

RAO BULLETIN

15 December 2019



PDF Edition

THIS RETIREE ACTIVITIES OFFICE BULLETIN CONTAINS THE FOLLOWING ARTICLES

Pg	Article	Subject
* DOD *		
04	NDAA 2020 [27]	---- (Congressional Negotiators Have Reached a Deal)
05	Feres Doctrine [19]	---- (Troops to be Able to File Claims — But Not Sue — For Medical Malpractice)
07	Navy Submarine Program [03]	---- (Navy OKs Biggest Ever Deal \$22B)
08	PTSD Stamp	---- (Aim is to Raise Awareness, Funds for PTSD)
09	DoD Mental Health Programs [05]	---- (Negatively Impacted by Physician Recruitment Failures)
10	Military Base Water [02]	---- (GAO Finds 102 at Risk for Water Shortages)
11	Military Hospitals	---- (Retiree and Retiree Family Patient Reductions Planned)
13	Gold Star Families [02]	---- (Proposed Relief through Congressional Action Has Not Happened)
14	POW/MIA Recoveries & Burials	---- (Reported 01 thru 15 DEC 2019 Nine)
* VA *		
16	VA Solid Start	---- (Program Launched to Ensure Vets Are Contacted During Initial Transition)
17	VA Blue Water Claims [79]	---- (Court Rules it Will Not Lift Stay)
18	VA Blue Water Claims [80]	---- (VA to Begin Deciding Claims 1 JAN 2020)
19	VA Urgent Care [01]	---- (Top 10 Frequently Asked Questions)
20	VA Facility Ratings	---- (Star-Rating System Replaced to Enhance Vet's Comparisons)
21	VA ATLAS Program [01]	---- (Services Initiated at First NC Walmart Pilot Location)
21	VA Pain Management [11]	---- (Virtual Reality Helps Ease Trauma)
23	VA Flu Shots [07]	---- (Under Age 50, you're Not Invincible at Any Age)
23	VA Medical Records [05]	---- (Avoiding Mistakes)
25	VA Substance Abuse Treatment	---- (GAO Report on How Vets Receive It at VHA Clinics)
26	National AI Institute	---- (Launched by VA to Advance Vets Health and Well-Being)
26	VA AI [01]	---- (AI Enhancing VA's Ability to Diagnose Illnesses)
27	VA Loan Limits	---- (2020 Down Payment Limits Removed)

- 28 == VA AO Guam Rules ---- (No policies Have Yet Been Crafted)
- 29 == VA Gambling Addiction Center ---- (LVR3 Opens in Las Vegas)
- 29 == VA Fraud, Waste, & Abuse ---- (Reported 01 thru 15 DEC 2019)

*** VETS ***

- 32 == Veterans at CIA ---- (Have Always Played an Important Role | You Could Also)
- 32 == Vet Hunger ---- (One Out of Four Female Veterans Struggle with Hunger)
- 33 == Vet Toxic Exposure | Palomares Spain [03] ---- (VA Lawsuit another Step Closer)
- 34 == Vet Incarceration [02] ---- (“The Barracks” Opens in Georgia)
- 34 == Burn Pit Toxic Exposure [72] ---- (Maps to Help Figure Out Your Exposure Risk)
- 36 == Vet Jobs [257] ---- (7 More Occupations That Are a Good Fit)
- 37 == Vet Jobs [258] ---- (Confidence Boosters for Transitioning to a Civilian Career)
- 38 == Vet Jobs [259] ---- (In NOV 310,000 Vets Nationwide Looking For Work)
- 39 == WWII Vets 211 ---- (Boris Stern | Normandy Invader)
- 39 == WWII Vets 212 ---- (Joe Beyrle | US Paratrooper who Served in a Soviet Tank Battalion)
- 41 == Korean War Vets ---- (Joseph Vittori | Medal of Honor Recipient)
- 42 == Vet Hiring Fairs ---- (Scheduled As of 15 DEC 2019)
- 42 == Vet Suicide [42] ---- (No Wrong Door Approach for Assistance)
- 43 == Military Retirees & Veterans Events Schedule ---- (As of 15 DEC 2019)
- 44 == Veteran State Benefits ---- (New Hampshire 2019)

*** VET LEGISLATION ***

- 44 == Military Child Citizenship [01] ---- (H.R.4801/S.2679 | Citizenship for Children of Military Members)
- 45 == VA Pension Poachers [02] ---- (S.2988 | Veteran Pension Protection Act)
- 46 == Personal Protective Equipment ---- (S.2970 | Improve Fielding Newest PPE Generations)
- 47 == VAMC Clarksburg WV [04] ---- (S.2995 | VAMC Patient Safety & Quality of Care Reports)
- 48 == Vet Suicide [43] ---- (S.2991 | Veterans Overmedication and Suicide Prevention Act)

*** MILITARY ***

- 49 == ETS Sponsorship Program ---- (VA’s Support for Vet’s Final Transition to Civilian Life)
- 50 == Marine Corps Readiness [02] ---- (The Force Has to Get Lighter)
- 51 == B-1 Bomber [05] ---- (Aging B-1 May Soon Have to Restrict the Way it Flies)
- 52 == Cruise Missiles [02] ---- (Pentagon to Test Rival Killer Lasers)
- 54 == Military Housing Surveys ---- (GAO Reports Those Showing Satisfaction are Bogus)
- 56 == Base Housing [16] ---- (Service Officials Grilled Over Efforts to Remedy)
- 57 == Humanitarian Service Medal [02] ---- (Recent Natural Disaster Support/Deployment Authorizations)
- 58 == PFAS Toxic Exposure [10] ---- (Navy Asks Judge to Put Off Lawsuit Ruling)
- 59 == PFAS Toxic Exposure [11] ---- (Federal Study Facing Delays)
- 61 == Cyborg Soldier 2050 ---- (Human/Machine Fusion Study)
- 63 == Military Proposed Weaponry [03] ---- (Project Orion)
- 63 == Overseas Troop’s Thanksgiving ---- (5,000 Turkeys Sent this Year)
- 64 == USMC Political Activity ---- (New Guidance Clarifies What is Allowed on Social Media)
- 65 == Navy Tour Lengths ---- (50,000+ Sailors to be impacted by Sea/Shore Duty Changes)
- 66 == MRAP Lawsuit ---- (Pentagon Overcharged \$1.3 Billion)
- 67 == Navy Terminology, Jargon & Slang ---- (‘EMI’ thru ‘Fanny’)

*** MILITARY HISTORY ***

- 68 == Desert Storm Memorial [12] ---- (Design Concept Receives Formal Approval)
- 69 == Profile in Courage: Arthur MacArthur --- (Father of Gen. Douglas MacArthur Jr)
- 70 == War Memorials ---- (National War Memorial Canada)
- 71 == Tootsie Roll Marines ---- (Ordered Annihilated by China's Chairman Mao)
- 72 == Berlin Airlift ---- (Operation VITTLES)
- 73 == Military History Anniversaries ---- (01 thru 15 DEC)
- 73 == WWII Bomber Nose Art [44] ---- (Shirley Ann)
- 75 == MOH Awards [15] ---- (Legislation to Strip 20 Awarded at Wounded Knee)
- 76 == Medal of Honor Citations ---- (Francis J. Herron | Civil War)

*** HEALTH CARE ***

- 77 == Prescription Drug Costs [40] ---- (Substantial Reforms Appear "Unlikely" in the Near Term)
- 78 == Senior Surgery [01] ---- (Frail Patients May Be at Higher Risk than Previously Thought)
- 70 == Styes and Chalazia ---- (Eyelid Inflammation Treatment)
- 81 == Epilepsy ---- (Overactivity in the Brain)
- 84 == TRICARE Premium Payments ---- (Computer Glitch Charges 100 Times Monthly Amount Due)
- 84 == Heart Transplant ---- (Vet Becomes First U.S. Recipient of a DCD Heart)
- 85 == Skin Regeneration ---- (New Technology Can Help Wounded and Ill Vets Regrow Skin)
- 86 == Cancer Q&A ---- (191201 thru 191215)
- 87 == TRICARE Podcast 530 ---- (Overseas Holiday Travel - Plan Finder - Moving w/Dental Program)
- 88 == TRICARE Podcast 531 ---- (Benefit Updates - Tobacco Cessation Services)

*** FINANCES ***

- 88 == SBP DIC Offset [62] ---- (Widow's Tax on Verge of Elimination)
- 89 == Retirement Planning [21] ---- (Surprising Benefits of Not Doing It with Your Spouse)
- 90 == Debt Collection [15] ---- (Survivors Impact after a Loved One Dies)
- 92 == Vet Pay/Cost Changes ---- (2020 Pay Bump versus Part B Increase)
- 93 == Medicare Cost | Military Retirees [02] ---- (2020 Premium Changes)
- 94 == Vet Income ---- (Consistently Larger than Non-Vets)
- 95 == Unexpected Expenses ---- (How to Avoid Being Surprised by 7 Nasty Ones)
- 97 == IRA & 401k RMDs ---- (50% Tax Penalty at Age 70 ½ If You Miss Deadline)
- 97 == Social Security Benefits [07] ---- (Something to Think About)
- 98 == Online Shopping Scam [03] ---- (Beware of This Delivery Trick)
- 99 == Social Media Gift Exchange Scam ---- (An Illegal Pyramid Scheme)
- 100 == Tax Burden for Utah Retired Vets ---- (As of DEC 2019)

*** GENERAL INTEREST ***

- 103 == Notes of Interest ---- (01 thru 15 December 2019)
- 104 == Afghan Peace Talks [05] ---- (Trump's Visit Reignites)
- 105 == Afghan War [03] ---- (Washington Post's 'Afghanistan Papers' Story Reaction)
- 106 == Afghan Taliban [03] ---- (US, Australian Hostages Freed for 3 Taliban Figures)
- 107 == DPRK Nuclear Weapons [28] ---- (Denuclearization Now Off the Negotiation Table)
- 108 == NATO Defense Spending [04] ---- (Trump Move to Reduce U.S. Aid Share)
- 109 == Nuclear Weapons Treaty ---- (Concerns over Allowing New START to Expire)
- 110 == Host Nation Support ---- (Concerns over Pressuring Asian Allies for Share Increases)
- 111 == Retirement Planning [22] ---- (Surprising Facts That Nobody Tells You About)

- 113 == Dog Tags ---- (Directive to Stop Sales of Tags Containing Religious Symbols)
- 114 == Trump Vegan Challenge ---- (Go 30 Days for \$1 Million Donation to Vets)
- 115 == Appliances [03] ---- (Maker Reliability | 12 Most & Least)
- 116 == Interesting Inventions ---- (Elevator Capacity Indicator)
- 116 == Have You Heard? ---- (Military Humor 9 | Blond Jokes 1 | The Budget)

NOTE

1. The page number on which an article can be found is provided to the left of each article's title
2. Numbers contained within brackets [] indicate the number of articles written on the subject. To obtain previous articles send a request to raoemo@sbcglobal.net.
3. Recipients of the Bulletin are authorized and encouraged to forward the Bulletin to other vets or veteran organizations.

*** ATTACHMENTS ***

- Attachment – New Hampshire Vet State Benefits
- Attachment – Military History Anniversaries 16 thru 31 DEC (Updated)



NDAA 2020

Update 27: Congressional Negotiators Have Reached A Deal

House and Senate negotiators have reached a deal on a defense policy bill aimed at avoiding a government shutdown, creating a Space Force, and getting rid of the so-called "widow's tax" that has been a main goal of military families for years. A conference version of the National Defense Authorization Act for Fiscal 2020, released late 9 DEC, preserves a 3.1% pay raise for the military. The \$738 billion bill, which includes an additional \$5.3 billion earmarked for emergency disaster recovery, charts out a three-year "phased repeal" of the policy that requires VA payments to survivors of fallen troops to be deducted from Defense Department survivor payments.

It also lays the groundwork for the long-awaited creation of a sixth military service branch, U.S. Space Force. According to planning, the new service would fall under the U.S. Air Force and be populated by transferred Air Force personnel as it stands up. The plan also creates a new service chief position: Chief of Space Operations, reporting to the secretary of the Air Force and a member of the Joint Chiefs of Staff. While the bill does not do away with the Feres Doctrine, which prohibits U.S. troops from suing the government due to injury, it does include a new provision that authorizes the secretary of defense to settle and pay administrative claims to amend for the death or injury of troops due to DoD medical malpractice, a change hailed as a step in the right direction.

In remarks over the weekend, both HASC Chairman Rep. Adam Smith (D-WA) and ranking member Rep. Mac Thornberry (R-TX) said they expected a vote on NDAA in the full House on 11 DEC, with a Senate vote to follow. In fact the bill passed the House that day with a votes by a 377-48 vote. The negotiators were working against a Dec. 21 deadline, when a continuing resolution on spending expires and could trigger a government shutdown unless compromise was reached on a range of issues. One of the main stumbling blocks in reaching an agreement on the NDAA has been President Donald Trump's demand for a diversion of \$3.6 billion in military construction funds to

pay for the southern border wall. The conference version of the bill scraps a House provision that would have prevented spending on the border wall, but does not explicitly designate funds for the purpose.

The outlines of a tentative NDAA deal began to emerge over the weekend in remarks by Smith, Thornberry and others at the Reagan National Security forum in Simi Valley, California. The officials said agreement had been reached for Democrats to drop opposition to creating a Space Force as a sixth military branch in exchange for 12 weeks of parental leave for federal workers.

Sen. Kirsten Gillibrand (D-NY), a member of the Senate Armed Services Committee, said on Twitter that under the agreement "the federal government, the country's largest employer, could now provide basic parental leave for their workers. There's more to do, but it's an encouraging step forward in our fight to enact paid family leave for all workers." Overall in the effort to work out an NDAA deal, "We were able to get paid parental leave, take care of the widows, deal with the Feres Doctrine," Smith said. "There's a lot of stuff we did that I frankly thought would've been difficult in this environment." [Source: Military.com | Richard Sisk & Hope Hodge Seck | December 9 & 11, 2019

Feres Doctrine

Update 19: Troops to be Able to File Claims — But Not Sue — For Medical Malpractice

A provision in the fiscal 2020 National Defense Authorization Act will allow active-duty military personnel or their surviving families to seek compensation for personal injury or death caused by malpractice by military doctors or dentists. But the proposal stops short of letting service members sue the federal government in malpractice tort claims, a legislative compromise that has some legal scholars declaring victory, while others question how the new process will work. The bill, which passed the House 11 DEC and is expected to move through the Senate later in the week, would let active-duty victims or survivors file a claim with the Defense Department for cases of medical negligence or malpractice by military health providers in medical facilities outside combat zones.

If the claim is substantiated by the Department of Defense and determined to deserve less than \$100,000, DoD would pay the claim directly to the member or beneficiary. If the defense secretary decides that a sum larger than \$100,000 is warranted, the claim would be forwarded to the Treasury Department for payment. Victims would have two years after the malpractice incident or omission to file a claim, with the exception of the first year of the legislation's enactment. Those seeking redress in 2020 would be able to file claims for cases dating to 2017. If the bill is signed into law by President Donald Trump (who has already said he would), it will be the first time in nearly 70 years an active-duty service member or their survivor would have redress in such claims.

Until now, the 1950 U.S. Supreme Court decision *Feres v. the United States* has kept troops from suing the federal government for injuries deemed incidental to military service, including medical malpractice. The new legislation does not overturn *Feres*, but Rep. Jackie Speier, the California Democrat who championed the effort to change the law, called the provision's inclusion a "landmark day in the fight for justice." "Service members and their families finally have a path forward in seeking compensation for medical malpractice committed by military health care providers, and the Defense Department will have to take their claims seriously," Speier said.

Earlier this year, Speier introduced the Sgt. First Class Richard Stayskal Military Medical Accountability Act, which sought to allow troops to sue the government for damages in malpractice cases. The bill was named for a former Marine and Army Special Operations soldier whose military health providers failed to see a 3-centimeter mass in one of his lungs on a pre-training CT scan. After repeatedly going to military physicians after the scan with health problems and told he had asthma or pneumonia, Stayskal found out from a civilian pulmonologist, that he actually had Stage 4 lung cancer. Despite battling the terminal disease, Stayskal hired an attorney, Natalie Khawam of the Whistleblower Law Firm in Tampa, and pursued his case in Congress, arguing that *Feres* was outdated and unfair when applied to military medical malpractice.

Speier said 10 DEC the provision would not have gone forward if it hadn't been for Stayskal, who knocked on nearly every door in the House and Senate. "Today belongs to ... Stayskal, who ... forged a bipartisan coalition to achieve this legislative breakthrough through his countless visits to D.C. and heroic advocacy," Speier said. Khawam said she and Stayskal plan to travel to D.C. this week to watch the Senate vote. She said they are thrilled that a workaround was found in the face of opposition from some lawmakers, including Sen. Lindsey Graham (R-SC), a former Air National Guard judge advocate general who has repeatedly advocated for preservation of the Feres ruling.

The proposed bill specifically states that it "does not change or repeal the Feres Doctrine," but Khawam argued that the "reality is we have just changed history and changed the law to allow the military to not be barred by Feres." "We are providing legal recourse and compensation. The means may be different. But it's the same end result, just a different means of accessing it," Khawam said. "I actually am really impressed that they created this. It's brilliant. This is saying, 'Hey to all those haters who didn't want to change Feres and repress our service members: here's to you. We figured out a way around your motives and your issues.'"

But Speier has called the fix "far from perfect." She said 10 DEC she has "serious concerns" that under the law, the Defense Department will run the claims process. She still believes service members deserve their day in federal court, the same as military family members, federal civilian employees and federal prisoners. "I will continue to work to address the myriad injustices that remain due to the Feres Doctrine," Speier said. Earlier this year, Paul Figley, professor of legal rhetoric at American University's Washington College of Law, testified before the House in support of Feres in medical malpractice, noting long-standing government concerns that overturning the law could result in different monetary values placed on service members' deaths or dismemberment. DoD, also has an established compensation system for such cases, Figley argued.

On Tuesday, Figley told Military Times that the compromise in the pending bill is a "much, much better bill" than the original proposed Stayskal legislation, but it has problems. First, claims will be handled using "uniformed standards consistent with the generally accepted standards uses in a majority of states," yet states laws vary so widely, determining what this means puts a burden on the Defense Department, he said. Second, unlike similar claims filed in the State Department, DoD malpractice claims will not go to the Department of Justice for consideration before going to Treasury — a step that could help determine the appropriate amount to be awarded in a case. "If the appropriate officer in the Secretary of Defense Office determines an amount to be paid is meritorious, they are going to shoot it straight to Treasury. This is really not in the competency of the SecDef's office. How many wrongful death claims do they see?" Figley asked. Finally, it will create a different value system for service members' death or dismemberment based on circumstance. "This will be an issue because this is going to get people who lose a leg because of malpractice a lot more money than a person who lost their leg because it got shot off or was injured in a truck wreck," Figley noted.

The new legislation fails to account for all the egregious cases that came before 2017, including those rejected in the past decade by the U.S. Supreme Court, such as the tragic case of Air Force Staff Sgt. Dean Witt, who suffered severe brain damage during a botched routine appendectomy. Witt was left in a vegetative state before he died three months later. Or the case of Navy Lt. Rebekah "Moani" Daniel, whose death at a Navy hospital in Bremerton, Washington, following the birth of her first child in 2014 was attributed to an inadequate response by providers to postpartum hemorrhaging. She bled to death without ever having held her newborn daughter. Earlier this year, the Supreme Court justices rejected the Daniel case. But unlike previous cases the justices had refused without comment, Justice Ruth Bader Ginsburg wrote that she would support granting the Daniel petition, while Justice Clarence Thomas wrote a dissent to the petition's denial. "Such unfortunate repercussions — denial of relief to military personnel and distortions of other areas of law to compensate — will continue to ripple through our jurisprudence as long as the Court refuses to reconsider Feres," Thomas wrote.

Walter Daniel told Military Times 11 DEC that the Supreme Court's rejection of his wife's case was a "tough outcome" and he still believes Feres should be overturned. But, he added, the new legislation is a "step in the right direction." "Congress has recognized that not holding medical personnel accountable is a problem in the military health care system. The men and women of the armed forces deserve better protection for the sacrifices they make for

America,” Daniel said. In making his case for overturning Feres when it comes to military malpractice cases, University of San Diego School of Business professor Richard Custin, a long-time proponent for rejecting Feres for reasons beyond medical malpractice, cited the Daniel case. “All sides of the political spectrum are interested in changing this. I mean, look, when you’ve got Thomas and Ginsburg lining up ...” he said. “Lindsey Graham should be ashamed of his position because there is bipartisan support for rejecting Feres.”

