.S. consumers benefit from the lower prices and often-improved quality of goods from imports.

Enter President Trump

President Donald Trump's administration has characterized NAFTA as a disaster for many Americans. According to Trump, the agreement favored Mexico at the expense of U.S. manufacturing jobs and production. Trump reopened negotiations to reform NAFTA in August. He was following some early opponents to the free-trade deal, including 1992 presidential candidate Ross Perot, who then predicted a large loss of U.S. jobs to Mexico. Trump has suggested that the U.S. could abandon the three-nation deal and then negotiate separate trade deals with Canada and Mexico. He has at other times called for a renegotiation of the deal — making adjustments that would update the agreement and make it fairer.

Some NAFTA supporters agree that it's time to update the agreement, which was last negotiated about 25 years ago. Canadian Prime Minister Justin Trudeau has said he will work toward achieving a revised agreement. Mexican Secretary of the Economy Ildefonso Guajardo Villarreal recently praised Trump for taking a balanced approach to negotiation. But recently, the Trump administration has turned up the heat by calling for any new U.S. [trade](#) agreement with Canada and Mexico to be allowed to expire after five years, Bloomberg reports. Officials from Canada and Mexico have strongly objected to this type of sunset provision, saying it would create too much uncertainty for businesses.

The U.S. Chamber of Commerce has accused the Trump administration of trying to sabotage negotiations with “[poison pill proposals](#)” — demands that Mexico and Canada could not accept. These include demanding more favorable treatment for the U.S. in matters related to car production. Another demonstration of opposition: More than 310 state and local chambers of commerce on 9 OCT sent [a letter to the Trump administration](#) urging that the United States remain a part of NAFTA.

Who would be affected?

Several groups have a stake in what happens to NAFTA. They include:

- **Consumers:** Higher tariffs and stricter rules governing the origin of components would mean price increases for many goods — from shoes to cars.
- **Farmers:** American farmers likely would face steep tariffs — as high as 75 percent — on their exports of meat, poultry and other agricultural products to Mexico if the deal falls apart, [the New York Times reports](#).
- **Workers:** NAFTA critics — including unions and some Democratic lawmakers — hope that withdrawing from NAFTA (or adopting more protectionist rules) would prompt American companies to locate more of their production in the U.S. and bring back lost manufacturing jobs. But with complex supply chains that span all three countries, it's not a simple equation, as the [Los Angeles Times details in this report](#) on auto manufacturing.

Indeed, the global trade landscape has changed radically since NAFTA was signed — with the emergence of trading powers in Asia, South America and Europe. In that broader context, NAFTA has placed the U.S., Canada and Mexico in a better position to compete with Asia and Europe, argues Duke University professor Gary Gereffi, [in a blog for the Brookings Institution](#). He concludes: “The U.S. should be figuring out ways to expand NAFTA, not a plan to end it.” The current round of NAFTA talks is now slated to run through Tuesday, Oct. 17, after being extended by two days. [Source: MoneyTalksNews | Emmet Pierce | October 14, 2017 ++]

Coping With Grief ► Life After Loss

Losing someone you love can change your world. You miss the person who has died and want them back. You may feel sad, alone, or even angry. You might have trouble concentrating or sleeping. If you were a busy caregiver, you might feel lost when you’re suddenly faced with lots of unscheduled time. These feelings are normal. There’s no right or wrong way to mourn. Scientists have been studying how we process grief and are learning more about healthy ways to cope with loss.

The death of a loved one can affect how you feel, how you act, and what you think. Together, these reactions are called grief. It’s a natural response to loss. Grieving doesn’t mean that you have to feel certain emotions. People can grieve in very different ways. Cultural beliefs and traditions can influence how someone expresses grief and mourns. For example, in some cultures, grief is expressed quietly and privately. In others, it can be loud and out in the open. Culture also shapes how long family members are expected to grieve. “People often believe they should feel a certain way,” says Dr. Wendy Lichtenthal, a psychologist at Memorial Sloan-Kettering Cancer Center. “But such ‘shoulds’ can lead to feeling badly about feeling badly. It’s hugely important to give yourself permission to grieve and allow yourself to feel whatever you are feeling. People can be quite hard on themselves and critical of what they are feeling. Be compassionate and kind to yourself.”