He also said he finds it troublesome that as part of the claims process, the Defense Department will be “the negligent party, the judge and the jury” for deciding claims. “We need a more comprehensive rejection of Feres,” he said. The number of claims that might be filed a year is not known. According to the Defense Health Agency, the number of “sentinel events” — those resulting in death or serious injury, including loss of limb or function or a serious psychological injury — increased in military medical and dental facilities from 121 in 2013 to 319 in 2016. How many of those involved active-duty patients was not disclosed. In a 2018 report by the Government Accountability Office, DoD also conceded that its methods for tracking such adverse events and responding to them was unreliable.

The proposed defense policy act includes a provision that will require GAO to report on the number of physicians and other medical providers at DoD who lost their medical malpractice insurance before they were hired and study the outcomes of patients who have taken action against DoD for negligence or medical malpractice. Khawam said that in addition to Stayskal’s claim, she has “at least another dozen” she plans to file for clients in 2020. But first, she said, she looks forward to “throwing a party for Richard,” who has responded well to an experimental treatment. “I’m happy that our military will be provided for, compensated for, any kind of medical malpractice. They are victims too.” Khawam said. [Source: MilitaryTimes | Patricia Kime | December 11, 2019 ++]

Navy Submarine Program

Update 03: Navy OKs Biggest Ever Deal | \$22B

The Navy has awarded the largest contract in its history, a \$22.2 billion deal with Electric Boat and Huntington Ingalls for nine new Virginia-class submarines, which the service says will make them more lethal, and much harder to detect when operating close to hostile shores. The contract includes an option for a tenth boat, which would bring the contract up to \$24.1 billion if enacted. The deal, which calls for construction to begin this year, would see the delivery of the first fast-attack sub in 2025.



Virginia-class submarine USS John Warner at commissioning, with the new Virginia Payload Module on display.

The Navy is walking a razor-thin line with building the new Virginia boats at the same time as it is introducing new Columbia-class submarines, meaning the service will have to produce one Columbia and two Virginias per year, a pace of submarine building the service has not seen in decades. Navy acquisition chief James Geurts told a small group of reporters gathered in his office on 2 DEC that “doing both of these at the same time is no small task,” but

he's structured both programs in a way that the shared suppliers are aware of what's needed well in advance, but "if not, we can back off a little to make sure Columbia is successful." Navy leadership has long said the Columbia program — which will carry a huge chunk of the nation's nuclear warheads when fully operational — is its number one priority, something Geurts underlined several times.

Hanging over the celebration is the prospect of a year-long Continuing Resolution however, which Congress would enact if it cannot fail reach a budget deal by the end of the year. Geurts, however, made it clear that the Navy will save the Virginia and Columbia programs even if it means pain for other parts of the fleet. "Even if I can preserve this contract in a year-long CR, it will come at the expense of other things like ship maintenance and depot maintenance," he said. "If you look at the challenges the Navy faces under a year-long CR, to protect one really big thing means I have to sacrifice a large, large number of smaller things...but you have to start cutting somewhere." Beginning in the early 2020s, the Navy is scheduled to work on both classes at the same time, producing one Columbia and two Virginias per year. That makes getting the Virginia right a core national security issue.

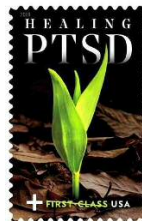
The Columbia-class is the first completely new submarine the United States has produced in decades. Their construction schedule, which begins in 2021, has no room for error since the Columbia will replace the maxed-out Ohio-class nuclear submarines, which are slated to begin retiring in the next decade. But several members of Congress on 2 DEC said it's full-speed ahead.

- Sen. Jack Reed, Ranking Member of the Armed Services Committee — some work will be done in his home state of Rhode Island — hailed the award, saying in a statement: "These next generation submarines provide our forces with a distinct national security advantage. They are an unmatched tool for deterrence," adding he'll work to ensure the Navy maintains a two-per-year production rate.
- Rep. Joe Courtney, chair of the HASC seapower and projection forces subcommittee who hails from the home of Electric Boat, said in a statement that he'll continue to push for the tenth boat. "The inclusion of advanced funding for long lead components for all ten boats, typically worth around \$450 million per boat, sends a powerful signal that the Navy has heeded that message," he said.

[Source: Breaking Defense | Paul McLeary | December 02, 2019 ++]

PTSD Stamp

Aim is to Raise Awareness, Funds for PTSD



Proceeds from sales of a new postage stamp issued on 2 DEC will go to support post-traumatic stress disorder research and education at the U.S. Department of Veterans Affairs' National Center for PTSD. The PTSD center, based at the VA Medical Center in White River Junction, includes seven sites around the country that are focused on studying and treating PTSD, a mental health condition some people develop following a traumatic event such as combat, a natural disaster, sexual assault or a car accident. Symptoms may include reliving the event, avoidance of reminders of the event, negative thoughts and anxiety that linger long after the trauma.

While Paula Schnurr, the PTSD center's executive director, said she is glad to have the revenue stream to support the center's work, she also hopes the stamp brings awareness to the condition, which will affect tens of millions people

in the U.S. — both veterans and civilians — in their lifetimes. Schnurr said she hopes “people who have PTSD or family members see this and they might take some action.” She spoke in a phone interview from Charlotte, N.C., where she participated in an event to celebrate the stamp’s release on Monday. The stamp, which costs 65 cents, features a green plant sprouting from ground covered with fallen leaves that is intended to symbolize the PTSD healing process, according to a news release from the Postal Service. It was designed by Greg Breeding, the postal service’s art director, and includes original photography by Mark Laita, a Los Angeles-based commercial photographer.

Treatment for PTSD both through medication and therapy has improved in recent years, Schnurr said, noting that some of the center’s research is focused on the effectiveness of different treatments. Public awareness of PTSD has grown following the terrorist attacks on 9/11, which caused many first responders and others to develop the condition, she said. Subsequent events such as Hurricane Katrina in 2005, the 2011 earthquake and tsunami in Japan, and numerous mass shootings — including one earlier this year at the University of North Carolina-Charlotte, the city where Monday’s stamp ceremony took place — have kept the condition in the public eye.

In addition to Schnurr, speakers at Monday’s event at McGlohon Theater at Spirit Square also included representatives from the American Red Cross, The American Veteran Foundation, the Wounded Warriors Project and the Charlotte Chapter of National Alliance on Mental Illness. Among the speakers was Chuck Denny, the founder of The American Veteran Foundation based in North Carolina, who was a major proponent of the PTSD stamp, in honor of his father, Garland Denny, who served in the Navy in the Korean War and, before his death in 2015, advocated for a stamp to raise money for veteran services. “The Postal Service is honored to issue this semipostal stamp as a powerful symbol of the healing process, growth and hope for tens of millions of Americans who experience PTSD,” David C. Williams, vice chairman of the Board of Governors of the U.S. Postal Service, said in a news release. “Today, with the issuance of this stamp, the nation renews its commitment to raise funds to help treat soldiers, veterans, first responders, health care providers and other individuals dealing with this condition.”

The price of the stamp includes the cost of a first-class stamp at the time of purchase — which is 55 cents currently — and an amount to fund PTSD research. They are available at post offices around the country, through an online shop at www.usps.com/shop or by calling 800-STAMP24. Sheets of 20 can be purchased for \$13. Congress, through the Semipostal Authorization Act, allows the Postal Service to issue and sell “semipostal” stamps to benefit causes that are “in the national public interest and appropriate.” Revenue from sales of the Healing PTSD stamp — less the cost of postage and reasonable costs incurred by the Postal Service — will go to the U.S. Department of Veterans Affairs.

The U.S. Postal Service has issued three "semipostal" stamps, starting with a breast cancer research stamp in 1998. Causes for subsequent semipostal stamps have not yet been determined, but suggestions can be sent to the Office of Stamp Services, Attn: Semipostal Discretionary Program, 475 L’Enfant Plaza SW, Room 3300, Washington, DC 20260-3501 or via email to semipostal@usps.gov. More information about the National Center for Post-Traumatic Stress Disorder can be found online at <https://www.ptsd.va.gov>. [Source: Valley News | Nora Doyle-Burr | December 2, 2019 ++]

DoD Mental Health Programs

Update 05: Negatively Impacted by Physician Recruitment Failures

Low pay, fewer advancement opportunities and an excessive workload rank as the top reasons the military services fail to recruit and retain psychiatrists, psychologists and other mental health providers, according to a new Defense Department report. With more than 50 percent of psychiatrists nationwide able to run cash-only practices, with many making six-figure salaries, the Army, Navy and Air Force lack a competitive advantage when it comes to paying civilians and drawing military providers, as noted in a report 29 NOV to Congress. Add in a slow hiring process, onerous paperwork and little say in assignments — particularly overseas — and the services can’t keep up with demand.

The challenges are a threat to morale, and subsequently, retention, the report states. “When combined with the Defense Health Agency’s access-to-care standards, this reality creates a demoralizing situation in which providers can perform initial behavioral health evaluation but are subsequently unable to provide therapeutic interventions,” the report noted. Providers who wear uniforms also face additional burdens that prompt many to leave, including frequent changes of duty station and low opportunities for advancement.

- The Army promotion system “validates and rewards leadership while often clinical career pathways,’ which can force effective providers out of the service, the report stated.
- In the Navy, psychologists who reach the rank of lieutenant rarely make the next rank “due to a preponderance of operational billets where the psychologist is not being ranked against peers.”
- And while the Air Force is exploring new residency training and recruiting platforms for developing therapists and mental health nurse practitioners, its efforts to recruit already qualified psychologists have not “met with much success,” the report said. Losses of psychiatrists due to separation and retirement from the Air Force also are outpacing the training pipeline and recruiting.

The demand for mental health services has risen across the United States in the past decade as the number of providers is has not kept pace and is barely holding steady. The Health Resources and Services Administration projects a shortfall of 250,000 providers by 2025. And some geographic regions are harder hit by the mental health provider shortage. In these areas, the Defense Department faces even more difficult challenges hiring and retaining an adequate number of personnel.

The report does not note how many mental health professionals may be needed by the services, nor does it provide the number of jobs that are unfilled. In May, Navy Capt. Mike Colston, the Defense Department’s director of mental health policy and oversight, told members of the House Armed Services Personnel Subcommittee that roughly 10,000 mental health providers in behavioral health clinics, within primary care and embedded in units. But according to the report, the number is far fewer: the estimate for 2020 is 6,627 providers, up from 6,599 in 2018. That’s roughly one provider for every 462 active-duty and active-duty family members — not including retirees and their family members, many of whom have access to mental health services at military treatment facilities.

According to the report, the Air Force will face the biggest shortage in the next year, expecting to lose nearly 600 mental health providers, down to 1,011 in 2020, from 1,601 in 2018. The Army and Navy will see increases: from 3,108 in 2018 to roughly 3,134 in 2020 for the Army, and from 1,601 in 2018 to 1,700 for the Navy. The largest gains of mental health personnel are likely to be seen in the Washington, D.C., metro region, according to the report. The National Capital Area, as its called, had 289 civilian and uniformed providers in 2018; in 2020, it is expected to have 782. The report noted that the D.C. area is one of the most challenging in the country to hire mental health providers; more than 80 percent of psychiatrists, psychologists and license clinical social workers do not take insurance, operating on a cash-only basis. [Source: MilitaryTimes | Patricia Kime | December 2, 2019 ++]

Military Base Water

Update 02: GAO Finds 102 at Risk for Water Shortages

More than 100 military installations nationwide are at risk for not having enough water to accomplish their missions, including training and cleaning equipment, suppressing fires, drinking and bathing, according to a new report from the Government Accountability Office. By reviewing previous analyses of current and potential water shortages done by the Office of the Secretary of Defense and individual services, GAO officials identified seven more bases at risk for water shortages than previously had been determined by the Department of Defense.

Not surprisingly, those listed most at risk were in areas that have experienced drought conditions in the past several years, including Kirtland Air Force Base, New Mexico; Vandenberg Air Force Base, Naval Base Coronado, Naval

Weapons Station Seal Beach and Camp Pendleton, California; and Marine Corps Air Station, Yuma, Arizona. Some facilities already are experiencing water scarcity, defined as when demand for water in an area nears or exceeds water supplies, according to GAO. But given the latest predictions on climate change, including those found in the 2018 Fourth National Climate Assessment, drought and water quality declines will worsen the problem, GAO analysts noted.

“DOD’s installations rely on billions of gallons of water to operate and conduct their missions, but critical installations are at risk of water scarcity, and the risks are only projected to increase,” the analysts wrote. Even areas where water is considered abundant may face shortages. At Fort Bragg, North Carolina, for example, base leadership said they are concerned about factors such as pollution and population growth that can affect water quality and quantity. According to Fort Bragg officials, they have been told by local public utilities that water demand will face a critical juncture in roughly 2060 if nothing is done. The list of installations already experiencing water shortages due to overwhelming demand or drought include

- Mountain Home Air Force Base, Idaho, where service members and residents were told to curtail use in 2017 and 2018, with expected continued restrictions in 2019.
- Warren Air Force Base, Wyoming, where a drought continued during the study.
- Marine Corps Air Station Yuma, where officials expressed concern that water would become a scarce as the base population grows.

Earlier this year, DoD sent a report to Congress noting that more than two-thirds of the operationally critical installations were threatened by climate change. DoD assessed 79 “mission assurance priority installations based on their operational role,” and concluded that 53 of the 79 bases faced current threats from flooding; 43 faced threats from drought; and 36 faced wildfire threats. But the newest GAO report raised concerns about how accurate DoD is in its assessments. Regarding water scarcity, GAO analysts said DoD likely did not have a full understanding of the scope of the problem. It noted that the military services, which conducted their own installation assessments, were more thorough in their analyses – the result of using five measures considered to be best practices for reports, including identifying current availability, future availability, water sources, identifying precise locations of water and including all locations.

According to the GAO report, DoD assessments only reflected four of the five best practices – an omission that led it to miss some installations facing potential scarcity. GAO recommended that DoD conduct a department-wide assessment using the same metrics as the services or rely on the assessments conducted by the services. The DoD concurred with that recommendation. Rising temperatures are not only affecting base water supplies, they are having a negative impact on the health and readiness of troops. A study 12 NOV by the Union of Concerned Scientists found that the number of troops who experienced heat-related illnesses has grew by 50 percent between 2013 and 2018, with the hottest bases including Marine Corps Air Station Yuma and MacDill Air Force Base and Homestead Air Reserve Base, both in Florida. [Source: MilitaryTimes | Patricia Kime | December 2, 2019 ++]

Military Hospitals

Retiree and Retiree Family Patient Reductions Planned

As the Department of Defense continues to streamline and transform its military health system, more military hospitals and clinics will stop taking retiree patients, their families and even some active-duty family members, according to the Defense Health Agency director. At the annual meeting of AMSUS, the Society of Federal Health Professionals, in National Harbor, Md., Lt. Gen. Ronald Place told attendees that after the Pentagon completes its assessments of its medical facilities and their contributions to readiness, more non-active duty beneficiaries will be transferred to Tricare networks. Until the report is completed, however, there’s no way of knowing how many retirees and family members will be forced to leave military treatment facilities or which hospitals and clinics will be affected.

Place said as installations undergo personnel fluctuations and changes in mission, military health facilities will adapt, and those changes are likely to affect non-uniformed beneficiaries. He cited recent changes at Fort Knox, Kentucky, Fort Jackson, S.C., and Fort Sill, Okla., that downgraded those posts' military hospitals to outpatient clinics — a reconfiguration that resulted in the disenrollment of retirees, retiree family members and some active duty family members from those facilities. “I do anticipate more of that happening in the future,” Place said. “I’m not talking about tomorrow, I’m not even talking about next week. But as an evolving organization, we will have changes.”

The Pentagon is three years into a massive health transformation that will place all military hospitals and clinics under management of the Defense Health Agency and reorganize the services' medical forces to focus primarily on supporting active-duty personnel and operations. As part of the plan, the Army, Navy and Air Force expect to trim 17,944 uniformed medical billets from their ranks, and the Defense Health Agency is assessing all military medical facilities, weighing whether to expand some and close others that “do not offer now, and will not be able to offer in the future, a platform for maximizing capabilities,” Assistant Secretary of Defense for Health Affairs Thomas McCaffery said. As the system focuses more on force readiness, the Defense Department is weighing options for its next generation of Tricare contracts, which are expected to handle more non-uniformed beneficiaries.

The fiscal 2017 National Defense Authorization Act dictated the changes, but DoD's failure to be transparent about the effort, which includes being a year late on a report on the future of each military medical treatment facility, has some lawmakers worried. In a House Armed Services hearing 5 DEC, Rep. Jacki (D-CA), chairwoman of the Subcommittee on Military Personnel, and ranking member Rep. Trent Kelly (R-MS) said they found that in some areas, including San Francisco Bay and Seattle, family members can't get timely appointments at military facilities, nor is care available in the community.

The civilian healthcare networks in those areas, Speier said, “either lack the capacity or are unwilling to admit Tricare beneficiaries” because the markets are “oversaturated.” “DoD seems intent on gutting our military health system and calling it an efficiency,” Speier told military health officials, including McCaffery, Place and the services surgeons general. “I believe the department may be viewing [reforms] as a cost-saving exercise,” Kelly agreed. “It is crucial that prior to any reductions in medical treatment facility services, DoD fully understand the civilian network capability to absorb those patients.”

McCaffery assured lawmakers that while the principal mission of the military health system is to enable force readiness that includes military families and retirees. “After all, while service members who deploy must be medically ready to do their jobs, they also need to know that their families back home are cared for and that, in retirement, they will receive a health benefit that recognizes the value of their service,” McCaffery said. Rep. Susan Davis (D-CA), wasn't satisfied with the answers, saying the changes are a “great source of anxiety for our families.” “What's the strategy? What's the plan? How do we make certain that as we move further into Tricare for beneficiaries that there are is a “there” there for them and they are not going to lose benefits that they have already had?” Davis said.

As part of the transformation, the Army has begun shedding at least 6,935 medical billets, the Navy, 5,386, and the Air Force, 4,000 – all medics. The cuts are occurring in phases, starting this year with the elimination of vacant positions. In fiscal 2021, additional personnel reductions will be taken to meet the goals. McCaffery said at AMSUS that the report on the medical treatment facility restructuring plan, which was due to Congress in December 2018, will be submitted to Congress “very soon.” He said under the plan, some facilities may be expanded while others will close. “We need to be open to right-sizing MTF services capabilities to ensure that we're using finite resources most efficiently while not compromising our ability to meet mission,” McCaffery said.

Lawmakers told McCaffery and the services to tread carefully when considering personnel cuts and closures. “You talk about near peer and future threats, let me tell you what, civilians don't go downrange,” said Kelly, a brigadier general in the Mississippi Army National Guard, “That takes guys and girls in uniform to get our soldiers to the right level of care in that magic hour.” [Source: MilitaryTimes | Patricia Kime | December 10, 2019 ++]

Gold Star Families

Update 02: Proposed Relief through Congressional Action Has Not Happened



Aaden Welch, 11, left, along with his mother Becky Welch and his brother, Robby Welch, 9, right, poses for a photograph with a portrait of their father, Army 1st Lt. Rob Welch in their home in Wylie. A provision in the 2017 tax overhaul caused the Welch family's taxes to increase from about \$400 to \$2200 this year on the survivor benefits they've receive since Rob was killed in Afghanistan in 2011.

Relief seemed imminent for Becky Welch from tax legislation that inadvertently created a financial burden for the Wylie mother of two, along with thousands of other Gold Star families who've had loved ones die while serving in the military. The GOP-run Senate had passed a fix. The Democrat-run House had done the same, folding a similar correction into a broader bill. The two chambers needed only to reconcile their differences – more over procedure than policy – to rectify the costly error. That was just before Memorial Day in late May. Six months later – with Veterans Day now having come and gone – nothing has changed, leaving Welch and others with bruised bank accounts as Congress proves incapable of passing a simple fix that has universal support in both political parties.

“It’s frustrating,” said Welch, whose husband, Army 1st Lt. Rob Welch, was killed in combat in Afghanistan in 2011. “It’s almost like our hands are being tied.” What you don’t know can cost you. Find out if you’re paying more for energy than you need to... The stalemate over the Gold Star tax glitch offers one of the starkest examples of Congress’ struggle to tackle even basic problems, including those of lawmakers’ own creation. No one in Congress intended to increase taxes on families who’ve had a spouse or parent die while in uniform. No one, as far as anybody can tell, wants to preserve that burden. And yet, no one has been able to break a logjam that’s costing some families thousands of dollars a year. Adding to the exasperation is the fact that the hang-up has nothing to do with the fix itself.

The House wants the Senate to take up its version, which was folded into a broader retirement bill. Some GOP senators want to add provisions – unrelated to the tax glitch – that Democrats don’t like. The Senate is pressing the House to take up its narrow version of the fix. While advocates and some lawmakers remain hopeful that a breakthrough could come soon, it’s unclear how it will all play out.