Adapting to Loss

Experts say you should let yourself grieve in your own way and time. People have unique ways of expressing emotions. For example, some might express their feelings by doing things rather than talking about them. They may feel better going on a walk or swimming, or by doing something creative like writing or painting. For others, it may be more helpful to talk with family and friends about the person who’s gone, or with a counselor.

“Though people don’t often associate them with grief, laughing and smiling are also healthy responses to loss and can be protective,” explains Dr. George Bonanno, who studies how people cope with loss and trauma at Columbia University. He has found that people who express flexibility in their emotions often cope well with loss and are healthier over time. “It’s not about whether you should express or suppress emotion, but that you can do this when the situation calls for it,” he says. For instance, a person with emotional flexibility can show positive feelings, like joy, when sharing a happy memory of the person they lost and then switch to expressing sadness or anger when recalling more negative memories, like an argument with that person.

Grief is a process of letting go and learning to accept and live with loss. The amount of time it takes to do this varies with each person. “Usually people experience a strong acute grief reaction when someone dies and at the same time they begin the gradual process of adapting to the loss,” explains psychiatrist Dr. M. Katherine Shear at Columbia University. “To adapt to a loss, a person needs to accept its finality and understand what it means to them. They also have to find a way to re-envision their life with possibilities for happiness and for honoring their enduring connection to the person who died.”

Researchers like Lichtenthal have found that finding meaning in life after loss can help you adapt. Connecting to those things that are most important, including the relationship with the person who died, can help you co-exist with the pain of grief.

Types of Grief

About 10% of bereaved people experience complicated grief, a condition that makes it harder for some people to adapt to the loss of a loved one. People with this prolonged, intense grief tend to get caught up in certain kinds of thinking, says Shear, who studies complicated grief. They may think the death did not have to happen or happen in the way that it did. They also might judge their grief—questioning if it’s too little or too much—and focus on avoiding reminders of the loss. “It can be very discouraging to experience complicated grief, but it’s important not to be judgmental about your grief and not to let other people judge you,” Shear explains.

Shear and her research team created and tested a specialized therapy for complicated grief in three NIH-funded studies. The therapy aimed to help people identify the thoughts, feelings, and actions that can get in the way of adapting to loss. They also focused on strengthening one’s natural process of adapting to loss. The studies showed that 70% of people taking part in the therapy reported improved symptoms. In comparison, only 30% of people who received the standard treatment for depression had improved symptoms.

You may begin to feel the loss of your loved one even before their death. This is called anticipatory grief. It’s common among people who are long-term caregivers. You might feel sad about the changes you are going through and the losses you are going to have. Some studies have found that when patients, doctors, and family members directly address the prospect of death before the loss happens, it helps survivors cope after the death.

Life Beyond Loss

NIH-funded scientists continue to study different aspects of the grieving process. They hope their findings will suggest new ways to help people cope with the loss of a loved one. Although the death of a loved one can feel overwhelming, many people make it through the grieving process with the support of family and friends. Take care of yourself, accept offers of help from those around you, and be sure to get counseling if you need it. “We believe grief is a form of love and it needs to find a place in your life after you lose someone close,” Shear says. “If you are having trouble moving forward in your own life, you may need professional help. Please don’t lose hope. We have some good ways to help you.”

[Source: NIH | Health In News | October 2017 ++]

Car Winterizing ► Seven Things to Do

As the last days of summer fade — and fall begins to take center stage — it’s time to prepare your car for colder, more hazardous weather. Getting a jump-start on this task can help ensure that your vehicle is in tip-top shape before winter winds howl and snow and ice start to accumulate on roadways. Following are seven simple — but often overlooked — things you should do now to make sure your ride is ready to get you through winter and into spring.

1. Have your mechanic inspect hoses, belts and fluids -- Winter temperatures can be pretty brutal on your car. If you have a cracked hose or a worn belt, the frigid air just might be the final blow. The last thing you want is to be stranded on the roadside when a blizzard is raging or the temperature is south of zero. Do yourself a favor and have your favorite mechanic look over your car on a pleasant fall day. You’ll thank yourself come January.

2. Repair paint blemishes -- If you live in a northern clime, you know that Old Man Winter can apply a coat of rust to your shiny ride. If you hope to keep him at bay, it’s crucial that you repair little scratches before winter begins. According to the [Your Mechanic website](#):

- Paint blemishes, if they are left unrepaired, can not only make your car appear worn and old but can rust, corrode, or spread. That means more costly repairs that must be done by specialized body shops.

- Fixing these imperfections can be easier than you think. Auto parts stores sell touch-up paint that you can use to keep rust at bay. Your Mechanic says you can find the car's paint code on the driver's door pillar information label.

3. Give your car a coat of wax -- Road salt is an inevitable part of keeping roads safe for drivers throughout the winter months. But that salt can wreak havoc on your car's exterior. A good coat of wax can help protect your car. According to [Turtle Wax](#): Concentrate on the lower parts of your car such as behind the wheels, quarter panels, and front grille where ice, snow and salt hit hard and stay the longest.

4. Install good floor mats -- Floor mats aren't typically on the radar for most drivers planning to prepare their cars for colder weather. Yet, installing the right mats can help ensure the interior of your vehicle makes it through sweater season unscathed. The [Wirecutter website](#) notes that the right floor mat "better protects your car's carpets from water, snow, muck, and other messy things that can get tracked into the vehicle or spilled onto the floor." [AutoAccessoriesGarage.com](#) has some helpful tips for choosing the right floor mats for your car.

5. Replace the wiper blades -- A heavy snowfall is no time to suddenly remember that you meant to change your wiper blades back in September. It's easy to procrastinate on this task, and millions of drivers do just that. But worn wiper blades can smear snow and ice, putting your ability to see the road — and ultimately, your life — at risk. Many auto experts suggest changing your wiper blades both in the spring and the fall. And this is one repair that almost everyone can do on their own. Just stop by an auto parts store and tell the clerk the make and model of your car. Once you have the right pair of replacement blades, it takes just a few seconds to snap them into place.

6. Check your tires — all of them -- Winter is the season when your tires need to be at their best. So, have them checked now — long before bad weather suddenly appears — to ensure they have the proper tread. If the tires are in good shape, make sure they are properly inflated. And that goes for all your tires, including the spare. Remember that cold weather causes tires to lose air more quickly. So, check your pressure at least monthly.

7. Prepare an emergency kit -- Ah, fall — you can sit on your deck with cup of hot cider and watch the golden leaves glisten in the autumn sun. While enjoying this reverie, remember that it won't last. Colder days lie just ahead. So, take a moment or two to jot down a few notes about items that you might need in the event of a winter emergency. Then, purchase the items over the next several weeks and store them in your car. The National Institute for Automotive Service Excellence recommends keeping the following items on hand:

- Extra gloves
- Boots and blankets
- Flares
- A small shovel and a container of sand or kitty litter
- Tire chains
- A flashlight and extra batteries
- A cellphone and an extra car charger
- "High-energy" snacks in your glove box

[Source: MoneyTalksNews | Melissa Neiman | October 3, 2017 ++]

Military 11 General Orders ► Nostalgia | Do You Remember Them?

The Eleven General Orders are common to all branches of the U.S. Armed Forces. It is best to learn these BEFORE boot camp: you will be expected to know these by heart, in any order, after a few weeks in basic training!