“This is just another example of how the process in Washington, D.C., is broken,” said Rep. Van Taylor, a freshman Plano Republican and Marine veteran who has been working with a bipartisan group to figure out how to get one version or another passed into law. The Gold Star tax glitch dates back to the sweeping tax overhaul that Congress approved in 2017 with only GOP support. One of the measure’s small-scale tweaks sought to prevent rich parents from putting money in their child’s name to shield it from taxation. The change, in and of itself, didn’t create much fuss. But its unintended implications for military survivors’ benefits became clear come tax season. When someone in the military dies a service-related death, their surviving spouse can get an untaxed benefit through the Veterans Affairs Department and then also a taxable benefit through the Defense Department. If the spouse gets both benefits, there must be a dollar-for-dollar offset. That setup has been dubbed by critics as the “widow’s tax.”

Advocates are pushing lawmakers to also eliminate that penalty, which hits an estimated 65,000 individuals each year. In the meantime, some surviving spouses have been able to work around the problem by directing the Defense Department benefit to their children. But then came the “*kiddie tax*,” as the tax overhaul’s inadvertent consequence is known. Survivor payouts sent to children had previously been taxed at an average rate of 12% to 15%, according to Tragedy Assistance Program for Survivors, a group that’s been leading the effort to fix the tax glitch. That rate increased to as high as 37% under the new tax code. Upwards of 10,000 families were affected – nearly all of them caught off-guard by the unexpected tax hike, according to TAPS. “For some, they went from owing hundreds of dollars in taxes to thousands,” said Candace Wheeler, TAPS’ senior adviser for policy and legislation. “That could be a car payment. It could be rent or a house payment.”

Welch, the Wylie mother, was among those to see an increase, up to \$2,200 in taxes on the benefit from about \$400 in years past. The 35-year-old said her family has so far been able to manage the financial burden. But she’s eyeing with trepidation the holiday season – and the expenses that often come with it – due to uncertainty over whether the tax glitch will still be around to ding her next tax season. “Fingers crossed,” Welch said, who first alerted Taylor to the problem and who praised him and other Texas lawmakers for continuing to make it a priority.

It had initially appeared that Congress would move fast to OK a retroactive fix. The Senate passed its version of the Gold Star tax correction via unanimous consent. The House approved its iteration, folded into a broader bill on retirement savings, with an overwhelming 417-3 vote. But Republicans like Texas Sen. Ted Cruz objected to the House bill not including an unrelated provision to expand 529 savings accounts to cover things like homeschooling expenses. Cruz has castigated Senate Democrats, saying they’ve obstructed efforts to debate his 529 measure and other elements of the broader retirement bill. The Texan said, in the meantime, there’s “no reason why the House can’t take up and pass” the Senate version of the tax glitch fix. “It’s long past time for Congress to provide relief to the families who have made the ultimate sacrifice for our country,” said Cruz, who co-sponsored the Senate bill.

But some Democrats have accused the GOP of posturing, particularly since Republicans wrote the tax overhaul that created the Gold Star tax problem in the first place. The Democratic Congressional Campaign Committee, for instance, has hammered Rep. Chip Roy (R-Austin) for being one of the three lawmakers to vote against the House bill, running digital ads that accuse him of voting for “higher taxes on the families of fallen veterans.” Roy, who joined Congress this year, has explained that he voted against the House bill due to concerns with the broader retirement package, including the 529 objections voiced by Cruz. A Roy spokesman this week didn’t respond to a request for comment.

That sort of partisan wrangling has done little to break the gridlock. But some lawmakers are still pushing for a resolution. “We must make sure these families get the benefits they are owed,” said Rep. Colin Allred, a Dallas Democrat who lamented the “hastily passed 2017 tax bill.” “Republicans and Democrats need to come together and resolve the issues with House and Senate bills this year.” Taylor, the Plano Republican, has gone so far as to rally fellow veterans in Congress – both Republicans and Democrats – to reenergize the effort to approve a fix. He’s hopeful that it will soon get to the finish line, but he bemoaned a “dysfunctional legislative process.” “I know there’s a lot of effort to blame one side or the other,” he said. “But you have a system where it’s relatively easy to block things and very hard to pass things.” [Source: The Dallas Morning News | Tom Benning | December 5, 2019 ++]

POW/MIA Recoveries & Burials

Reported 01 thru 15 DEC 2019 | Nine

“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 as of FEB 2019 are: World War II 73,025 of which over 41,000 are presumed to be lost at sea, Korean War 7665, Vietnam War 1589 (i.e. VN-1,246, Laos-288, Cambodia-48, & Peoples Republic of China territorial waters-7), Cold War 111, 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 <https://www.dpaa.mil/News-Stories/Recent-News-Stories/Year/2019> for a listing and details of those accounted for in 2019. 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. Steve Nagy**, 23, of Lorain, Ohio, was a member of the 407th Bombardment Squadron (Heavy), 92nd Bombardment Group (Heavy), 40th Combat Bombardment Wing, 1st Air Division, 8th Air Force. On Aug. 24, 1944, Nagy piloted a B-17G Flying Fortress aircraft, carrying nine crewmembers, which was struck by German anti-aircraft fire and crashed during a bombing raid over Merseburg, Germany. Four crewmembers survived and were captured by German forces, while five, including Nagy, were killed. Nagy will be buried in his hometown. The date has yet to be determined. [Read about Nagy.](#)

-- **Army Master Sgt. Harold F. Drews**, 21, was assigned to King Company, 3rd Battalion, 31st Infantry Regiment, 7th Infantry Division. For several days, his unit was engaged in intense fighting with the Chinese People's Volunteer Forces near the Chosin Reservoir in North Korea. Drews went missing in action on Dec. 12, 1950. His remains could not be recovered. Interment Services are pending. [Read about Drews.](#)

-- **Army Pfc. William J. Winchester**, 20, of Mount Hope, Alabama, was a member of Company D, 1st Battalion, 24th Infantry Regiment, 25th Infantry Division. He was captured by enemy forces near Unsan, North Korea in November 1950. He reportedly died while in custody of the Chinese People's Volunteer Forces at Prisoner of War Camp Number Five in February 1951. Winchester will be buried March 19, 2020, in Lima, Ohio. [Read about Winchester.](#)

-- **Marine Corps Reserve Pvt. William E. Rambo**, 20, of LaPorte, Indiana, was a member of Company H, 2nd

Battalion, 8th Marine Division, Fleet Marine Force, which landed against stiff Japanese resistance on the small island of Betio in the Tarawa Atoll of the Gilbert Islands. In November 1943, approximately 1,000 Marines and sailors were killed, and more than 2,000 were wounded during the fighting. Rambo was killed on the first day of the battle, Nov. 20, 1943. Rambo will be buried on April 11, 2020 in Arlington National Cemetery. [Read about Rambo.](#)

-- **Army Sgt. 1st Class Riley Burchfield**, 22, of Cleveland, was a member of Company D, 1st Battalion, 24th Infantry Regiment, 25th Infantry Division. He was captured by enemy forces near Kunu-ri, North Korea on Nov. 26, 1950. He reportedly died while in custody of the Chinese People's Volunteer Forces at Prisoner of War Camp 5 in February 1951. Burchfield will be buried Jan. 10, 2020, in his hometown. [Read about Burchfield.](#)

-- **Navy Chief Water Tender Frances D. Day**, 37, of Milburn, New Jersey, was stationed aboard the USS Oklahoma, which was moored at Ford Island, Pearl Harbor, when the ship was attacked by Japanese aircraft on Dec. 7, 1941. The USS Oklahoma was hit multiple times which caused it to capsize quickly and caused the deaths of 429 crewmen, including Day. Day will be buried at the Punchbowl. The date has yet to be determined. [Read about Day.](#)

-- **Navy Fireman 1st Class Leo T. Keninger**, 20, was stationed aboard the USS Oklahoma, which was moored at Ford Island, Pearl Harbor, when the ship was attacked by Japanese aircraft on Dec. 7, 1941. The USS Oklahoma was hit multiple times which caused it to capsize quickly and caused the deaths of 429 crewmen, including Keninger. Interment services are pending. [Read about Keninger.](#)

-- **Navy Quartermaster 2nd Class Daryle E. Artley**, 21, of Maywood, Nebraska, was stationed aboard the USS Oklahoma, which was moored at Ford Island, Pearl Harbor, when the ship was attacked by Japanese aircraft on Dec. 7, 1941. The USS Oklahoma was hit multiple times which caused it to capsize quickly and caused the deaths of 429 crewmen, including Artley. Artley will be buried May 15, 2020, in Vancouver, Washington. [Read about Artley.](#)

-- **Navy Seaman 1st Class Orval A. Tranbarger**, 20, was stationed aboard the USS Oklahoma, which was moored at Ford Island, Pearl Harbor, when the ship was attacked by Japanese aircraft on Dec. 7, 1941. The USS Oklahoma was hit multiple times which caused it to capsize quickly and caused the deaths of 429 crewmen, including Tranbarger. Interment services are pending. [Read about Tranbarger.](#)

[Source: <http://www.dpaa.mil> | December 15, 2019 ++]

* VA *



VA Solid Start

Program Launched to Ensure Vets Are Contacted During Initial Transition

The U.S. Department of Veterans Affairs (VA), in collaboration with the Departments of Defense and Homeland Security, introduced VA Solid Start which will proactively contact all newly separated service members at least three times during their first year of transition from the military. The program will engage contact with approximately 200,000 Veterans each year and is part of Executive Order 13822 which was issued to improve mental health care and access to suicide prevention resources available to transitioning uniformed service members in the year following discharge, separation or retirement.

“The stress of transition from service can lead to challenges or unmet health care needs for Veterans,” said VA Secretary Robert Wilkie. “Through VA Solid Start, the department will ensure consistent, caring contact and help new

Veterans get a solid start on their civilian lives.” The goal is to establish a strong relationship between VA and transitioning service members, promoting awareness of VA benefits, services and partner resources available to them. Veterans within their first year of separation from uniformed service experience suicide rates nearly two times higher than the overall Veteran suicide rate. Contacts through VA Solid Start — via phone calls or emails — will ensure transitioning service members are aware of the free VA mental health resources the department offers Veterans for up to a year, regardless of discharge status or service history.

If you or someone you know is having thoughts of suicide, contact the Veterans Crisis Line to receive free, confidential support and crisis intervention available 24 hours a day, seven days a week, 365 days a year. Call 800-273-8255 and Press 1, text to 838255 or chat online at [VeteransCrisisLine.net/Chat](https://www.veteranscrisisline.net/Chat). [Source: Military.com | Dorothy Mills-Gregg | November 14, 2019+]

VA Blue Water Claims

Update 79: Court Rules it Will Not Lift Stay

The Federal Circuit Court of Appeals has ruled that it will not lift the stay on Blue Water Navy Vietnam veterans' claims imposed by Department of Veterans Affairs Secretary Robert Wilkie earlier this year. The court heard oral arguments last month in a lawsuit filed by veterans nonprofit group Military Veterans Advocacy Inc. (MVA). The lawsuit asked that the court lift the VA-imposed delay on processing Blue Water Navy Vietnam veterans' Agent Orange disability claims. The delay affects more than 400,000 veterans or surviving family members who could be eligible for benefits, according to VA.

"Although the court did not lift the stay and found that Congress intended for the stay to apply, we still consider this a win," Retired Navy Commander John Wells, director of litigation and chairman of the board of MVA, told Connecting Vets. "They have stated in no uncertain terms the stay cannot go beyond Jan. 1, 2020." After decades of trying to win disability benefits from the VA, thousands of Blue Water veterans exposed to toxic herbicide Agent Orange are still waiting for a chance to receive disability benefits -- even after a landmark court decision and a law awarding those benefits passed Congress and was signed by President Donald Trump.

The lawsuit attempted to overturn a stay ordered by Wilkie and [first reported](#) by Connecting Vets in July. The stay was allowed under the Blue Water Navy Vietnam Veterans Act passed by Congress and the president, Wilkie says, and it stalled all claims processing until Jan. 1, 2020. The lawsuit also attempted to clarify the Procopio v. Wilkie Federal Circuit Court decision, which reversed a 1997 VA decision to deny that Blue Water veterans were exposed to Agent Orange while serving offshore of Vietnam. The Procopio decision earlier this year meant that the VA should presume veterans who served in the waters off the coast were exposed to Agent Orange at some point during their service, and as a result were eligible for related VA benefits.

So far, both routes to benefits for Blue Water veterans have been shut down by the stay and look to remain so until the first of the year at the earliest. "This is why the Blue Water Navy Vietnam Veterans Association and Military-Veterans Advocacy withdrew support from the Blue Water Navy Act," Wells told Connecting Vets, adding that MVA tried to reach out to major veteran service organizations and Congress about their concerns before the bill passed, but the legislation moved ahead anyway. Wells said the VA has delayed all claims for Blue Water veterans -- including those that should have moved forward since the Procopio decision, and veterans are dying while they wait. He said at least 12 have died since Wilkie issued the stay. "It's a shame," he said. "This shouldn't have ever been allowed to happen."

While the stay is currently expected to continue until 1 JAN, claims for benefits can be submitted now. VA has said Blue Water veterans and their families are "encouraged" to submit their claims for conditions related to Agent Orange. Veterans 85 and older, or "with life-threatening illnesses" will have "priority in claims processing," VA said.

So, while VA will not begin processing claims until 2020, they can still be processed and prepared before that date. About 77,000 Blue Water veterans have previously submitted claims and been denied, VA leaders said. They must file a new claim. Eligible survivors of deceased Blue Water Navy veterans can also file claims for benefits based on their veterans' service. A list of the diseases currently linked to Agent Orange and eligible for benefits can be found [here](#). Veterans who want information from the VA can call 800-827-1000 or click [here](#). [Source: ConnectgingVets.com | Abbie Bennett |December 05, 2019 ++]

VA Blue Water Claims

Update 80: VA to Begin Deciding Claims 1 JAN 2020

The U.S. Department of Veterans Affairs (VA) begins deciding Blue Water Navy Vietnam Veterans Act of 2019 claims, Jan. 1, 2020, extending the presumption of herbicide exposure that include toxins such as Agent Orange, to Veterans who served in the offshore waters of the Republic of Vietnam during the Vietnam War. Prior to the measure, only Vietnam War Veterans who served on the ground in Vietnam or within Vietnam's inland waterways were eligible to receive disability compensation and other benefits based on a presumption of herbicide exposure.

Signed into law on 25 JUN, the law specifically affects Blue Water Navy (BWN) Veterans who served as far as 12 nautical miles offshore of the Republic of Vietnam between Jan. 6, 1962 and May 7, 1975, as well as Veterans who served in the Korean Demilitarized Zone (DMZ) between Jan. 1, 1967 and Aug. 31, 1971. These Veterans can apply for disability compensation and other benefits if they have since developed one of [14 conditions](#) that are presumed to be related to exposure to herbicides such as Agent Orange. Veterans do not need to prove that they were exposed to herbicides. The specific conditions can be found by searching Agent Orange on www.va.gov.

“For six months VA worked diligently to gather and digitize records from the Naval History and Heritage Command in order to support faster claims decisions,” said VA Secretary Robert Wilkie. “These efforts will positively impact the claims process for Veterans filing for these benefits” Qualifying recipients, in addition to affected Veterans still living, are certain survivors of deceased BWN and Korean DMZ Veterans.

Survivors can file claims for benefits based on the Veteran's service if the Veteran died from at least one of the 114 presumptive conditions associated with Agent Orange. The law also provides benefits for children born with spina bifida if their parent is or was a Veteran with certain verified service in Thailand during a specific period. The Blue Water Navy Act also includes provisions affecting the VA Home Loan Program. The law creates more access for Veterans to obtain no-down payment home loans, regardless of loan amount, and the home loan funding fee is reduced for eligible Reservists and National Guard borrowers who use their home loan benefits for the first time. Certain Purple Heart recipients do not pay a funding fee at all. VA's website describes these and [other benefits](#).

Veterans who want to file an initial claim for an herbicide-related disability can use VA Form [Form 21-526EZ](#), Application for Disability Compensation and Related Compensation Benefits or work with a VA-recognized Veterans Service Organization to assist with the application process. Veterans may also contact their state Veterans Affairs Office. BWN Veterans who previously filed a claim seeking service connection for one of the 14 presumptive conditions that was denied by VA may provide or identify any new and relevant information regarding their claim when reapplying. To re-apply, Veterans may use [VA Form 20-0995](#), Decision Review Request: Supplemental Claim. As a result of the new law, VA will automatically review claims that are currently in the VA review process or under appeal.

For more information about the Blue Water Navy Act and the changes that will take effect visit <https://www.benefits.va.gov/benefits/blue-water-navy.asp>. [Source: VA News Release | December 12, 2019 ++]

VA Urgent Care

Update 01: Top 10 Frequently Asked Questions

Have a sore throat, earache, or strained muscle? Then consider contacting your VA facility or using the community urgent care benefit available to eligible Veterans under the MISSION Act. VA facilities across the country offer same-day primary care and mental health services, and many offer additional services as well. With the new community urgent care benefit, eligible Veterans can also visit a local walk-in retail health clinic or urgent care center that is part of VA's contracted network. Urgent care providers treat non-emergent symptoms or conditions such as ear infections, minor burns, and mild skin infections. If you believe your life or health is in danger, call 911 or go to the nearest emergency department right away!

To be eligible for the urgent care benefit, you must be enrolled in the VA health care system and have received care from VA (either in a VA facility or a community provider) within the past 24 months. To check eligibility, contact your local VA medical facility or call 1-833-4VETNOW (1-833-483-8669). Eligible Veterans can receive urgent care from an urgent care provider in VA's contracted network without prior authorization from VA. Following are the top 10 Frequently Asked Questions by vets regarding this program:

1. How do I find the nearest in-network community urgent care provider?

Use VA's Facility Locator at <https://www.va.gov/find-locations/> and click on the VA-approved urgent care locations and pharmacies near you. There are currently two types of urgent care network locations: walk-in retail health clinics and urgent care centers. Seek care at a retail location for an uncomplicated illness such as a sore throat. Visit an urgent location for more pressing illnesses or injuries requiring services such as splinting, casting, or wound treatment.

2. What do I do when I arrive at an urgent care location? What type of identification will I be asked to show?

There is no identification card needed for VA's urgent care benefit. When you arrive, verify they are part of VA's contracted network, complete the intake form, and tell the provider you would like to use your VA urgent care benefit. The provider will check your eligibility. Both Veterans and providers can call 1-833-4VETNOW (1-833-483-8669) to confirm eligibility. Veterans can call 1-866-620-2071 for other issues related to the urgent care benefit.

3. Does urgent care cost anything?

No, you do not have to pay anything at the time of the visit. If you owe a copayment, VA will send you a bill. Copayments are \$30, but your liability will depend on your assigned priority group and the number of times you have used your urgent care benefit in a calendar year. Learn more about urgent care copayments.

4. How does prescription medication work for urgent care?

VA will pay for or fill prescriptions for urgent care. For routine prescription medication longer than a 14-day supply, the prescription must be submitted to VA to be filled. Before filling the prescription, VA will verify the urgent care visit. If there are issues with filling your prescription, call 1-866-620-2071.

5. There are no urgent care clinics in my area. What do I do?

Contact your local VA medical facility to discuss options. Same-day primary and mental health services are available at all VA medical centers. In addition, VA continues to expand its contracted network of urgent care providers so that most Veterans are within a 30-minute drive time from their home to a network urgent care/retail location.

6. If there are no in-network urgent care facilities nearby, can I visit an Emergency Department (ED) instead?

If you are having difficulties receiving urgent care services, contact your local VA medical facility. Same-day primary and mental health services are available at all VA medical centers. If you believe your life or health is in danger, call 911 or go to the nearest emergency department immediately. Please note that VA can only pay for a Veteran's emergency care under certain conditions.

7. Can I use the in-network urgent care provider at my local pharmacy as my primary care provider (PCP)?

No. Urgent care is not a replacement for services your PCP offers. Use urgent care for treating minor, non-emergent illnesses and injuries. The urgent care benefit does not cover preventive health care offered by your primary care physician. Always consider talking with or seeing your PCP if you are concerned that the urgent care provider will not understand the complexities of your medical history or medications.

8. How do I know if I need urgent care or emergency care?

Urgent care is for non-life-threatening illnesses or injuries such as strep throat, pink eye, or a strained muscle. Emergency care is for an injury, illness, or symptom so severe that a prudent layperson reasonably believes that delay in seeking immediate medical attention would be hazardous to life or health. Such life-threatening major illnesses or injuries could include severe chest pain, seizures, loss of awareness, heavy uncontrollable breathing, or severe burns. For emergency care, call 911 or go to the nearest emergency department right away. Please note that VA can only pay for a Veteran’s emergency care under certain conditions.

9. What if I arrive at an in-network urgent care location and have difficulty receiving care?

Call 866-620-2071 or your local VA medical facility.

10. How do I get a free flu shot?

Veterans can receive a flu shot at their local VA medical facility or from any Walgreens location, paid for by VA. Veterans can also receive a flu shot, paid for by VA, at an in-network urgent care location, but it must be administered in conjunction with a condition requiring urgent care.