1. To take charge of this post and all government property in view.

2. To walk my post in a military manner, keeping always on the alert, and observing everything that takes place within sight or hearing.
3. To report all violations of orders I am instructed to enforce.
4. To repeat all calls from posts more distant from the guard house than my own.
5. To quit my post only when properly relieved.
6. To receive, obey, and pass on to the sentry who relieves me all orders from the commanding officer, field officer of the day, officer of the day, and officers and petty officers of the watch.
7. To talk to no one except in line of duty.
8. To give the alarm in case of fire or disorder.
9. To call the petty officer of the watch in any case not covered by instructions.
10. **To salute all officers and all colors and standards not cased.**
11. To be especially watchful at night, and during the time for challenging, to challenge all persons on or near my post, and to allow no one to pass without proper authority.

[Source: Mil.com | October 15, 2017 ++]

National Anthem Update 06 ► U.S. Code | Conduct Required When Played

Title 36, Subtitle I, Part A section 301 United States Code – National Anthem

(a) Designation.— The composition consisting of the words and music known as the Star-Spangled Banner is the national anthem.

(b) Conduct During Playing.— During a rendition of the national anthem—

· (1) when the flag is displayed—

(A) individuals in uniform should give the military salute at the first note of the anthem and maintain that position until the last note;

(B) members of the Armed Forces and veterans who are present but not in uniform may render the military salute in the manner provided for individuals in uniform; and

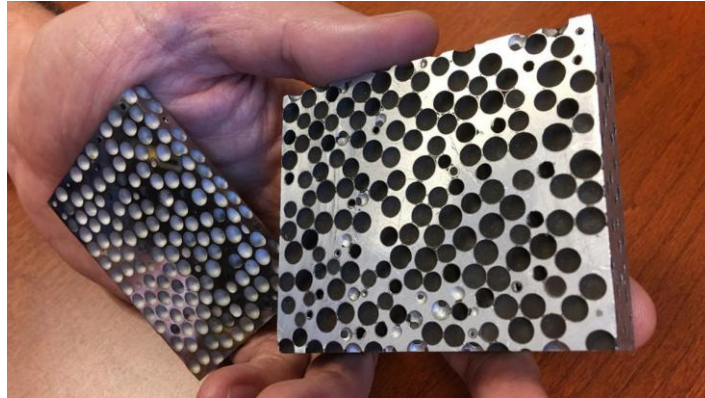
(C) all other persons present should face the flag and stand at attention with their right hand over the heart, and men not in uniform, if applicable, should remove their headdress with their right hand and hold it at the left shoulder, the hand being over the heart; and

· (2) when the flag is not displayed, all present should face toward the music and act in the same manner they would if the flag were displayed.

[Source: Title 36, Subtitle 1, Part A section 301 of the US Code | September 2017 ++]

Metal Foam Armor ► New Material Will Stop Bullets

Foam might not seem a likely way to stop a bullet, but a North Carolina researcher has developed a composite metal foam that shatters bullets on contact. Afsaneh Rabiei, an engineer at North Carolina State University, began researching how to improve metal foam, or metal with gas-filled pores. Rabiei was told that while metal foams may be good for blasts, they don't protect against ballistics. She created a new material that combined metal foam with a metal matrix composite to perform better against ballistics. "It works like a heavy-duty bubble wrap," Rabiei told Army Times. "The bubbles inside can squeeze down and provide protection." The composite material creates a stronger defense and allows multiple uses of the material.



The spheres inside the composite metal foam absorb the energy of a bullet

Dr. Marc Portanova, from the Army's Aviation Applied Technology Directorate, learned about Rabiei's creation and recognized its potential. Portanova said that when the military develops armor, it compares the armor's performance against that of steel. A 7.62mm rifle round will go through 3 inches of steel, so a catcher material is put behind the steel, he said. "When the bullet hits the ceramic, it stops and absorbs the energy," Portanova said. "The problem is you can only shoot it once because then it's cracked." Composite metal foam, however, has a bunch of hollow spheres inside. When struck with a bullet, the spheres are crushed, similar to bubble wrap. Because of its resilience, you can hit it numerous times, Portanova said.