[Source: Vantage Point | December 1, 2019 ++]

VA Facility Ratings

Star-Rating System Replaced to Enhance Vet’s Comparisons

The U.S. Department of Veteran Affairs (VA) announced 11 DEC, key changes to increase transparency and ensure Veterans have the best information regarding the performance of VA health care facilities. As part of this effort, VA will discontinue its star-rating system, making it easier for Veterans to compare VA facilities with non-VA facilities in their local area. “Star ratings were developed as an internal tool meant to compare one VA facility to another,” said VA Secretary Robert Wilkie. “These ratings do not provide insight as to how our hospitals stack up against nearby non-VA facilities and are therefore of little value in helping Veterans make informed health care decisions. This change will make it easier for Veterans to choose the best possible care close to home, when and where they need it.”

The website home page for each VA hospital now features links to comparative tools relating to wait times, quality of medical care and patient experience ratings. This information is drawn from quality-of-care measures provided by industry-standard sources including, but not limited to the Centers for Medicare and Medicaid Services, National Committee for Quality Assurance and the Agency for Healthcare Research and Quality. Star ratings are often misinterpreted, as they compare VA facilities by ranking them across the department’s health care system, rather than by geography, population characteristics or unique care offerings. Additionally, Veterans in VA focus groups have indicated they do not consult the star ratings in making decisions about VA care.

The National Quality Forum’s, 6 NOV, issue brief, Hospital Quality Star Rating Summit, points out, star ratings of health care facilities can often misrepresent an assessment of overall hospital quality, “leading consumers to choose hospitals that were not the best at delivering the care they needed...when they might have been the best place for a person with a particular condition to receive care.”

While VA has published star ratings for the final time, the department will continue to make public its own detailed, Strategic Analytics for Improvement and Learning (SAIL) data, to monitor and internally manage hospital system performance within the Veterans Health Administration. SAIL assesses more than 60 quality metrics in areas such as death rates, complications, safety and patient satisfaction, as well as overall efficiency and physician capacity at individual VA Medical Centers. In accordance with Government Accountability Office recommendations, in 2017 and 2019, these changes will help Veterans navigate the many new choices available to them under the MISSION Act, a landmark law that puts Veterans at the center of their health care decisions. [Source: VA News Release | December 11, 2019 ++]

VA ATLAS Program

Update 01: Services Initiated at First NC Walmart Pilot Location

In Asheboro, North Carolina, VA and Walmart cut the ribbon 10 DEC for a new VA-led Accessing Telehealth through Local Area Stations (ATLAS) services pilot location. Walmart donated equipment and space at five sites as part of a pilot initiative allowing Veterans to meet with a VA provider in a private room via video technology. VA telehealth clinical services vary by location and may include: primary care, nutrition, mental health and social work. “This type of collaboration is the way of the future,” said VA Secretary Robert Wilkie. “Veterans need the expansion of choice, and this partnership is vital to affording them convenient access to VA health care services where they live.”

This new option makes VA care easier to access and eases the burden of long travel times to appointments. “As both a Veteran of the Air Force and a father whose son and son-in-law are serving, I know firsthand how important support and access is for our military, especially when it comes to health care,” said Chief Growth Officer for Walmart U.S. Health and Wellness, Daryl Risinger. “Walmart is committed to making quality health care affordable and accessible and is working with VA to expand its ability to serve Veterans through technology. This is another way we are helping our communities live better.”

VA leads the nation in telehealth services. Last fiscal year, there were more than 1.3 million video telehealth encounters with more than 490,000 Veterans. Other telehealth pilot sites are in Wisconsin, Michigan and Iowa. [Source: Vantage Point | December 12, 2019 ++]

VA Pain Management

Update 11: Virtual Reality Helps Ease Trauma



Kenneth Stewart above, an Army veteran getting treatment at the James A. Haley Veterans’ Hospital, walked into a meditation therapy session with a heart rate of 89 and shoulder pain he couldn’t ignore. Recreation therapist James Kaplan sat Stewart down in a comfortable chair and handed him a virtual reality headset. Stewart, 59, had heard about

virtual reality as therapy for veterans like him with chronic pain and post-traumatic stress disorder. But he was skeptical. That changed after a few minutes with the headset. The room transformed into a digitized forest and Stewart's heart rate fell to 77. He stopped thinking about his pain. "It's so realistic," Stewart said. "I wish I could go there."

Virtual reality, where headsets and the feeds they deliver make the real world disappear, has lagged as a consumer product. But there have been significant strides during the past few years in its clinical use, especially among military service members. Kaplan started the virtual reality therapy program at James Haley a little over a year ago and has led more than 600 sessions with patients. On average, they report pain reduction of 1½ to 2½ points on a scale of 10 after using a guided virtual reality meditation app. The app can be adapted to display a variety of environments, including caves, cliffs and underwater reefs. In this case, the virtual reality experience works by distracting patients from physical or mental stressors, having them focus instead on relaxing digital settings.

It's a method tested as far back as the 1990s when virtual reality first underwent research as a therapy tool. It's also been applied to a method known as exposure therapy. In the low-tech version of this method, patients with post-traumatic stress disorder close their eyes and imagine scenarios that trigger their panic to identify cues that set them off and how to avoid them. But with exposure therapy, the therapist can't determine whether the patient is actually trying to recreate a scene or pinpoint what the patient is imagining. That's why Deborah Beidel, director of the University of Central Florida RESTORES clinic and a therapist with 30 years' experience in exposure therapy, is now using virtual reality in her clinic. "In VR I have more control," Beidel said. "It allows me to make experiences more powerful."

The RESTORES clinic treats active duty service members, veterans and first responders in a three-week intensive program where stress-inducing scenarios are virtually recreated using headsets. Say a patient who's a combat veteran distinctly remembers seeing a bag of trash on the side of the road moments before an improvised explosive device went off under a Humvee. Post-traumatic stress disorder might be triggered whenever the patient spots trash on the side of the road. At Beidel's clinics, the patient would be transported through virtual reality to the scene of the explosion, complete with the trash bag. Only this time, there's no explosion. Repeated sessions of this altered scenario might help the trigger go away.

Since 2011, Beidel's clinic has treated more than 450 veterans and active duty personnel this way, and nearly 215 first-responders and survivors of mass shootings. Her team is now developing software to help survivors of military sexual trauma. Debate has arisen over the length of virtual reality sessions at the clinic, about two hours for some patients, and whether it can cause overstimulation. But Beidel has said none of these concerns come from patients. She also said that after completing the program, most patients no longer meet the criteria of a post-traumatic stress disorder diagnosis. Currently, her lab uses the Bravemind software developed at the University of Southern California.

For years, Albert Rizzo at USC has studied the technology's use in treating people with military backgrounds. Rizzo is associate director of the medical virtual reality group at the school's Institute for Creative Technologies. He said the stigma against seeking mental health treatments is strong in the military community, where seeking therapy can be seen as a sign of weakness. Many service members associate virtual reality technology with video games and find it easier to undergo this kind of therapy, Rizzo said. Virtual reality in clinical settings allows both patient and clinician to do things they can't in the real world. "The technology caught up with the vision," Rizzo said.

More work is needed, though, before the technology can spread to every clinic and hospital. For one, a large controlled study is needed comparing patients treated with virtual reality and those who aren't, said Jeremy Bailenson, founding director of the Virtual Human Interaction Lab at Stanford University. Kaplan at James Haley already is getting questions about his program from veterans' therapists across the country eager to set up their own virtual reality therapy. For his part, patient Stewart, a field artillery chief during Operation Desert Storm who lives in Montgomery, Ala., is sold on the technology. He'd like to get his own virtual reality headset — so he can continue his meditation at home. [Source: Tampa Bay Times | Ileana Najarro | November 29, 2019 ++]

VA Flu Shots

Update 07: Under Age 50, You're not Invincible at Any Age

Just because you 'never' get sick doesn't mean you're invincible from getting the flu. A serious misconception is that the flu shot is only for children and older adults. However, Veterans under 50 also need a flu shot. The Centers for Disease Control and Prevention (CDC) recommends flu shots for anyone over six months and older. Veterans need to get a flu shot to protect not only themselves but also their loved ones. If you're under 50, don't be one of the many Americans who fail to get a shot. Protect yourself, your aging parents, your small children, your friends, and neighbors.

You may feel like you're old enough to know how to avoid flu and young enough to fight it. But as many as 647,000 people were hospitalized last year, so getting vaccinated is crucial. All Veterans can follow the tips below to help keep themselves healthy:

- Cover coughs and sneezes
- Keep hands clean - wash frequently
- Stay home and avoid others when sick
- Seek antiviral treatment (Tamiflu, among other options) right away if you think you have flu
- Promote flu vaccination and prevention strategies to others around you at home and work.

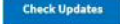
Keep in mind that each year, flu causes serious illness and even death. Talk to your doctor at your next appointment or sign in to send a message to your health care team via [Secure Messaging](#) to learn more about flu shots. Getting your flu vaccine is safe and well tolerated with millions receiving it each year. It takes two weeks for your flu shot to protect yourself, family, and friends, so get your shot now. Finding a place to get your flu vaccine is easier than you think. Veterans who are receiving VA health care can get the flu shot at a nearby VA health care facility. Veterans can also receive their flu shot at Walgreens, and the information will be automatically added to your VA health records. Learn more about [VA's partnership](#) with Walgreens. If you have non-VA health care providers, you can learn where to get your flu shot from the CDC's Flu Vaccine Finder. [Source: VA *myHealtheVet* | Abbie Bennett | December 3, 2019 ++]

VA Medical Records

Update 05: Avoiding Mistakes



Depending on which My HealtheVet feature you use, you could be shortchanging yourself without realizing it. Here are some ways to help you avoid common mistakes when using your VA Health Summary, VA Blue Button report, and Labs and Tests. If you've registered but not upgraded your My HealtheVet account, that should be your next step. [Upgrading to a Premium](#) account gives you access to more of your medical records online, and many more tools and features.

Remember: Throughout My HealtheVet's tools, you will encounter the  button. Use this to make sure you are looking at your most recent data.

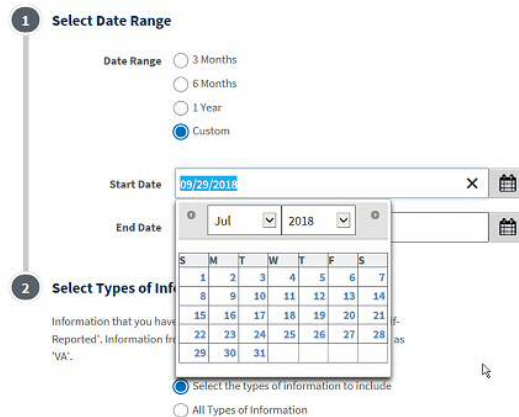
VA Health Summary or VA Blue Button Reports

When it comes to viewing your most recent VA health care information, [VA Health Summary](#) is a great tool to use. Remember to select 'Check Updates' at the top of the page if you are waiting for your current summary to become available. Once your information update is complete, you can view, print, and download portions of your VA health record in a single report, including:

- Allergies
- Outpatient encounter notes
- Immunizations
- Lab result
- Medications
- Problems/conditions
- Surgical and clinical procedure notes
- Vital signs
- Emergency contact information
- And more

Keep in mind that some information in the summary has a limited time frame or number of reports. The VA Health Summary is a very useful and concise report to share with a doctor outside of VA, for example. Check out "[What's in the VA Health Summary](#)" for more details. If you need to look further back into your VA health records, VA Blue Button reports can help. With a VA Blue Button report, you can view a customized report for a specific time frame and select the types of information you want from a long checklist of items. View your VA Notes, VA Radiology Reports, or VA Laboratory Results based on the date range you choose.

When selecting a custom date range for your [VA Blue Button](#) report using the calendar option, be sure to choose not just a month and year, but also the specific date. If no full and specific date is selected, it will not accept your request.



Finding your lab results

The easiest route to view, print, and download your VA Chemistry/Hematology test results is the [Labs and Tests](#) link right on My HealtheVet's Home Page. When choosing your desired lab test results, focus on looking for the date the test was done, rather than the specimen type. (Note that there may be more than one lab test completed on the same date).

Self-Entered Tests		VA Chemistry/Hematology	
Date	Test Name	Date	Specimen
Nothing found to display.		Thu 08/30/2018	Blood (substance)
		Tue 07/11/2017	Blood (substance)
		Mon 06/26/2017	Blood (substance)
		Mon 06/26/2017	Blood (substance)
		Wed 01/04/2017	Plasma (substance)

Add New View More>

View More>

No matter how you view them, remember that most lab test results become available three calendar days after a member of your health care team has verified them. With both VA Health Summary and VA Blue Button, you can view your lab test results online. Remember that a VA Health Summary will only include your ten most recent sets of lab tests from the last 24 months. Your VA Blue Button report can give you more VA lab results.

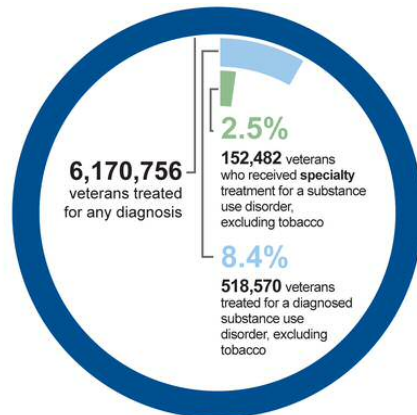
[Source: VA *myHealthVet* | December 3, 2019 ++]

VA Substance Abuse Treatment

GAO Report on How Vets Receive It at VHA Clinics

A newly released report by the U.S. Government Accountability Office looked at how veterans with substance use disorders receive treatment at Veterans Health Administration clinics. Six sites were selected, three in urban areas and three in rural areas. The VA in White River Junction was among those chosen. The sites are "among those with the highest percentages of veterans with an opioid use disorder diagnosis in fiscal year 2018," according to the report. According to the report, 724 veterans received "specialty substance use disorder services" in fiscal year 2018. The report showed that veterans sought services that differed between urban and rural areas with 27% of veterans with an opioid use disorder receiving medication-assisted treatment in rural areas, compared with 34% in urban areas.

The discrepancy points to lack of transportation and fewer specialized providers in rural areas, the study said. "Rural areas have sometime unique roadblocks to getting into treatment," said Linda Beasley Stone, program manager of residential recovery center at the White River Junction VA. The residential recovery center houses 14 veterans. "The smaller group atmosphere is, I just think it lends to a greater learning experience," said patient Ron Andrews. He hopes any veterans asking for help get it. "For someone that needs to get here it would be, I'm sure it would be appreciated," Andrews said. You can view the full report at <https://www.gao.gov/products/GAO-20-35>



Source: GAO analysis of Veterans Health Administration data. | GAO-20-35

[Source: Military.com | Richard Sisk | November 22, 2019 ++]

National AI Institute

Launched by VA to Advance Vets Health and Well-Being

The U.S. Department of Veterans Affairs (VA) established the National Artificial Intelligence Institute (NAII) for advancing the health and well-being of Veterans, as part of the commemoration of National Veterans and Military Families Month in November. The new NAII is incorporating input from Veterans and its partners across federal agencies, industry, nonprofits and academia, to prioritize and realize artificial intelligence (AI) research and development that is meaningful to Veterans and the public. “VA has a unique opportunity to be a leader in artificial intelligence,” said VA Secretary Robert Wilkie. “VA’s artificial intelligence institute will usher in new capabilities and opportunities that will improve health outcomes for our nation’s heroes.”

VA is an ideal environment for advancing AI technology to benefit Veterans. It is the most extensive integrated health care system in the country and is home to the Million Veteran Program – the world’s biggest genomic knowledge base linked to health care information. VA also serves as the nation’s largest training system for physicians and nurses. VA uses AI to reduce Veterans’ wait times, identify those at high risk for suicide, to help doctors interpret the results of cancer lab tests and to choose effective therapies. AI uses computers to simulate human thinking, especially in applications involving large amounts of data. It is also being leveraged in the commercial technology sector and is seeing early uses in health care.

NAII is a joint initiative between VA’s Office of Research and Development and Secretary’s Center for Strategic Partnerships. It will design, execute and collaborate on large-scale initiatives and national strategy, and build on the American AI Initiative and the National AI R&D Strategic Plan. [Source: VA Press Release | December 5, 2019 ++]

VA AI

Update 01: AI Enhancing VA’s Ability to Diagnose Illnesses



Artificial Intelligence and Machine Learning may sound like terms used strictly by computer engineers, but recent experiments by pathologists at the James A. Haley Veterans’ Hospital have shown they can also be used to help diagnose cancer, and possibly other health issues. The investigation looked at two AI platforms to see if they could use images of tissue samples to differentiate between normal or benign cells and cancerous cells. Those platforms are Apple Create ML and Google AutoML. They also wanted to see if the programs could tell the difference between three different types of cancer.

According to Dr. Andrew Borkowski, AI is anything a computer can do that is normally a task that requires human intelligence. Borkowski, JAHVH chief of Molecular Diagnostics Section, is one of the pathologists participating in the project. Machine Learning is a branch of AI where the computer learns from examples in order to make predictions. “A pretty basic version of this is that we try to teach the computer to differentiate between the cancer image and the

benign tissue image,” Borkowski said. “We did it for two of the most common cancers that are in our Veteran population, which are colon cancer and lung cancer.”

Using a microscope with an attached camera, Borkowski and his team photographed 1,250 different tissue samples mounted on slides and removed any personally identifiable information from them. Doctors collected samples during biopsies and other medical procedures. The samples included benign tissue and slides that indicated three different types of cancer. Those cancers are colon adenocarcinoma, lung squamous cell carcinoma and the doctors then input about 200 slides from the different classes into the AI computer programs to help them learn the differences between each type of cancer and healthy tissue. Fifty other slides from each class, unknown to AI network, were then used to test the systems, with surprising results.

“We did six experiments, and with most of the experiments we achieved an accuracy rate of 90 percent or higher,” Borkowski said. Dr. Stephen Mastorides added that the computer went beyond just identifying whether a slide was cancer or healthy tissue. Mastorides is chief of the JAHVH Pathology and Laboratory Service. “For distinguishing between benign tissue and cancer, between colon cancer and lung cancer, and between the two types of lung cancer,” Mastorides said. “The accuracy was over 90 percent for each of those things.”

They also tested whether the computer could tell if a specific mutation was evident in the colon cancer slides. The computer successfully identified the KRAS mutation about 70 percent of the time. That is still good. Pathologists typically need to do a molecular test in the lab to identify this particular mutation. Both computer platforms performed about the same in all the tests. Borkowski said it’s important to differentiate between the different cancers because each requires a different treatment regimen.

The test team is not settling for just these forms of cancer, though. It already is in the process of expanded AI testing with Dr. Narayan Viswanadhan from the radiology department. They are now training computers with images that include brain hemorrhages. That could eventually play an important role in the emergency department. “Right now, we’re going to be running a model and training the AI to see if it can diagnose the hemorrhages, which would be phenomenal,” Borkowski said. “Let’s say a patient comes to the emergency room and there’s no radiologist available right away. You can capture the (MRI) image, run it through the program and it says ‘Hey, here’s a brain hemorrhage, let’s do something.’”

While the accuracy of the AI diagnoses was very good, the intent is not to eventually replace doctors. Instead, the program gives them tools to improve quality and increase productivity, Borkowski explained. “Our ultimate goal would be to create programs that can be rolled out in the entire VA system so that pathologists who are working solo, or maybe there are two pathologists in some small VAs, would have the benefit of having something that is helping them become more productive, help them prioritize the workload and improve quality,” Borkowski said. “We see a huge future for AI in pathology, radiology, dermatology – any medical specialty that is dealing with images.”

Note: The results of the AI experiment were recently published in Federal Practitioner magazine and can be seen at

<https://www.mdedge.com/fedprac/article/209325/health-policy/comparing-artificial-intelligence-platforms-histopathologic>.

[Source: Vantage Point | Ed Drohan | December 6, 2019 ++]

VA Loan Limits

2020 | Down Payment Limits Removed

Members of the military on active duty and veterans hoping to buy a home in expensive parts of the country have a lot to be thankful for this holiday season. Starting next year, they’ll be able to take out Veterans Affairs–backed mortgages

as large as their bank accounts will allow. Thanks to the Blue Water Navy Veterans Act of 2019, veterans will be able to buy larger homes in pricier communities without having to put down a cent. However, they must still qualify for their mortgage and be able to afford the monthly payments. "It gives the veterans the opportunity to buy homes in the areas they want to be in," says Austin, TX-based real estate agent Kyle Reed, of Pauly Presley Realty, himself a veteran who served in Iraq from 2001 to 2006. "It opens up some areas in cities to VA loans ... that maybe veterans didn't have access to before without putting a bunch of money down."

Up until now, the size of a VA loan was capped at different amounts across the country. For example, borrowers could take out more in ultra-pricey cities like San Francisco than in Detroit, where homes cost a whole lot less. As long as they stayed within those bounds, they could get a mortgage with a 0% down payment. But if they exceeded those limits, they had to put down 25% of the difference. The change goes into effect Jan. 1, 2020. "There's not a lot of VA buyers who are buying these very high-dollar homes, but there are some," says mortgage lender Mike Villano of the Veterans Lending Group in Puyallup, WA, about 45 minutes south of Seattle. But "there's a lot of places where these folks go and serve, and it's very expensive."

The problem is that not all lenders are likely to be comfortable making huge loans without imposing a few restrictions of their own. The VA typically backs up to 25% of a VA loan. So banks, credit unions, and other loan makers are likely to set up some rules to protect against defaults. Some may require higher credit scores or debt-to-income ratios to qualify for the loans. And some lenders may even impose their own caps on how much money borrowers can take out.

In addition, mortgage lenders pointed out that the limitless loans will apply only to a borrower's primary home. That can be problematic for those on active duty, who might buy a home near their base, get stationed somewhere else, and then choose to buy a second home in that location while renting out the first. But if they already have a VA loan on another property, they can't get the full perks of the loan on a second one. This means they may be on the hook for a down payment or can qualify for only a smaller loan for their new abode. "It would really help a lot of families if they could retain their current home and still be able to purchase at their new duty station with no cap," says Villano. [Source: SF Gate | Clare Trapasso | December 4, 2019 ++]

VA AO Guam Rules

No policies Have Yet Been Crafted

Military Veterans Advocacy, a veterans advocate group base in Louisiana, is urging Secretary of Veterans Affairs Robert Wilkie to have the VA quickly create rules to compensate vets who served on Guam and Johnston Island and were exposed to Agent Orange. The request was first made a year ago. 'No policies have yet been crafted' "Last spring, MVA representatives met with Wilkie, who said he would look into the issue. Wilkie visited Guam in July, but no policies have yet been crafted or implemented to provide care to sick and terminally ill veterans with Agent Orange-related illnesses," MVA said in news release.

The organization has acquired and presented substantial evidence that veterans who served on Guam between 1972 and 1980, and on Johnston Island from 1972 to 1977, were exposed to toxins of Agent Orange, Cmdr. John Wells, the MVA lead attorney, said in the release. "Secretary Wilkie has that information. We understand that federal agencies require some time to implement policies and new rules, but our first request to Sec. Wilkie on this matter was on Dec. 3, 2018 – 366 days ago. Veterans are sick and dying and can't get proper benefits from the VA," he added. 'We're not going to stop advocating'

Last year, MVA won a landmark case against Wilkie, requiring the Department of Veterans Affairs to recognize the exposure of U.S. Navy personnel who served in the harbors and territorial seas of Vietnam. Wilkie placed an administrative stay order on implementation of that recognition, the MVA stated. "More and more, it seems the VA's policy is to **stall long enough so that all affected veterans die**," MVA Executive Director Col. Rob Maness said in

the release. "We're not going away, and we're not going to stop advocating for these veterans." Brian Moyer, a veterans advocate and founder of Agent Orange Survivors of Guam, was on island in October to help local and federal officials find sampling sites for traces of the herbicide. Preliminary results from that sampling are anticipated to come in January 2020. [Source: The Guam Daily Post | John O'Connor | December 9, 2019 ++]

VA Gambling Addiction Center LVR3 Opens in Las Vegas

VA's Southern Nevada Healthcare System is proud to announce the grand opening of the Las Vegas VA Residential Recovery and Renewal Center (LVR3). It's only the second residential gambling addiction recovery center in the nation. LVR3 is a 30- to 45-day substance use and gambling residential treatment program. It is a 20-bed facility, with a separate wing with five rooms for female Veterans. The center provides research-based, high quality interventions to help residents:

- Help learn about addiction and triggers and developing a sustainable relapse-prevention plan.
- Develop individualized and person-centered recovery plans.
- Provide a whole health approach to help improve emotional, physical and mental health.
- Assist residents choose, access and use community and social supports.

This is the VA's first residential program in Southern Nevada. As a result, "there is definitely a great need for this here in Las Vegas," said LVR3 Program Manager Roxanne Untal. "Gambling and substance abuse already exist here. It's important that we are responsive to that when problems arise for our Veterans. The biggest goal is to provide residential care for Veterans when more intensive care is needed than what they would receive in outpatient treatment." "This facility fills a gap in our mental health continuum of care," said Tim Jobin, chief of Behavioral Health. "The staff has dedicated countless hours of planning, mindfulness and reviews to make this happen here today. This is a great day for Veterans."

Treatment at LVR3 includes daily activities. Recreational therapists provide instruction in exercises like archery, horseback riding and yoga. LVR3 also provides a staff attendant who is available 24/7. Veterans interested in a referral for the LVR3 can talk to their primary care provider or can take advantage of the same-day mental health service. "One of the biggest services we offer is the same-day walk-in service for mental health care," said Dr. Untal. "Even if you aren't an enrolled Veteran yet, if this is something you need to address, come on in. Any licensed provider can put in a consult, and we are doing quick turn-arounds for screening them for admission." [Source: Vantage Point | John Archiquette | December 10, 2019 ++]

VA Fraud, Waste, & Abuse Reported 01 thru 15 DEC 2019

Miami & W. Palm Bch. FL -- Fifteen South Florida residents have been charged by federal authorities in connection with a kickback and bribery scheme involving employees and vendors of U.S. Department of Veterans Affairs (VA) Medical Centers located in West Palm Beach and Miami, Florida. Court filings allege that in exchange for cash bribes and kickback payments, medical center employees, using government credit cards, ordered medical and other hospital supplies through corrupt vendors. In some cases, the prices of the supplies were grossly inflated, while in other cases the orders were only partially fulfilled or not fulfilled at all.

U.S. Attorney Ariana Fajardo Orshan for the Southern District of Florida stated, "It is a very sad day when public employees are alleged to have violated their duty to provide honest services to the VA, a federal agency that furnishes

critical medical services to our military veterans. These charges do not reflect the hard work and integrity of the hundreds of thousands of law abiding VA employees throughout the United States. Together, alongside our VA partners, we will continue to protect our federal programs, combat public corruption, and ensure that our veterans receive the care and quality services that they are owed.”

Michael Missal, Inspector General, and David Spilker, Special Agent in Charge at the VA Office of Inspector General (OIG) stated, “VA OIG will vigorously investigate alleged instances when government employees unjustly enrich themselves by soliciting and accepting bribes and kickbacks from vendors for preferential treatment. The defendants’ actions, as alleged in the indictments and informations, breach the public trust, undermine the integrity of VA’s operations, and tarnish the important work that honest VA employees do every day in support of our nation’s veterans.”

West Palm Beach VA employees **Clinton Purvis**, 52, of West Palm Beach, **Christopher Young**, 44, of West Palm Beach, and **Kenneth Scott**, 59, of Riviera Beach, as well as former West Palm Beach VA employee **Robert “Bob” Johnson**, 62, of West Palm Beach, were charged in a single indictment with offenses that include conspiracy to commit health care fraud, substantive counts of health care fraud, and bribery. Miami VA Medical Center employees **Waymon Melvon Woods**, 58, of Miami, **Don Anderson**, 59, of Port St. Lucie, **Jose Eugenio Cuervo**, 53, of Miramar, **Donnie Shatek Hawes**, 35, of Cutler Bay, and **Robert Lee James Harris**, 44, of Miami Gardens, as well as former employee **Eugene Campbell**, 60, of Miami Gardens, were each charged in separate indictments with bribery offenses. VA supply vendors **Jorge Flores**, 45, of Delray Beach, **Earron Starks**, 49, of Hallandale Beach, **Carlicha Starks**, 40, of Hallandale Beach, and **Robert Kozak**, 73, of Boca Raton, have been charged in criminal informations with conspiracy to commit health care fraud. Separately, **Lisa M. Anderson**, 48, of Delray Beach, has been charged with making false statements in connection with an application filed with the VA to have one of the vendor companies falsely designated as a Service Disabled Veteran Owned Small Business.

According to the facts alleged in the indictments and criminal informations, the charged employees worked in logistics departments of the West Palm Beach and the Miami VA Medical Centers and were responsible for ensuring that medical and other hospital supplies were purchased and received. It is alleged that at the West Palm Beach VA, Purvis, Johnson, and Scott would place orders for supplies with the complicit vendors that were either fictitious or contained inflated quantities. The vendors would then invoice the VA for the fictitious or inflated orders. Purvis, Johnson, and Scott would authorize the payment of VA funds to the vendors, who would then kick-back a portion of the proceeds to Purvis, Johnson, and Scott. Purvis and Johnson paid a portion of those proceeds to Young, in exchange for his agreement to falsely enter the supplies as having been received in the VA computer system. At the Miami VA Medical Center, Campbell, Woods, Anderson, Cuervo, Hawes, and Harris each accepted cash bribe payments in exchange for placing orders for supplies with Flores’ and Earron and Claricha Starks’ companies. As a result of these schemes, the defendants caused the U.S. Department of Veterans Affairs to pay millions of dollars for inflated or unfulfilled purchase orders.

Indictments and criminal informations are charging instruments containing allegations. A defendant is presumed innocent unless and until proven guilty beyond a reasonable doubt in a court of law. These cases were investigated by Special Agents of VA OIG and are being prosecuted by Assistant U.S. Attorneys Roger H. Stefin and Amanda Perwin.

-o-o-O-o-o-

In November of this year, the Justice Department announced the formation of the new Procurement Collusion Strike Force (PCSF) focusing on deterring, detecting, investigating and prosecuting antitrust crimes, such as bid-rigging conspiracies and related fraudulent schemes, which undermine competition in government procurement, grant and program funding. The PCSF is an interagency partnership, including the U.S. Attorney’s Office for the Southern District of Florida and federal law enforcement partners.

To learn more about the PCSF or how to report suspected criminal activity affecting public procurement, please visit <https://www.justice.gov/procurement-collusion-strike-force> . Anyone with information concerning anticompetitive conduct involving federal taxpayer dollars is encouraged to contact the PCSF directly by emailing

pcsf@usdoj.gov . Related court documents and information may be found on the website of the District Court for the Southern District of Florida at www.flsd.uscourts.gov or at <http://pacer.flsd.uscourts.gov>. [Source: DOJ So.Dist. of FL | U.S. Attorney’s Office | December 11, 2019 ++]

-o-o-O-o-o-

Cordova, TN – An Air Force veteran was sentenced in a Raleigh federal court after committing fraud and stealing benefits from Veterans Affairs. **Bryan Paul Winqvist**, 39, of Cordova, Tennessee was sentenced to one month of intermittent confinement and nine months of house arrest as terms of a three year period of probation on a charge of theft of government property, according to the U.S. Department of Justice. Court documents said Winqvist was also ordered to pay a \$3,100 fine and \$11,669.06 in restitution to the United States Department of Veterans Affairs (VA).

“To commit a fraud upon the VA is to steal from those who have risked their lives to protect this nation. The limited funds available to the VA are critical to meeting the needs of those who have faithfully served our country and this office will continue to hold accountable all who obtain veterans benefits through fraud and deception. In this case, the defendant completely fabricated a battlefield incident, and injury and falsely claimed to have received a commendation as a result of that incident. Then, adding insult to injury, he stole the benefits and services due to those who have served and been injured. His conduct is shameful, illegal and an affront to those who have served honorably and with distinction and to those who bear the scars of defending this county,” said U.S. Attorney Robert Higdon Jr.

The VA affords disability compensation to veterans for injuries and illnesses that are service-connected, that is, for conditions incurred or aggravated during military service. To receive disability compensation, a veteran must file a truthful claim alleging specific facts justifying the service-connected nature of the claimed disability. Prosecutors say on or about March 22, 2014, Winqvist submitted a claim to the VA alleging that he suffered from Post-Traumatic Stress Disorder (PTSD) arising from a service-connected incident. The claim falsely alleged that on September 18, 2003, Winqvist was on patrol in the town of Balad, Iraq, as an augmented medic/EMT for an army infantry unit. The claim further alleged that while serving in this unit that he was hit with shrapnel from an improvised explosive device (IED) and was shot in the left shoulder during a small-arms firefight. Prosecutors say Winqvist further claimed to have “neutralized the threat and continued to assist in the firefight and treat those who were injured.”

As a result of these events, he claimed to have received the Military Order of the Purple Heart. The VA Office of Inspector General confirmed that Winqvist knew at the time of his March 2014 claim that he was not injured by an IED or shot in a small-arms firefight in Iraq. A fellow fireman did not recall Winqvist ever going off base on patrol and also never knew of any small arms fire or injuries to Winqvist, prosecutors say. Likewise, VA OIG contacted the Air Force Historical Society to query records concerning an alleged IED and firefight incident at the place and time claimed. There was no record of the incident and Winqvist was not a recipient of the Purple Heart. Nevertheless, Veterans Affairs began paying out benefits to Winqvist under the auspice that he suffered from PTSD from the alleged firefight in Iraq.

Winqvist received the benefits by withdrawing them from his bank account in various locations. Prosecutors say Winqvist did not try to return the funds or acknowledge that he 5 AUG. [Source: CBS17.com | Digital Desk | December 12, 2019 ++]

* Vets *



Veterans at CIA

Have Always Played an Important Role | You Could Also

Veterans of the United States Armed Forces have always played an important role at the Central Intelligence Agency (CIA). Take CIA's predecessor organization, the Office of Strategic Services (OSS), for instance. Founded by President Franklin Delano Roosevelt at the outset of World War II—and in the aftermath of the Japanese attack on U.S. naval forces at Pearl Harbor—the OSS began its life as a wartime body tasked with mandates to collect and analyze strategic information and to conduct unconventional and paramilitary operations.

At its peak, OSS employed almost 13,000 people: Two-thirds of the workforce was U.S. Army and U.S. Army Air Forces personnel. Civilians made up another quarter, and the rest were from the U.S. Navy, Marines and Coast Guard. At the helm of OSS was World War I hero, [General William "Wild Bill" Donovan](#). The story of CIA begins—and continues—alongside those of the U.S. military and its Veterans.

Today, Veterans comprise nearly 15% of CIA's workforce, and they continue to serve alongside their military partners across the globe. CIA, the broader Intelligence Community, and the American people benefit tremendously from the insight and impact of Veterans who bring to their work a wealth of experience and knowledge. They are mission-focused from day one and equipped with the skills CIA is looking for in its officers. Veterans often come into the building with the overseas experiences, clearances and foreign languages that allow them to dive right into the action. A rich history of close collaboration between the military and CIA makes for a smooth transition from military to civilian service. While CIA is not a military body, its officers share that same commitment to mission and service. Veterans will find a familiar enthusiasm in the air at CIA headquarters in Langley, Virginia.

CIA is committed to the continued developing relationships with Veterans, and in May of 2013, it chartered the American Veterans Employee Resource Group (AVERG) to serve as a link between the Veteran workforce and Agency leaders. The group is committed to goals that include the hiring and retention of Veterans, education and engagement on Veteran matters, continued career development and frequent community networking opportunities. AVERG offers Veterans an important link to Agency leadership—one that ensures CIA's continued investment in Veterans and the unique perspectives they bring to an important mission.

Every day CIA honors the commitment of its Veterans who continue to serve and continue the fight in defense of freedom. Are you a Veteran interested in continuing your service with the CIA? Visit our website www.cia.gov to learn more about [transitioning from the military](#) and CIA's many [career opportunities](#). [Source: Vantage Point | November 17, 2019 ++]

Vet Hunger

One Out of Four Female Veterans Struggle with Hunger



Our nation’s Veterans fought for our freedom. They shouldn’t have to wonder where their next meal will come from. In 2018, the U.S. Department of Agriculture found that 14.3 million U.S. households did not have [consistent access to food](#) that year. Studies have shown women Veterans are more likely to struggle with hunger than male Veterans. As many as 27.6% of women Veterans suffer. To put things in perspective, in one study of women Veterans using 12 VA hospitals, one out of four [women Veterans](#) reported lacking the money or other resources to reliably feed themselves or their loved ones.

To address this issue, the Veterans Health Administration (VHA) began screening Veterans for hunger in 2017. From 2017-2018, VHA has screened more than 3 million [Veteran patients](#) and either connected those in need to social workers who can help or to nutrition safety net programs. VA can connect Veterans to programs such as the [Supplemental Nutrition Assistance Program](#) (SNAP), the Special Supplemental Nutrition Program for [Women, Infants, and Children](#) (WIC), and emergency food sites, such as food banks and pantries. Between 2015 and 2017, SNAP helped [1.4 million Veterans](#) put food on the table. For help, contact your [local VA Medical Center](#) to get connected to the resources you need. And if you are a woman Veteran, ask your local VA Medical Center for the Women Veterans Program Manager. [Source: Vantage Point | Hans Petersen | December 4, 2019 ++]

Vet Toxic Exposure | Palomares Spain

Update 03: VA Lawsuit another Step Closer

An appeals court on 6 DEC ruled that elderly disabled veterans who were exposed to ionizing radiation while cleaning up a 1966 nuclear bomb disaster in Spain are eligible to sue for disability benefits for their related illnesses in a class action suit. The U.S. Court of Appeals for Veterans Claims issued a 6-3 decision in the case Skaar v. Wilkie certifying the class of veterans, who have been denied disability benefits for illnesses they have suffered as a result of their service in Palomares, Spain. About 1,600 veterans deployed there after a B-52 Stratofortress bomber collided in mid-air with a refueling tanker and crashed. Four hydrogen bombs were released, and two exploded conventionally, littering the countryside with radioactive plutonium dust.

Veteran Victor Skaar, a retired Air Force chief master sergeant who participated in the cleanup, filed the case against Veterans Affairs Secretary Robert Wilkie. After serving in Palomares, Skaar later developed the blood disorder leukopenia and believes his radiation exposure caused it, the court said in its decision. Air Force radiation dose estimates found his level of exposure was far below the level that would have been required to cause his disability, and the Board of Veterans Appeals denied his claim that his disability was connected to his service.

“For more than 50 years, the VA has denied Palomares veterans benefits for our service recovering, detecting and removing 5,400 drums of radioactive contamination at Palomares,” Skaar said in a release from the Veterans Legal Services Clinic at Yale Law School, which represents both him and the class. “I am happy that the court’s opinion means I can continue to fight for recognition alongside my fellow Palomares veterans, many of whom are too ill to fight on their own, and their widows. I have been fighting this battle since I was 45 years old and am hopeful that the court’s decision will finally allow me, at the age of 83, to receive benefits for my numerous radiation-related illnesses, including cancer.”

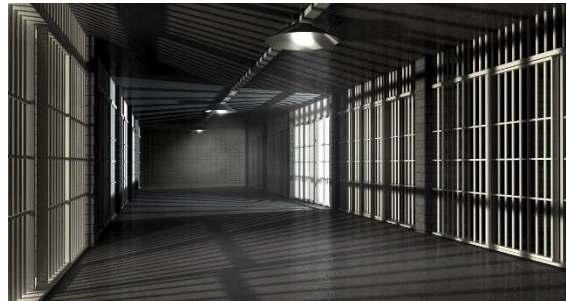
It is the first time the veterans claims court has certified a class action suit from a direct appeal from the VA benefits system. The court did not rule on Skaar’s claim that his disability is, in fact, service-connected, but found the veterans satisfied the requirements for class certification used in other federal courts. “Our decision today heralds the beginning of an era in which we will entertain, but by no means always certify, class actions in the first instance, making us the only federal appellate court in the nation to do so,” Judge Michael Allen wrote in the court’s majority opinion. Our “nation’s veterans deserve no less.”

The Vietnam Veterans of America and the environmental group Friends of the Earth applauded the decision, as did Sen. Richard Blumenthal, D-Conn. “The Palomares nuclear disaster — one of the largest in history — caused untold suffering and pain to the men and women in uniform sent to the clean-up,” Blumenthal said. “This ruling represents one more step forward in the fight to provide these veterans and their families the health care and benefits they deserve. I commend the diligent efforts of the Yale Veterans Legal Services Clinic in this litigation and will continue to advocate for passage of the Palomares Veterans Act, providing veterans with statutory presumption that their illnesses and diseases are caused by their exposure to radiation at Palomares.” [Source: MilitaryTimes | Stephen Losey | December 9, 2019 ++]

Vet Incarceration

Update 02: “The Barracks” Opens in Georgia

One of Georgia’s largest counties has created a special jail unit just for military veterans. “The Barracks” is aimed at giving veterans behind bars a better chance of success when they’re released, The Atlanta Journal-Constitution reported. Gwinnett County’s program joins a broader trend of finding creative ways to help veterans caught up in the justice system. It is among more than 120 U.S. prisons and jails that have separate cellblocks dedicated to military veterans, according to the National Institute for Corrections. Most of them have been added in recent years. Gwinnett County’s program launched in November, and it’s still getting ramped up. There will soon be extra programs and services to help incarcerated veterans, the newspaper reported.