Researchers at the directorate have helped make the material lighter and also stop bigger threats. "This material will probably find a home on a ground vehicle before aviation," Portanova said. "It would only be slightly more expensive and will weight half or one-third of what they're hanging on the side of a Humvee." Rabiei said her passion is to help troops going to Iraq and Afghanistan. "When I got funding, I used it all to explore this for armor," she said. "If I see one person walk out of a deadly situation because of my material, I think I have left my mark." [Source: ArmyTimes | Charlsy Panzino | September 19, 2017 ++]

Where There's a Will, There's a Way ► 02



Garage Door Billboards ► Making Yours Stand Out (11)



Weird Facts About Your Body ► 01 thru 12

The Human Body is a treasure trove of mysteries, one that still confounds doctors and scientists about the details of its working. It's not an overstatement to say that every part of your body is a miracle. Here are fifty facts about your body that will leave you stunned.

1. It's possible for your body to survive without a surprisingly large fraction of its internal organs. Even if you lose your stomach, your spleen, 75% of your liver, 80% of your intestines, one kidney, one lung, and virtually every organ from your pelvic and groin area, you wouldn't be very healthy, but you would live.
2. During your lifetime, you will produce enough saliva to fill two swimming pools. Actually, saliva is more important than you realize. If your saliva cannot dissolve something, you cannot taste it.
3. The largest cell in the human body is the female egg and the smallest is the male sperm. The egg is actually the only cell in the body that is visible by the naked eye.
4. The strongest muscle in the human body is the tongue and the hardest bone is the jawbone.
5. Human feet have 52 bones, accounting for one quarter of all the human body's bones.
6. Feet have 500,000 sweat glands and can produce more than a pint of sweat a day.
7. The acid in your stomach is strong enough to dissolve razor blades. The reason it doesn't eat away at your stomach is that the cells of your stomach wall renew themselves so frequently that you get a new stomach lining every three to four days
8. The human lungs contain approximately 2,400 kilometers (1,500 mi) of airways and 300 to 500 million hollow

cavities, having a total surface area of about 70 square meters, roughly the same area as one side of a tennis court. Furthermore, if all of the capillaries that surround the lung cavities were unwound and laid end to end, they would extend for about 992 kilometers. Also, your left lung is smaller than your right lung to make room for your heart.

9. Sneezes regularly exceed 100 mph, while coughs clock in at about 60 mph.
10. Your body gives off enough heat in 30 minutes to bring half a gallon of water to a boil.
11. Your body has enough iron in it to make a nail 3 inches long.
12. Earwax production is necessary for good ear health. It protects the delicate inner ear from bacteria, fungus, dirt and even insects. It also cleans and lubricates the ear canal.

[Source: Odd Stuff Magazine | October 13, 2017 ++]

Have You Heard? ► Courtroom Humor

How Do Court Reporters Keep Straight Faces? These are from a book called Disorder in the Courts and are things people actually said ... in court, word for word, taken down and published by court reporters that had the torment of staying calm while the exchanges were taking place.



-o-o-O-o-o-

ATTORNEY: What was the first thing your husband said to you that morning?

WITNESS: He said, 'Where am I, Cathy?'

ATTORNEY: And why did that upset you?

WITNESS: My name is Susan!

-o-o-O-o-o-

ATTORNEY: What gear were you in at the moment of the impact?

WITNESS: Gucci sweats and Reeboks.

-o-o-O-o-o-

ATTORNEY: What is your date of birth?

WITNESS: July 18th.

ATTORNEY: What year?

WITNESS: Every year.

-o-o-O-o-o-

ATTORNEY: How old is your son, the one living with you?

WITNESS: Thirty-eight or thirty-five, I can't remember which.

ATTORNEY: How long has he lived with you?