“I think it shows that my country does care about me,” said inmate Jack Cleveland, who was in Marine Corps basic training when the Twin Towers fell. He worked on aircraft and served his country in a time of war. “This place is a blessing,” said another inmate, Shane Smith, who served in the Army infantry during Desert Storm. The Barracks was the brainchild of Chief Deputy Lou Solis, a retired Army Ranger who joined the Gwinnett County Sheriff’s Office about two years ago. “While some veterans go on to make less honorable choices later in life, their contributions to our national security are no less valuable,” Solis told the newspaper. “We are committed to helping these veterans get their lives back on track by creating a program to provide them with resources to increase the likelihood they won’t return to jail once they’re released.” [Source: The Associated Press | December 01, 2019 ++]

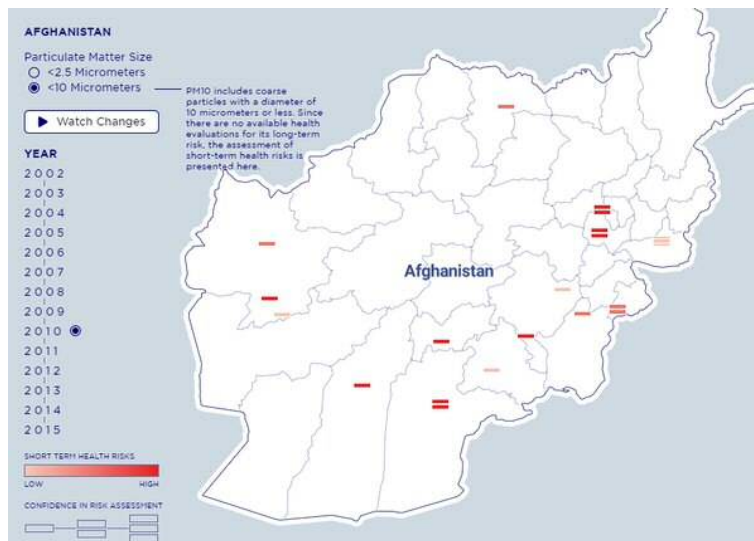
Burn Pit Toxic Exposure

Update 72: Maps to Help Figure Out Your Exposure Risk

Though the Pentagon has acknowledged the risks posed by breathing fumes from burn pits used to dispose of trash downrange, it can be difficult for service members and veterans to [get care](#) based on the time they spent around them. A pilot project from the Center for a New American Security and the Wounded Warrior Project aims to help troops connect those dots. Using the Defense Department’s own records, a team put together [two maps](#), broken down by

location, time period and types of particulate matter recorded. Veterans can pinpoint their potential exposure based on their past deployments, look up those documents and share them with their medical providers.

“While these files do exist — [they are available](#) and folks can go and download them and look — for the layperson to be able to know that these files are there and know what to pore through would be difficult,” Kayla Williams, a former Army linguist and director of the Military, Veterans, and Society Program at the Center for a New American Security, told reporters 4 DEC. The maps show particulate tests of both less than 2.5 micrometers and between 10 and 2.5 micrometers, measured at different sites across the countries over a period of years. The shade of red at each site indicates the short-term health risks evaluated.



Example heat map, based on data from Defense Department Periodic Occupational and Environmental Monitoring Summary documents, shows burn pit risks in Afghanistan during 2010. Go to <https://www.cnas.org/publications/reports/periodic-occupational-and-environmental-monitoring-summary> and click the year you are interested in for Afghanistan, Iraq, and Kuwait

The maps shouldn't be taken as gospel, Williams said, because DoD hasn't done a thorough job documenting exposure to the tiny particles and vapor droplets launched into the air by burning food, equipment and other refuse in open pits. You can tell the Pentagon's level of confidence in those calculations based on how many dashes are used to indicate each site. "... we do caution that, again, the information as it's currently available is simply inadequate for most locations," Williams said.

The pilot ended up having two purposes, in effect: It sought to create a heat map of potential risks, but it also concluded that DoD **did an insufficient job** of cataloging those risks in the first place. "So, somebody like me – I personally was in Iraq in 2003," Williams said. "There's some information here on the short-term health risks I may have been exposed to – much less on the potential long-term health risks. Virtually no information is here."

According to the report, the Periodic Occupational and Environmental Monitoring Summary files are sketchy at best. Because over half of the summaries available didn't have enough data in them to determine risks, either in the short or long term, Williams said, only a small sampling of burn pit sites in Iraq, Kuwait and Afghanistan could be included on the maps. "Inconsistent collection, assessment, and presentation of available data seriously weakens the potential utility of the POEMS files as the primary source of information on toxic exposures," according to the study's executive summary. For example, the POEMS generally noted higher risks in locations where the most samples had been taken, begging the question: If more samples had been taken at other, "lower risk" sites, would their risk factors also shoot up?

So while veterans can use the heat maps to track down the specific risk assessments for their stints downrange and share those with a doctor, according to the study, the documents should not be cited as a source to deny anyone's

claim of toxic chemical exposure. There are still nine burn pits officially in use, one in Afghanistan and seven in Syria, according to a July report from the Pentagon. And they will continue to be used in places that lack infrastructure for traditional trash disposal. “Open burning remains a field expedient alternative to reduce waste volume and protect troops from disease,” the report said. [Source: MilitaryTimes | Meghann Myers | December 4, 2019 ++]

Vet Jobs

Update 257: 7 More Occupations That Are a Good Fit

Following is a look at some more of the jobs in which skills honed in the military can be a real asset. Data on median pay and projected job-growth rates are from the U.S. Bureau of Labor Statistics.

8. Medical assistant

- Median annual pay as of 2018: \$33,610 per year
- Projected job growth rate from 2018 to 2028: 23%

Check out that 23% projected growth rate for [medical assistant](#) jobs! Workers in these positions perform administrative and clinical tasks in health care settings, and some are even able to enter the occupation with a high school diploma, picking up the skills needed through on-the-job training. As with other medical positions, a good place to start is with health care organizations, such as HCA Healthcare, which focus specifically on veteran recruitment.

9. Teacher

- Median annual pay as of 2018: \$60,320 per year for [high school](#) teachers; \$57,980 for [kindergarten and elementary](#) school teachers
- Projected job growth rate from 2018 to 2028: 4% for high school teachers; 3% for kindergarten and elementary school teachers

This familiar bumper sticker slogan gets it right: “If you can read this, thank a teacher.” And, with the right training, leadership and communications skills learned in the military can translate into a teaching position. Numerous programs exist to help veterans step in front of their own classrooms, including [Troops to Teachers](#) and [Teach for America’s Military Veterans Initiative](#). To learn more about how much you could earn in this line of work, check out “[Here’s How Much Teachers Are Paid in Every State](#).”

10. Food preparation or serving jobs

- Median annual pay as of 2018: \$23,730 per year
- Projected job growth rate from 2018 to 2028: 8%

The chow may be better once you’re out of the military, but someone still has to prepare and serve it, and that work doesn’t change much from military base to trendy bistro. Plus, the flexible hours that [food preparation](#) jobs offer may allow veterans and their families to shift their schedules to care for children or attend school.

11. Material-moving machine operator

- Median annual pay as of 2018: \$35,850 per year
- Projected job growth rate from 2018 to 2028: 4%

The military, like the civilian world, will always have a need for those who are capable of moving people and items from one place to another. According to the [Bureau of Labor Statistics](#), one of the most common military occupations is transportation and material-handling, service members who transport military personnel and cargo. Specific jobs in that field, like cargo specialist, may include work similar to the civilian job of [material-moving machine operators](#).

12. Truck driver

- Median annual pay as of 2018: \$43,680 per year
- Projected job growth rate from 2018 to 2028: 5%

[Truck drivers](#) keep the engines of commerce humming, delivering everything from car parts to groceries. And while the vehicles may be different, driving skills sharpened in the military are directly useful back in civilian jobs. [Troops Into Transportation](#) seeks to train veterans to qualify for their commercial driving licenses and get out on the road.

13. Heating, air-conditioning and refrigeration equipment mechanic and installer

- Median annual pay as of 2018: \$47,610 per year
- Projected job growth rate from 2018 to 2028: 13%

The projected need for heating, air conditioning and refrigeration equipment [mechanics and installers](#) over the next decade is in the double digits. Veterans who worked in mechanical-repair positions while in the service should find their skills translate well to these jobs. But even without that background, [training programs](#) at technical and trade schools and community colleges can help prepare you. The [Troops to Trades program](#) helps veterans train for and find work in this industry, too.

14. Automotive service technician or mechanic

- Median annual pay as of 2018: \$40,710 per year
- Projected job growth rate from 2018 to 2028: minus 1%

Many [military jobs](#) involve work as a vehicle or machinery mechanic. Although, in the civilian world, employees are more likely to work on a Toyota than a tank, the skills learned in military service should transfer well to positions as automotive service [technicians and mechanics](#). General Motors, for one, offers free [web-based training](#) to qualified veterans who are interested in technical or non-technical jobs at GM car dealerships.

[Source: MoneyTalksNews | Gael F. Cooper | November 1, 2019 ++]

Vet Jobs

Update 258: Confidence Boosters for Transitioning to a Civilian Career

Transitioning from military service to a civilian career comes with a host of emotions — excitement, hope and perhaps some uncertainty, especially in the wait for job offers. As you establish your “new normal” and move into [new civilian career](#) at VA or with another employer, maintaining a self-care routine can make that shift easier. Here are seven ways to boost your confidence as you transition from military to civilian employment.

1. **Check in with your friends.** During your military career, you built a support system of contacts, and some of them may have already transitioned to a civilian career. Get talking! Opening up about your experiences solicits stories from other service members who made the move. Gain confidence knowing that you are not alone and learn strategies and tactics from others. Let friends know you’re building a job-search network and help them make valuable connections on your behalf.
2. **Keep an exercise routine.** In general, physical activity is great for our health. But in times of transition, it’s even more important to care for your physical and mental health. Exercise boosts your mood and gets you out of the house. Consider trying out a new sport or fitness class. Need to join a gym? Check out your local [YMCA](#), which may partner with the area VA facility to offer special services and rates for Veterans. You never know who you might meet on the other end of the weight bench.
3. **Attend military transition classes.** The U.S. Department of Defense’s [Transition Assistance Program](#) (TAP) offers military transition classes at every military installation, online and at other locations such as VA offices. TAP classes begin during your last year of service — after you have an identified separation plan. The program includes group classes particular to each service branch, briefings from VA and other agencies with Veteran programs, and job and transition counselors who can work with transitioning service members individually.

4. **Find a mentor.** We all benefit from hearing stories from folks who have paved the way ahead of us. A mentor is a great resource in any job search, and especially for service members transitioning to civilian careers. Find someone who shares your values and have a clear idea of what you want to get out of the relationship. If you don't have an ideal candidate in your network, search online for Veteran mentor matching programs like [Veterati](#).
5. **Seek out VA services.** VA has you covered! We know the value of hiring Veterans and have many programs available to transitioning military service members. VA works with DoD to create TAP classes and briefings. VA for Vets aids transitioning members seeking post-service jobs. And through VA Careers, Veterans can identify themselves in the application process and get support from VA throughout the [hiring process](#).
6. **Leverage online resources.** There's a multitude of online resources available to transitioning service members. You can find trainings, job boards, employers who specialize in hiring Veterans, mentoring resources and online chat help. VA Careers' [Transitioning Military Personnel](#) page and TAP are good places to start.
7. **Volunteer your time.** If job offers don't come right away, giving back is a great way to make new connections and establish yourself in the community. Volunteer in a field that's similar to your chosen career path to get experience and build your resume. Many volunteer organizations like [Habitat for Humanity](#), which builds homes for homeless families, have programs for Veterans that serve Veteran families. Your local VA facility may also have volunteer opportunities.

Choose a VA career today

Start your next mission at VA or another employer using these self-care tips and other confidence-boosters.

- LEARN about post-military VA careers in the [transitioning military flyer](#) (pdf).
- EXPLORE how to [transition to a VA career](#).
- CONNECT with your transition benefits through DOD's [Transition Assistance Program](#).
- SEARCH VA careers at [VAcareers.va.gov](#).
- CONTACT a [VA recruiter](#) to see what VA Careers may be a good fit for your job transition.

[Source: MoneyTalksNews | Gael F. Cooper | November 1, 2019 ++]

Vet Jobs

Update 259: In NOV 310,000 Vets Nationwide Looking For Work

Veterans unemployment rose again in November even as the national jobless rate decreased slightly, with about 35,000 more veterans reporting problems finding work than the month before. On 6 DEC the Bureau of Labor Statistics announced the veterans unemployment rate rose from 3.0 percent in October to 3.4 percent in November. The rise among veterans of the Iraq and Afghanistan wars era was even larger, jumping from 3.5 percent to 4.7 percent. The estimates translate into about 310,000 veterans nationwide looking for work, a figure that has fluctuated throughout the year. In the first half of 2019, the BLS estimates on veterans unemployment were below 3.0 percent for four consecutive months, but have risen slowly since then.

The national unemployment rate fell to 3.5 percent in November, matching its lowest mark of the year. Employment experts have cautioned against focusing too closely on monthly changes in unemployment for sub-groups within the Labor Department's surveys of American workers, because small changes in sample sizes can produce significant moves in the numbers. And even with the rise in overall veterans unemployment, November marked the 19th month in a row that veterans unemployment has been lower than the national rate. That figure hasn't been above the national civilian rate since December 2016. About 8.9 million veterans are in the American workforce today, according to BLS

estimates. About 9.5 million veterans are out of the labor force, either because of age or injuries. [Source: MilitaryTimes | Leo Shane III | December 6, 2019 ++]

WWII Vets 211

Boris Stern | Normandy Invader



Boris Stern was the son of Russian immigrants who lived in Chicago, Illinois. After graduating from high school in January 1943, he attended the Armour Institute of Technology. Many of his friends were being drafted due to the war, so Stern enlisted in the Army Aug. 12, 1943. He was inducted into the Army at Fort Sheridan, Illinois, for basic training, initially to become an engineer after returning to school. However, at the end of basic training, Stern traveled to Fort Benning, Georgia, for infantry training and did not return to school. In April 1944, he went to Camp Atterbury in Indiana and served with the 106th Infantry Division. The 106th later sailed from New York on the Royal Mail Ship Aquitania, arriving in Scotland in October 1944. Stern transferred to the 424th Infantry Regiment 6 DEC, which deployed to Normandy in France to join in the Rhineland Campaign and cross into Belgium.

Stern's regiment entered Prum, Germany on the Luxembourg border on 12 DEC. He later served with the 2nd Battalion headquarters in Winterspelt and promoted to staff sergeant. In Winterspelt, he oversaw food and ammunition supplies for the companies and performed guard duty. On 16 DEC, the Germans shelled Winterspelt during the start of the Battle of the Bulge. Stern helped defend against German mortars, creating roadblocks in Winterspelt for the evacuation of the battalion headquarters and retrieving supplies from St. Vith, Belgium, despite heavy fire from Germany panzer units. He also acted as a battalion interpreter since he spoke some German and Yiddish.

Stern was near Bingen am Rhein near the Rhine River when the Germans surrendered. After the war, Stern returned to Chicago, and after moving to Florida, he participated in local Veterans' commemorations events. Frenchman Jean Paul Mandier found Stern's dog tags Dec. 23, 2017, in Normandy, buried on the beach Stern's regiment landed on in October 1944. In June 2018, Stern returned to France to participate in the D-Day commemoration ceremonies and formally meet Mandier. Stern lives in Tampa Bay, Florida, with his family. He celebrated his 94th birthday Oct. 24. Thank you for your service! [Source: Vantage Point | Sarah Concepcion | November 21, 2019 ++]

WWII Vets 212

Joe Beyrle | US Paratrooper who Served in a Soviet Tank Battalion

Joseph Robert Beyrle was born on August 25, 1923, in Muskegon, Michigan. In 1942, he graduated from high school with a scholarship to the University of Notre Dame. Instead, Beyrle enlisted as a paratrooper with the 506th Parachute Infantry Regiment of the 101st Airborne's "Screaming Eagles" division. There he earned him the nickname, "Jumpin' Joe as he would often take the place of his fellow paratroopers and do their jump for them. Beyrle specialized in radio communications and demolition. Prior to the invasion of France, he was stationed in Ramsbury, England where he

undertook further training. Having completed two covert jumps into Nazi-occupied France to deliver gold to the French Resistance, he then participated in the D-Day Landings on June 6, 1944. Sergeant Joseph Robert Beyrle in Ramsbury, England, 1943.



Beyrle's airplane came under heavy enemy fire over the Normandy coast, and they were forced to bail out. Landing in Saint-Côme-du-Mont, he became separated from his regiment but nevertheless succeeded in blowing up his target, a power station. He continued his sabotage operations until he was captured by German soldiers several days later. Meanwhile, as Beyrle's dog tags had been found his family was informed he had been killed in action. Back in Muskegon, the papers listed the date of his death as June 10, 1944, and a funeral mass was held in his honor. Sent to a POW camp, Beyrle was eventually allowed in October to send his parents a postcard to let them know he was alive and well, albeit in a German prison. Beyrle was sent to seven different prisons over the following months. He escaped twice but was recaptured each time.

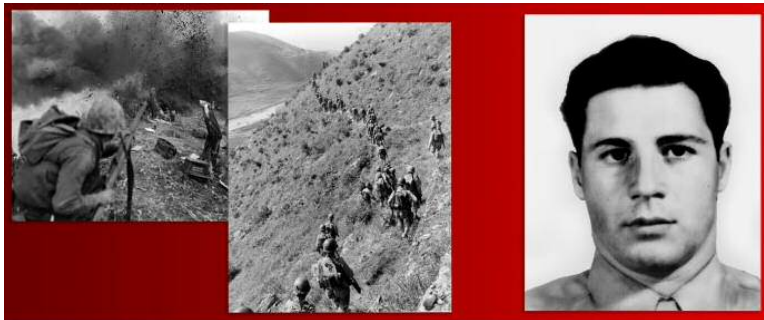
On his second escape attempt, he and several others accidentally boarded a train headed for Berlin. They were caught and handed over to the Gestapo – the German Secret State Police. The Gestapo decided the best way to deal with Beyrle was to shoot him as a spy. Surprisingly, German officers intervened claiming the Gestapo had no jurisdiction over POWs. He was then sent to Stalag III-C POW camp in Alt Drewitz (now) in Poland. Again escaping in early January 1945 he headed east to where, according to prison rumor, the Soviets were advancing deeper into Poland. Fortunately, the rumors were correct.

Beyrle came upon a tank brigade under the command of Captain Aleksandra Grigoryevna Samusenko of the 1st Guards Tank Army. She was the first female Soviet tank commander and a decorated veteran of the Battle of Kursk (July 1943) and the Lvov-Sandomierz Offensive (July – August 1944). Beyrle raised his hands waving a packet of Lucky Strike cigarettes and shouted, “Amerikansky tovarishch” American comrade. Thankfully, the political commissar spoke English, and Beyrle asked if he could join them in the fight to defeat Hitler. Beyrle spent the next three weeks with a Soviet tank battalion where his demolition expertise made him valuable and appreciated.

In the last week of January, the 1st Guards liberated Beyrle's former prison – the Stalag III-C camp. In combat in February Beyrle was injured during a raid by German Stuka dive bombers and he was sent to a Soviet hospital for treatment. There Beyrle came to the attention of Soviet Chief of General Staff Georgy Konstantinovich Zhukov who provided him with papers enabling him to travel to Moscow and present himself to the American embassy. It took the officials a while to believe him, but once his fingerprints confirmed his identity, he returned home to Michigan in April 1945. Two years later, he was married in the same church and by the priest who had performed his funeral mass. His son, John Ross Beyrle was born on February 11, 1954, and became the US ambassador to the Russian Federation from 2008 until 2012. In 2010, he attended an exhibit in Moscow's Stroganov Palace called “A Hero for Two Nations” which honored his father. [Source: <https://www.warhistoryonline.com/world-war-ii/us-paratrooper.html> | Shahan Russell | Nov 27, 2017 ++]

Korean War Vets

Joseph Vittori | Medal of Honor Recipient



Joseph Vittori was born 1 August 1929 in Beverly, Massachusetts, where he attended high schools and worked on his father's farm until 4 October 1946, when he began a three-year enlistment in the Marine Corps. He completed recruit training at Parris Island, South Carolina, in December 1946, served briefly at the Norfolk, Virginia, and Brooklyn, New York, Navy Yards and was a member of the Marine Detachment aboard the USS Portsmouth from April to June 1947. He was then stationed at the Philadelphia Navy Yard until May 1948, when he joined the 2d Marine Division at Camp Lejeune, North Carolina. From January to May 1949, he served with the Sixth Fleet in the Mediterranean area. He again served at Camp Lejeune, until 3 October 1949, when he was discharged.