WITNESS: Forty-five years.

-o-o-O-o-o-

ATTORNEY: This myasthenia gravis, does it affect your memory at all?

WITNESS: Yes.

ATTORNEY: And in what ways does it affect your memory?

WITNESS: I forget.

ATTORNEY: You forget? Can you give us an example of something you forgot?

-o-o-O-o-o-

ATTORNEY: Now doctor, isn't it true that when a person dies in his sleep, he doesn't know about it until the next morning?

WITNESS: Did you actually pass the bar exam?

-o-o-O-o-o-

ATTORNEY: The youngest son, the 20-year-old, how old is he?

WITNESS: He's 20, much like your IQ.

-o-o-O-o-o-

ATTORNEY: Were you present when your picture was taken?

WITNESS: Are you shitting me?

-o-o-O-o-o-

ATTORNEY: So the date of conception (of the baby) was August 8th?

WITNESS: Yes.

ATTORNEY: And what were you doing at that time?

WITNESS: Getting laid

-o-o-O-o-o-

ATTORNEY: She had three children, right?

WITNESS: Yes.

ATTORNEY: How many were boys?

WITNESS: None.

ATTORNEY: Were there any girls?

WITNESS: Your Honor, I think I need a different attorney. Can I get a new attorney?

-o-o-O-o-o-

ATTORNEY: How was your first marriage terminated?

WITNESS: By death.

ATTORNEY: And by whose death was it terminated?

WITNESS: Take a guess.

-o-o-O-o-o-

ATTORNEY: Can you describe the individual?

WITNESS: He was about medium height and had a beard.

ATTORNEY: Was this a male or a female?

WITNESS: Unless the Circus was in town I'm going with male.

-o-o-O-o-o-

ATTORNEY: Is your appearance here this morning pursuant to a deposition notice which I sent to your attorney?

WITNESS: No, this is how I dress when I go to work.

-o-o-O-o-o-

ATTORNEY: Doctor, how many of your autopsies have you performed on dead people?

WITNESS: All of them. The live ones put up too much of a fight.

-o-o-O-o-o-

ATTORNEY: ALL your responses MUST be oral, OK? What school did you go to?

WITNESS: Oral...

-o-o-O-o-o-

ATTORNEY: Do you recall the time that you examined the body?

WITNESS: The autopsy started around 8:30 PM

ATTORNEY: And Mr. Denton was dead at the time?

WITNESS: If not, he was by the time I finished.

-o-o-O-o-o-

ATTORNEY: Are you qualified to give a urine sample?

WITNESS: Are you qualified to ask that question?

-o-o-O-o-o-

And last:

ATTORNEY: Doctor, before you performed the autopsy, did you check for a pulse?

WITNESS: No.

ATTORNEY: Did you check for blood pressure?

WITNESS: No.

ATTORNEY: Did you check for breathing?

WITNESS: No.

ATTORNEY: So, then it is possible that the patient was alive when you began the autopsy?

WITNESS: No.

ATTORNEY: How can you be so sure, Doctor?

WITNESS: Because his brain was sitting on my desk in a jar.

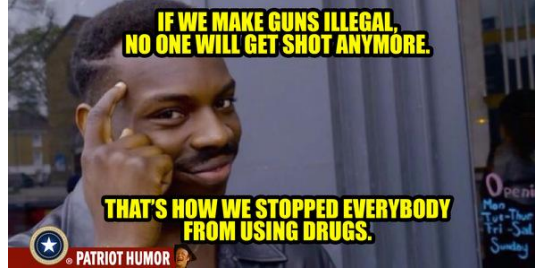
ATTORNEY: I see, but could the patient have still been alive, nevertheless?

WITNESS: Yes, it is possible that he could have been alive and practicing law.



"There are three kinds of men. The one that learns by reading. The few who learn by observation. The rest of them have to pee on the electric fence for themselves."

Will Rogers



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-o-o-O-o-o-

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