Returning to Beverly, Massachusetts, he worked for a year as a plasterer and bricklayer until enlisting in the Marine Corps Reserve on 26 September 1950 for an indefinite tour of active duty. He was trained at Camp Lejeune until January 1951, when he arrived in Korea to join the company with which he was serving when killed. He had participated in the South and Central Korean campaign, receiving his promotion to corporal on 15 June 1951. Corporal Joseph Vittori at age 22 earned the Medal of Honor the night of 15-16 September 1951, near Songnae-dong, Korea, where he was fatally wounded while fighting off an enemy break-through at a gap in his battalion's lines. He was the 19th Marine to earn the Nation's highest decoration for heroism in Korea. The action occurred on Hill 749, where Cpl Vittori's company was assaulting well-entrenched Chinese Communist positions. A vicious enemy counter-attack drove back a forward platoon with heavy casualties, and Cpl Vittori, with two other volunteers from his reserve platoon, dashed into hand-to-hand combat in the midst of the swarming enemy to give the Marine company time to consolidate its positions.

Later, when a call went up for an automatic rifleman to defend an isolated heavy machine gun position on the flank of his company's sector, Cpl Vittori again volunteered. With heavy casualties leaving a 100-yard gap in the Marine lines at the position, he fought a single-handed battle to prevent an enemy break-through. Leaping from one side of the position to the other, he kept up a withering fire of over 1,000 rounds in three hours. He made repeated trips through heavy shellfire to replenish his ammunition, manned a machine gun after its gunner fell, and despite enemy penetration to within feet of his position, kept the enemy out of the breach in his company's lines until he was mortally wounded. The next morning the Marines counted almost 200 enemy dead in the area.

In addition to the Medal of Honor, Cpl Vittori was posthumously awarded his second Purple Heart Medal for wounds received in the action. He was previously wounded on 9 June 1951, near Yang-gu, Korea, and had been a property sergeant after leaving the field hospital. After a week at the job, he asked to rejoin his buddies in his old infantry platoon, and was allowed to do so. His medals and decorations included the World War II Victory Medal; Navy Occupation Service Medal with Europe Clasp; Korean Service Medal with one bronze star; and United Nations Service Medal. Corporal Vittori was originally buried at the United Nations Military Cemetery, Tanggok, Korea. His body was returned to the United States in January 1952 for reburial in St. Mary's Cemetery, Beverly, Massachusetts. The Medal of Honor was presented to his parents on 7 September 1952. [Source: Vantage Point & Marine Corps University | Wilson Miles | November 28, 2019 ++]

Vet Hiring Fairs

Scheduled As of 15 DEC 2019



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 <https://www.hiringourheroes.org>. Listings of 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>

First Civilian Job

Forty-one percent of veterans surveyed indicated they left their first post-military job within one year. Another 31% indicated said they left their first civilian job to make ends meet and never intended to stay. Another 30% left as the result of finding a better job, while 19% left because the job did not align with their expectations. Only 12% left because the position was terminated or they were laid off. The reasons for staying at a job depend greatly on financial and long-term opportunities in the company. Sixty-five percent of veterans say they will stay at a company for better pay, while 55% stay for a clear path of career growth. Other activities, like veteran resource groups and volunteer activities, seem to have less impact on whether veterans remain or leave their jobs. [Source: Recruit Military, USCC, and American Legion | December 15, 2019 ++]

Vet Suicide

Update 42: No Wrong Door Approach for Assistance

Lawmakers are at odds with the Department of Veterans Affairs over a bill meant to tackle the high veteran suicide rate. More than half of the roughly 17 veterans who commit suicide everyday are not under the Veterans Health Administration's care, so the VA and veterans advocacy groups are pushing for a "No Wrong Door" approach. This means those veterans in crisis or on a path to crisis could go to any group to get the care they need. But Congress, the VA and the advocacy groups have not reached a compromise on which groups should qualify for VA grants to run veteran suicide prevention programs under the Improve Well-Being for Veterans Act (H.R. 3495) introduced in the House 26 JUN by Rep. Bergman, Jack (R-MI-1)

Another hearing was scheduled for 6 DEC to discuss a compromise amendment put up by House Committee on Veterans Affairs Chairman Mark Takano (D-CA). "By allowing VA to responsibly partner with the community

organizations already serving veterans," Takano said in a news release, "we can protect VA's expertise in providing clinical care and begin to reach the 60 percent of veterans not using VA health care. Through this public health approach, I believe we can reduce the overall number of veteran suicides." The bill passed the committee and can now be voted on by the full House of Representatives.

Opposition to the bipartisan bill's current language has come from the American Federation of Government Employees, the Veterans of Foreign Wars and a coalition of VA health provider interest groups, among other advocates. They sent letters to the committee in November voicing varying degrees of opposition to the language. One group called the legislation "simply the wrong bill at the wrong time," while others were "concerned" it replicates a lane for care that was created under the Mission Act, a law passed last year that lets veterans go to private medical providers.

"VA has wraparound services that already exist and are funded," Ramsey Sulayman, VFW National Legislative Service associate director, said in a letter to the committee 20 NOV. "If the goal of H.R. 3495 is to 'catch' veterans in the community who are not using VA with a safety net of VA grant-supported community programs, the question becomes what to do with the cohort once they have been identified?" He said the VFW believes the obvious answer is to connect those veterans to the VA or other health care options for which they are eligible, such as Tricare, Medicare or employer-sponsored insurance.

VA Secretary Robert Wilkie does not share those concerns and opposed Takano's compromise amendment in a letter Wednesday. "Efforts by the Congress to prohibit, disincentivize, or dissuade such care and exclude lesser-known groups from participating in this legislative solution will hinder VA and our partners from reaching those veterans we all agree need and deserve our best efforts," he wrote. "They should never find a 'locked door' or be shifted away when they come for help." He said care for veterans had been "hindered by a disjointed and poorly-coordinated effort that often put the onus on the person in crisis to find the resources and support that was best suited to them, sometimes by trial and error and at the risk of their well-being." [Source: Military.com | Dorothy Mills-Gregg | December 5, 2019 ++]

Military Retirees & Veterans Events Schedule

As of 15 DEC 2019

The Military Retirees & Veterans Events Schedule is intended to serve as a one-stop resource for retirees and veterans seeking information about events such as retirement appreciation days (RAD), stand downs, veterans town hall meetings, resource fairs, free legal advice, mobile outreach services, airshows, and other beneficial community events. The events included on the schedule are obtained from military, VA, veterans service organizations and other reliable retiree\veternans related websites and resources.

The current Military Retirees & Veterans Events Schedule is available in the following three formats. After connecting to the website, click on the appropriate state, territory or country to check for events scheduled for your area.

- 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.

Note that events listed on the Military Retirees & Veterans Events Schedule may be cancelled or rescheduled. Before traveling long distances to attend an event, you should contact the applicable RAO, RSO, event sponsor, etc., to ensure the event will, in fact, be held on the date\time indicated. Also, attendance at some events may require military ID, VA enrollment or DD214. Please report broken links, comments, corrections, suggestions, new RADs and\or other

military retiree\veterans related events to the Events Schedule Manager, Milton.Bell126@gmail.com [Source: Retiree\Veterans Events Schedule Manager | Milton Bell | December 15, 2019 ++]

Veteran State Benefits

New Hampshire 2019

The state of New Hampshire provides several benefits to veterans as indicated below. To obtain information on these refer to the attachment to this Bulletin titled “**Vet State Benefits – NH**” for an overview of the below benefits. They are available to veterans who are residents of the state. Refer to <http://www.nh.gov/nhveterans> & <https://www.military.com/benefits/veteran-state-benefits/new-hampshire-state-veterans-benefits.html> for a more detailed explanation of each of the following:

- Veteran Home
- Financial Assistance
- Employment
- Education
- Recreation
- Other State Veteran Benefits

[Source: <http://www.military.com/benefits/veteran-state-benefits/new-hampshire-state-veterans-benefits.html> December 2019 ++]

*** Vet Legislation ***



Note: To check status on any veteran related legislation go to <https://www.congress.gov/bill/116th-congress> for any House or Senate bill introduced in the 116th 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.

Military Child Citizenship

Update 01: H.R.4801/S.2679 | Citizenship for Children of Military Members

The U.S. government allows noncitizens to serve in the armed forces and federal government, and may give them posts abroad just as they would citizen soldiers. Generally, anybody born to U.S. citizen parents who were physically outside the country during the birth have nonetheless been considered citizens. Also, children of these noncitizens have generally also been granted automatic citizenship at birth. However, the Trump Administration changed that policy in August. Some children of U.S. military members and government employees will no longer automatically acquire citizenship if born outside the country. The policy took effect October 29, 2019.

After some confusion upon the policy’s initial announcement, U.S. Citizenship and Immigration Services Director Ken Cuccinelli clarified on Twitter that the policy should not affect children who were born abroad as U.S. citizens.

They've been given citizenship at birth, and should remain so. Rather, this policy will supposedly only affect children born abroad to noncitizen military members or federal employees. However, the policy's actual text is confusingly worded and more ambiguous so there is concern that, as a result, the children of citizens could also lose automatic citizenship.

The bipartisan Citizenship for Children of Military Members and Civil Servants Act would guarantee citizenship for anyone born to U.S. citizen parents stationed overseas, including military members and federal workers. The new law would not affect existing rules on noncitizens stationed overseas. The House version was introduced on October 23 as bill number H.R. 4803, by Rep. Doug Collins (R-Ga.) and Rep. Jerrold Nadler (D-NY-10) to ensure that children of deployed military and government families benefit from provision of U.S. law that confers automatic U.S. citizenship and are not disadvantaged because their parents are serving our country abroad. The Senate version was introduced the same day as bill number S. 2679, by Sen. Tammy Duckworth (D-IL). The House version was voted on, passed, and forwarded to the Senate on 4 DEC. [Source: VFW Action corps Weekly | December 6, 2019 ++]

VA Pension Poachers

Update 02: S.2988 | Veteran Pension Protection Act

Four U.S. senators introduced a bipartisan bill the week of 6 DEC to protect military veterans from the benefits and pension schemes exposed last month by The Greenville News' "Indebted" investigation. The **Veteran Pension Protection Act** would require the Department of Veterans Affairs to track victims, scammers and trends to proactively protect veterans and survivors across the nation from predatory pension poachers. The measure's sponsors include two Democrats — U.S. Sen. Jon Tester of Montana and U.S. Sen. Bob Casey of Pennsylvania — and two Republicans — U.S. Sen. Susan Collins of Maine and U.S. Sen. Steve Daines of Montana.

The News' yearlong investigation found many financially struggling veterans were driven deeper into debt through transactions requiring them to use their military disability benefits or pensions to repay cash advances. Annual interest rates on the repayment of these advances reached as high as 240 percent and, in other instances, brokers collected commissions that gobbled up as much as half of the veterans' lump-sum payments. At least seven judges in six states, including South Carolina, have ruled that these transactions are illegal. In what is believed to be the first case of its kind, a federal grand jury in Greenville has indicted California businessman Scott Kohn and three of his associates on a charge of conspiracy to commit wire fraud and mail fraud in connection with the sale of veteran's benefits.

"Our nation's aging veterans represent a segment of vulnerable individuals increasingly targeted by bad actors preying on the VA pension benefits they've earned," stated a news release Friday from the Senate Committee on Veterans' Affairs announcing the legislation's introduction. The proposed bill would require the VA to take several steps, including:

- Collect information on potential financial exploitation and create a plan to address trends apparent within this data.
- Create an annual report on the number of pension recipients identified as likely or proven victims of financial exploitation.
- Develop an educational outreach plan in collaboration with veterans service organizations for individuals vulnerable to financial exploitation.

There are more than 20 million veterans in America, including over 400,000 in South Carolina. In an interview last month, Republican U.S. Sen. Tim Scott of South Carolina said he believes there is broad support in Congress to crack down on those who seek to deprive veterans of their hard-earned benefits. The news release from the veterans' affairs committee cited an October report from the U.S. Government Accountability Office that found VA officials should do more to protect veterans from financial exploitation. That report specifically mentioned the pension-advance loans

highlighted in the "Indebted" investigation. "It is unacceptable that scammers continue to exploit vulnerable veterans who sacrificed to protect our freedom," stated Tester, the top Democrat on the committee, in Friday's news release.

Collins presided over a Senate hearing on scams targeting veterans on 6 NOV, the same day that the "Indebted" investigation was published. "Veterans and their families have a right to expect that the nation they protected will fight to protect them from criminals seeking to rob them of the benefits they have earned," she said in Friday's news release.

Senator Jon Tester talks about his work with military veterans during his victory rally at the Holiday Inn in Great Falls on Wednesday morning after the AP called the senate race in his favor.

Two other members of Congress — Republican U.S. Sen. Lindsey Graham of South Carolina and Democratic U.S. Rep. Matt Cartwright of Pennsylvania — told the News last month that they are planning to introduce legislation related to the schemes detailed in the "Indebted" investigation. Graham, a veteran who is chairman of the Senate Judiciary Committee, said he will work with Democratic U.S. Sen. Jack Reed of Rhode Island to establish "very severe penalties" for transactions that require veterans to divert money from their disability benefits or pensions to repay cash advances. Cartwright said he will propose a bill to make it easier for veterans to sue benefit-buying businesses. Neither of those measures had been introduced as of Friday. [Source: The Greenville News | Kirk Brown | December 6, 2019 ++]

Personal Protective Equipment

S.2970 | Improve Fielding Newest PPE Generations

A bill introduced by Sen. Joni Ernst (R-IA) and co-sponsored by Sens. Tammy Duckworth (D-IL), Martha McSally, (R-AZ), and Richard Blumenthal (D-CT) would require the military to overhaul body armor specifically for female troops. "This common-sense, bipartisan proposal is a step toward ensuring adequate and proper-fitting equipment is readily available to our female service members to ensure their readiness, survivability, and effectiveness in combat," she said.

Recent reports by the Defense Advisory Committee on Women in the Services (DACOWITS) have shown that access to female-specific PPE and smaller sized PPE was severely limited and only issued to some women who were deploying and not to any females during initial entry training (IET) or in regular unit environments. In addition, their research has shown that poorly-fitting PPE is a leading cause of injury for all servicemembers, those who are deployed and in training. While the service branches have been working to make improvements to achieve the proper protection and fit for PPE for all servicemembers, including females and small statured males, there is still work to be done to ensure all military members are adequately equipped both during training and in combat. Specifically, the legislation would:

- Encourage the Services to expedite the contracting, procuring, and fielding of new generation PPE that better fits and protects all servicemembers, to include females, and reduces preventable injuries.
- Encourage collaboration with academia and industry, utilizing emerging technologies such as artificial intelligence, human factors modeling, and digital predictive human modeling to develop the next generation of combat equipment and PPE.
- Require the Services to submit a report to Congress in the 2021 Fiscal Year concerning any barriers that they have encountered when fielding their newest versions of PPE to servicemembers. The report would include any cost overruns or contractor delays in fielding this new equipment to servicemembers.
- Require the Defense Health Agency (DHA) to begin administering a trackable system for data input related to injuries to accompany the issuance of new PPE. This could be done through an already-existing system such as the Defense Occupational and Environmental Health Readiness System (DOEHRS).
- Require DHA to provide a report to Congress in the 2025 Fiscal Year identifying the prevalence of preventable injuries attributed to ill-fitting or malfunctioning PPE.

- Require the DoD to include questions in the annual Periodic Health Assessment (PHA) on the nature and prevalence of injuries attributed to ill-fitting or malfunctioning PPE.

Source: ROA Smat Brief | December 9, 2019 ++]

VAMC Clarksburg WV

Update 04: S.2995 | VAMC Patient Safety & Quality of Care Reports

The U.S. senators representing West Virginia have introduced a bill meant to provide greater transparency for patient safety at VA hospitals. The bill, introduced by Senators Joe Manchin and Shelley Moore Capito, was prompted by about 10 suspicious deaths at the Louis A. Johnson VA Medical Center in Clarksburg. “Victims’ families have waited long enough and deserve answers. I can’t imagine having a loved one murdered at a VA Medical Center and after a year and a half, still not knowing how it happened,” stated Manchin (D-WV). Six of the veterans have been publicly identified. They include Russ Posey, William Alfred Holloway, Felix Kirk McDermott, George Nelson Shaw, Archie Edgell and John Hallman.

The victims were ill when they went to the hospital, according to their families, but not expected to die. Lawyers for the families say each victim was given fatal doses of insulin, even though none were diabetic. The deaths are being investigated by the Federal Bureau of Investigation and the Inspector General for the VA. Those involved with the case have suggested a person of interest no longer works at the VA but has not yet been arrested. The Washington Post has reported that the person of interest initially was transferred to a desk job, and then was fired after a few months. She was accused of falsely claiming on her resume that she was certified as a nursing assistant.

The bill being introduced by Manchin and Capito would require the U.S. Department of Veterans Affairs to submit detailed reports on patient safety and quality of care at VA Medical Centers. Additionally, the bill would require the VA, once the criminal investigations are completed, to submit a detailed report and timeline of events surrounding the deaths at the Clarksburg VA. “This legislation will help our Veterans and their families gain insight into the policies and procedures that could have led to these homicides,” Manchin stated. “Ultimately our goal is to help restore public confidence in the VA across West Virginia and the nation.”

Sen. Capito (R-WV) agreed. “Our veterans should always feel safe and cared for at our VA hospitals. No questions asked,” Capito stated. Capito said she has remained in touch with federal VA Secretary Robert Wilkie, U.S. Attorney Bill Powell, Clarksburg VA Director Glenn Snider and VA Inspector General Michael Missa. “We need to discuss how these tragedies happened and how to prevent similar occurrences in West Virginia and VA hospitals nationwide,” Capito stated. “This legislation will help us find answers to these questions and help make sure that tragedies like this never happen again.”

Tony O’Dell, a Charleston lawyer who represents several of the families of veterans who died under suspicious circumstances, said the bill is a good start. “However, the victims’ families should not have to wait for this legislation to make its way through both houses of Congress and then be implemented down the road by the VA to get answers,” O’Dell stated in reaction to a question posed by MetroNews. O’Dell said the VA and the Inspector General already know veterans died as a result of medically-unexplained severe hypoglycemia. But, O’Dell stated, “We will never truly know how many veterans died as result of this VA medical center’s malfeasance and total lack of caring. “The OIG should issue its report on the hospital system failures now and the VA should be reaching out to the victims’ families to admit what it did wrong and try to right its wrongs as best it can.”

Wesley Walls, a spokesman for the Louis A. Johnson VA Medical Center the hospital, said access and quality information for all VA facilities is [available online](#). And Walls suggested the frustration by Manchin and Capito is misplaced. “We understand the senators’ frustration, but we hope they can recognize that this matter is out of

Clarksburg VAMC's hands and is now with VA's independent inspector general, which has been investigating this issue for well over a year," Walls stated.

"Clarksburg VA Medical Center discovered these allegations and fired the individual at the center of them. But well over a year after Clarksburg VAMC reported this issue to authorities, Veterans and families are still waiting for the independent IG to complete its work and provide the closure West Virginia Veterans and families deserve." Walls concluded, "If the senators have questions regarding the status of the independent IG's investigation, we would encourage them to ask the IG for an update." [Source: Metro News | Brad McElhinny | December 19, 2019 ++]

Vet Suicide

Update 43: S.2991 | Veterans Overmedication and Suicide Prevention Act

Veteran deaths by suicide are increasing, despite billions of dollars and hundreds of public and private efforts to help. The rate of veterans who die by overdose is more than twice that of non-veterans. Reports of the Department of Veterans Affairs allegedly overprescribing veterans and allegations that VA-prescribed drugs may have contributed to some veteran deaths have Congress looking for answers. On 5 DEC, Sens. Tammy Baldwin (D-WI) and Dan Sullivan (R-AK) introduced the bipartisan **Veterans Overmedication and Suicide Prevention Act**.

The bill directs the VA to conduct "an independent expert study on the deaths of all veterans being treated at the VA who died by suicide or from a drug overdose in the last five years," according to a news release from the senators. That study would be conducted by the National Academies of Science. The rate of drug overdose among veterans is more than double that of civilians, VA Secretary Robert Wilkie said in a November statement. A study from the University of Michigan earlier this year showed opioid overdose rates increased from about 15 per 100,000 people in 2010 to about 21 per 100,000 in 2016. The increase in deaths was attributed to synthetic opioid and heroin use, according to the study.

Baldwin previously introduced a similar bill in 2017 with the late Sen. John McCain (R-AZ), but it stalled in committee. "I have worked across party lines to hold the VA accountable because too often our veterans have been prescribed drugs as a first resort before exploring other safer ways of getting the care they need. I'm proud to continue that work ... to confront the overmedication of veterans and prevent suicide deaths," Baldwin said. "Our veterans and their families deserve solutions to the challenges they face and this bipartisan legislation can help improve and save the lives of those that have served and sacrificed for our country." The review ordered in the bill would ensure VA has accurate information about "the relationship between veteran suicides and prescription medication," the announcement said.

The legislation also directs VA to complete a more comprehensive review of behavioral health staff, focusing on mental health counselors in an effort to address shortages of those workers and help reduce suicide. "Throughout my service as an officer in the Marine Corps Reserve, I witnessed the struggles our servicemen and women experience in their search for proper care," said Senator Sullivan. "It is our collective obligation – as members of Congress and as American citizens – to better understand the factors that contribute to veteran suicide, bolster preventative measures, and prevent these tragedies from occurring. Making sure that the VA has a holistic understanding of the information needed to stem veteran suicide is a critical step in this effort, and one that this bill makes great strides in addressing."

The most recent VA report on veteran suicide showed that about 61,000 veterans died by suicide between 2008 and 2017. The bill calls for the National Academies to specifically determine:

- "Total number of veterans who died by suicide in the last 5 years.
- Total number of veterans who were involved in a violent, suicidal or accidental death.
- Prevalence of medications or illegal substances in the system of each veteran who died.

- Number of instances in which the veteran was on multiple medications prescribed by VA or non-VA doctors.
- Percentage of veterans receiving non-medication treatment such as therapy and how effective that treatment is.
- A state-by-state analysis of VA programs that work with state Medicaid agencies, including analyzing shared prescription and behavioral health data for vets.
- Other aspects of care and recommendations to improve the safety and wellbeing of veterans..

If you or someone you know needs help, contact the Veteran Crisis Line 24/7 at 1-800-273-8255 (select option 1 for a VA staff member). Veterans, service members or their families also can text 838255 or go to www.veteranscrisisline.net. [Source: ConnectingVets.com | Abbie Bennett | December 06, 2019 ++]

*** Military ***



ETS Sponsorship Program

VA's Support for Vet's Final Transition to Civilian Life

Military life can be full of transitions. From deployments to retirement, these times can bring about both new opportunities and challenges. Active duty service members have long enjoyed the support of sponsors during their military service transitions. But similar support is not provided for the final transition to civilian life. VA's Expiration Term of Service (ETS) Sponsorship Program is beginning to change that, with promising results. The program helps transitioning service members secure housing, find jobs, pursue educational opportunities and access mental health support, while also providing support to their families.

When service members execute an ETS or retire from service, there is no individual assigned responsibility for their transition into the civilian world. This transition can be challenging, as service members lose the benefits of military leadership, camaraderie, support and structure. These losses can lead to increased stressors, a decreased sense of purpose and an elevated risk for suicide and other mental health concerns when service members rejoin the civilian community. As a result, VA has started collaborating closely with the U.S. Department of Defense; academia, including Syracuse and Columbia universities; local governments; and nonprofits, such as American Corporate Partners and ProVetus, to launch the ETS Sponsorship Program. The ETS Sponsorship Program is available in [New York City](#) and San Antonio. Program leadership plans additional launches in Boston; Charlotte, North Carolina; Dallas; Pittsburgh; Seattle; and Washington, D.C.

How does ETS sponsorship work?

After signing up at their military installation, the program matches service members with an ETS sponsor. Sponsors at the service member's identified post-military hometown are selected based on the service member's job interests, gender and other characteristics, interests and needs. Sponsorship sessions occur virtually until the service member arrives home. Thereafter, thanks to the support of Starbucks, in-person sessions can continue in local Starbucks coffee shops or at other locations in the service member's community. When the meeting is at Starbucks, the restaurant offers

complimentary beverages and food. VA provides certification training for ETS sponsors, enabling them to assist service members with the following:

- Transitioning tasks, such as education, employment, housing, legal support and medical/mental health support.
- Overcoming the stigma that they may associate with seeking mental health support when they need it.
- Connecting to VA and community resources in partnership with [AmericaServes networks](#) and other similar networks in select cities.
- Responding to any signs of possible suicide risk.

How to Get Involved?

If you are serving in the military and plan to move to Boston, Charlotte, Dallas, New York City, Pittsburgh, San Antonio, Seattle or Washington after your military service, you can register to be assigned an ETS sponsor (depending on the progress of the program’s expansion). Identify your interest in participating in the ETS Sponsorship Program and indicate the city where you plan to live after your service. Likewise, if you live in one of the ETS sponsorship program cities and would like to take on the responsibility of becoming an ETS sponsor and helping service members successfully transition, complete the application [here](#).

To access mental health information and resources for transitioning service members, visit the Transitioning Service Member overview [page](#). To hear Veterans’ stories about transitioning from military service, visit the Transitioning From Service page on the Make the Connection website <https://maketheconnection.net/events/transitioning-from-service>

[Source: Vantage Point | November 27, 2019 ++]

Marine Corps Readiness

Update 02: The Force Has to Get Lighter



Changes in how the Navy and Marine Corps [fight](#) together could see Marines aboard both military and commercial ships as they traverse crowded seas, accompanied by small aircraft carriers filled with unmanned drones. Both the Marine Corps commandant and his top general at combat development are looking at new ways that Marines and an evolving Navy fleet [will fight](#) in the crowded sea space of future wars. And at least one analyst called plans by Commandant Gen. David Berger a “once-in-a-generation” change in Marine Corps thinking. Berger’s planning guidance, released in July, looks to move away from the unfeasible 38-amphib ship goal and instead use a mix of amphib ships, smaller expeditionary sea bases, fast transport ships and even commercial ships to move Marines.

This is all an effort, Berger wrote in an article for the website War On the Rocks, titled “Notes on Designing the Marine Corps of the Future,” for the Navy, Marine Corps and Coast Guard to design its own “cabbage strategy.” That’s

a reference to the Chinese method of enveloping a contested area with a variety of boats, from commercial fishing ships to marine surveillance ships and actual warships that wraps an area in layers, like a cabbage. That scenario makes conventional warfare and naval deterrence and access much more difficult, creating hazards that have international consequences such as a military vessel colliding with a commercial ship. And to meet that challenge, Berger points out, the current forward bases and infrastructure all within range of enemy weapons, are “extremely vulnerable.” As are the large ships now in service with “large electronic, acoustic, or optical signatures.”

The shift in how Marines would fight from and back to the sea also changes how the Navy could fight. Vice Adm. James Kilby, who heads war fighting requirements and capabilities, said that traditionally, naval leaders think of how Marines influence the land component of a sea battle, not the sea. But if they can have effects on sea access and deny enemies movement, then he, as a naval commander can think differently about how to employ his ships. All of which support recent statements from top Marine leadership that the force has to get lighter, work in smaller formations in support of naval operations, said Lt. Gen. Eric Smith, head of the Marine Corps Combat Development Command.

Getting lighter pairs with “lightning carrier” experimentation — using smaller aircraft carriers that take advantage of the F-35 capabilities. It even calls for an air wing that consists “mostly or entirely of unmanned aerial vehicles.” Those comments are from a 5 DEC U.S. Naval Institute panel, an article by Berger published the same day and a Congressional Research Service report published in November. The panel featured Smith, Kilby and Ronald O’Rourke, naval affairs specialist for Congressional Research Service.

Drawing on his CRS report, “Navy Force Structure and Shipbuilding Plans: Background and Issues for Congress,” O’Rourke said that combined changes advocated for both force design and managing and training Marines falls somewhere between, “a total house cleaning and a complete revolution for the Marine Corps.” O’Rourke noted that the long-held goal of a 38-ship amphibious force within the larger 355-ship Navy was to meet the requirement to lift assault echelons of two Marine Expeditionary Brigades. That requirement dates to 2006. [Source: MarineCorpsTimes | Todd South | December 6, 2019 ++]

B-1 Bomber

Update 05: Aging B-1 May Soon Have to Restrict the Way it Flies

The B-1B Lancer bomber, a plane designed with the ability to fly fast and low to the Earth in order to avoid enemy radars, might find itself operating at higher altitudes for the rest of its days in service, as officials weigh options to extend its lifespan. The move is one of several being considered to keep the aircraft flying for years to come because low-altitude missions increase the wear and tear on the aircraft's structure, Military.com has learned. "We're closely working with aircrews, maintenance, industry engineers and combatant commands to identify and determine what, if any, changes may be made as we balance operational necessity today with the longevity of the B-1 airframe for the future," said Air Force Global Strike Command spokesman Lt. Col. David Faggard.

Specifically, officials are weighing whether to tell pilots to stop using the B-1's low-altitude terrain-following capability, known as TERFLW mode, during training. The mode is operated by a basic switch on the plane's avionics. "The B-1 and our airmen have consistently and professionally provided close-air support in the counterterror fight for decades, a mission the aircraft was never designed to fly," Faggard said. The B-1 was designed for a range of activities, most notably its TERFLW capability, but instead has been used for years in Middle East conflicts -- a role for which it was not designed. "We're building a viable transition plan to get us from the bomber force we have now to the bomber force of the future. We can change tactics -- altering, bringing back or avoiding any tactics or procedures as necessary on any bomber at any time in the future," Faggard said 6 DEC.

TERFLW, which allows the plane to operate at low altitudes like a jet ski skimming water, was created to allow the B-1 "to sneak in low below enemy radars into Russia during the Cold War, employ nuclear weapons, and get out,"

said Maj. Charles "Astro" Kilchrist, then-chief of training for the 9th Bomb Squadron at Dyess Air Force Base, Texas, in a 2017 interview. Kilchrist, also a pilot, showed off the maneuver when Military.com visited the base that year. Fatigue testing on the bomber has shown that low-altitude training may put additional stress on the airframe, according to two Air Force sources familiar with the discussions. Thus, the argument to limit TERFLW flights in future.

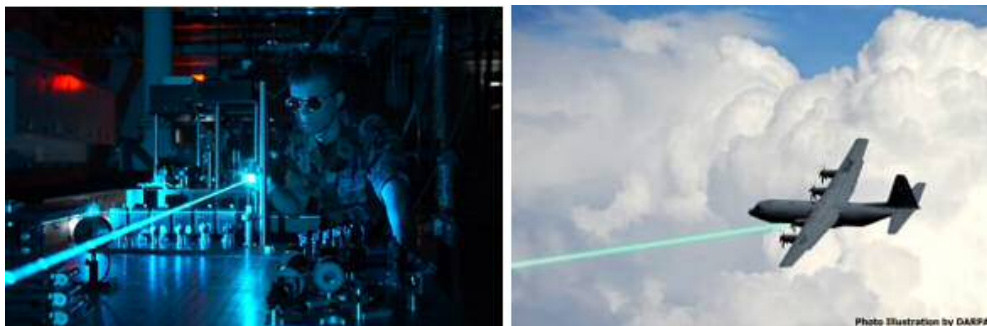
It's not uncommon for bombers to switch up how they fly. For example, B-52 Stratofortress pilots already tend to avoid low-altitude flights because of the additional stress on the venerable bomber's airframe, according to Alan Williams, the B-52 deputy program element monitor at Global Strike Command. Williams has been involved in the B-52 community since 1975. "When I first started flying in the B-52, we went down to 300 to 500 feet above the ground," he said in an interview in August. "Two o'clock in the morning, we'd fly over western Wyoming and we'd pop out four hours later over eastern Wyoming. That was hard on the aircraft." He continued, "Low-level is hard on aircraft. There's a lot of forces -- atmosphere, turbulence, all those things. [But] over the last 30 years, the B-52 has returned to what it was designed to be: a high-altitude bomber."

Officials haven't totally forbidden B-52 crews to fly low, especially if they're testing new weapons, according to a bomber weapons system officer, who asked not to be identified due to not being authorized to speak publicly on the matter. While the B-52 is sticking around into the 2050s, keeping the B-1 viable until its 2036 sunset date has been a priority for Air Force Global Strike Command. Gen. Tim Ray, head of the command, announced in September that the Air Force had proved it can modify the Lancer to hold more ordnance -- a step that may pave the way to future hypersonic weapons payloads as the bomber seeks new missions.

In tests with the 419th Flight Test Squadron, teams at Edwards Air Force Base, California, demonstrated how crews could fasten new racks onto the external hardpoints of the B-1, and reconfigure its internal bomb bays to hold heavier weapons. "The conversation we're having now is how we take that bomb bay [and] put four, potentially eight, large hypersonic weapons on there," Ray said during the annual Air Force Association Air Space and Cyber conference. "Certainly, the ability to put more JASSM-ER [Joint Air-to-Surface Standoff Missile Extended Range] or LRASM [Long Range Anti-Ship Missile] externally on the hardpoints as we open those up," he said, as reported by Defense News. "There's a lot more we can do." [Source: Military.com | Oriana Pawlyk | December 8, 2019 ++]

Cruise Missiles

Update 02: Pentagon to Test Rival Killer Lasers



A laser experiment at the Air Force Research Laboratory (left) & Concept drawing for a laser-armed AC-130 gunship

The Army, Air Force, and Navy may be only three years away from a [300-kilowatt](#) laser weapon, one powerful enough to shoot down cruise missiles — using the same basic technology as the checkout counter at your local supermarket. “We are in the process of negotiating contracts with three different performers for three different electrically powered laser concepts,” Thomas Karr, who works for Pentagon R&D chief Mike Griffin as assistant director for directed

energy, said. (DE includes both lasers and high-powered microwaves). These will be demonstration models for testing, not prototypes of operational weapons, he emphasized in an interview with Breaking Defense.

Industry has proposed several designs that “have all been demonstrated at lower power levels, 50 to 150 kilowatts,” Karr said. Those power levels are enough to burn through [drones](#) and [rockets](#), but not larger, faster and tougher targets like cruise missiles. “We want to have a 300-kilowatt laser by 2022. We’d like to get up to 500 kilowatts by 2024,” he said, “and then, if we still haven’t hit the limit of anything, it’s on to the megawatt class. “Those are aggressive objectives,” Karr acknowledged, “[but] we have high confidence that one or more of these different fiber or slab approaches will scale up to 300 or beyond. I don’t think we’ve seen the limit yet.”

The Pentagon actually flew and test-fired a one-megawatt [Airborne Laser](#) in 2009-2011, but that system required a 747 full of toxic chemicals, hardly practical in a war zone, not to mention a very easy target. By contrast, today’s designs build on widely available and rapidly advancing commercial technologies. “The electrically-driven lasers we’re scaling up exploit a lot of commercial technology,” Karr told me. “They’re all pumped by semi-conductor diodes, which is a multi-billion dollar industry. It’s not just off-the-shelf. It’s not the semiconductor laser that’s in your supermarket scanner, but we’re building off that huge investment in commercial industry.”

Two of the three demonstrators Karr plans to build use bundles of fiber-optic cables – like the ones probably connecting your computer to the internet as you read this – to channel beams of coherent light, which are then combined into a single powerful blast. “There’s a large commercial industry in these fiber lasers for cutting, welding, material processing,” Karr said, “and they’re up to kilowatts and very good in quality.” The third demonstrator will use small lasers to “pump” energy into slabs of specially formulated material that amplify their power. “Again, that’s been scaled up to the point where we think we’re ready to go,” Karr said. “We believe we can add additional amplifier stages and each amplifier adds more power [and can] still maintain the beam quality.”

Karr made clear he doesn’t need all three designs to work. In fact, the project might survive all three failing, because he’s put out another request for proposals for designs in the 300-500 kW range. “We have three good proposals to start with,” he said, “[but] we think we will add additional contractors in the future. “We have enough money to fund multiple competing technical concepts, as well as multiple performers,” Karr said. (The effort’s 2019 budget was \$70 million; the 2020 budget remains in limbo). “The POM [five-year Program Objective Memorandum] number is adequate to carry multiple contractors over the finish line to 300 [kW] level.” “When we do reviews, every performer will see, on the key performance metrics, where they rank compared to their competitors,” Karr said, although no competitor will get to see details of its rivals’ performance. “You’re in the green zone or you’re in the red zone.... It will stimulate competition. “Most of my career has been in the private industry, more in private industry than in government. I love competition,” he said. “I like the fact that we have lots of competition in this program.”

While Karr is encouraging industry to compete, he’s also getting the armed services to cooperate. “In the past, every service that wanted to scale up a laser, it picked the laser and it invested to try to scale that up,” he said. “Now... we have for the first time a unified laser scaling program that’s led by OSD [the Office of the Secretary of Defense] with the concurrence and participation of all the services. “I think it’s much more efficient,” he said. “Maybe it’s not one size fits all. Maybe there’s two or three sizes, but there’s a limited number of government-controlled interfaces... common standards that all of the services could agree to,” governing such things as how to couple the laser to its external power source and cooling. “One of the things that OSD wants the whole community to move towards is a more open architecture for all these systems, so that there are interchangeable or at least similar major subsystems, instead of everything being custom designed,” Karr told me.

There are definitely opportunities for the services to share, he said. “They face a lot of similar challenges,” he said, “so there’s a lot of exchange of information between Army, Navy, Air Force, and DARPA or SOCOM [[Special Operations Command](#)].” “One of the nice things about sitting in OSD is I can look down the stovepipes to all the services and see there’s a lot in common,” Karr said, “particularly in beam control” – the difficult science of getting the laser beam from the weapon to the target without losing power or focus. “There’s room for a joint beam control experiment [that] everybody can spin off.”

At the same time, there are definite differences between putting a laser on an airplane – as the Air Force and SOCOM plan to do – versus a ship or a vehicle. “The airflow over these systems introduces some special challenges that the Air Force Research Lab is moving on,” he said. “The absorption of the beam in the maritime environment” – with lots of humidity and salt – “is different than you would have in a land environment. “Size, weight, and power efficiency requirements are most stressing for the airborne cases,” he summed up. “It’s somewhat easier on land vehicles and on ships, but it still is not a trivial issue. But the military’s existing aircraft, ships, and vehicles were never designed to carry weapons that suck up hundreds of kilowatts of power in seconds and emit much of that as heat. “We’ll learn how to manage that,” he said, but it will require a customized solution for each ship, plane, and [ground vehicle](#).

Military lasers have made major advances since the Navy field-tested its [Laser Weapon System](#) (LaWS) aboard a ship in the Persian Gulf five years ago. The 30-kilowatt LaWS was basically six commercial lasers bolted together, their six separate beams converging on one spot. Today’s lasers are still built of multiple modules, but they combine the beams from those modules into a single coherent laser, and their overall power is much higher. “We have laser technology getting onto platforms in the 50-60 kilowatt class,” Karr said, such as the Navy’s [HELIOS](#), the first laser fully integrated into a warship’s combat systems. “Those are adequate for engaging small boats, small UAVs [drones], bringing those down or blinding the sensors.” Then, in cutting edge experiments, he went on, “we have electrically powered lasers in the 150-kilowatt class. One has just been lifted onto a ship in San Diego harbor: the Laser Weapon System [Demonstrator](#)..

“The next level of targets is harder, faster things like cruise missiles,” Karr continued. “They move a lot faster, you have to engage farther away. So you need, we believe, a 300kw class [laser] – that’s sort of a consensus across the services... to start doing those harder, longer range missions.” “That’s why everybody agreed, let’s try for 300 kW in 22,” he said. “There will be some challenges to cleverly handle all of this additional power,” Karr acknowledged. “You’ve got more heat, you’ve got more thermal loading, [and] typically the way people deal with that is that they’ll make stuff bigger. We don’t want to grow the size and mass of things arbitrarily. We want to keep things small and compact as possible.”

As OSD and the services strive to scale up electrical lasers, will they hit a point of diminishing returns, beyond which further power increases are unaffordable or impractical? At some point. But Karr thinks he get to viable missile defense lasers first. “If I look back over multiple decades, [across] many different concepts – starting with CO2 Laser, CO lasers, chemical lasers, free-electron lasers, chemical oxygen-iodine,” Karr said, “every one of those... at some point we hit a level where problems were very, very challenging.” “I don’t know where that will be with electrical lasers,” Karr said. “We haven’t hit that yet.” [Source: Breaking Defense | Sydney J. Freedberg | December 02, 2019 ++]

Military Housing Surveys

GAO Reports Those Showing Satisfaction are Bogus

The U.S. military's service chiefs and secretaries heard testimony Tuesday yesterday that their own surveys showing high satisfaction and occupancy rates in military housing were bogus, and glossed over negligence and poor performance by private-sector companies and property managers. The survey finding that 87% of tenants were satisfied with their privatized housing was misleading in the way it was worded and should not be taken as an "indicator of program success," according to a report by the Government Accountability Office. "This 87% figure is not in any way reliable," Elizabeth Field, the GAO's director of defense capabilities and management, said at a hearing of the Senate Armed Services Committee on the crisis in military housing.

Rather than simply asking whether tenants would recommend privatized housing on base to others, the military's survey asked whether they would "recommend this community to others." "A resident's satisfaction with his or her community and inclination to recommend it to others may not be reflective of satisfaction with either the privatized

housing unit or privatized housing in general," the GAO report said. The report also said that pointing to high occupancy rates as an indicator of resident satisfaction was meaningless. "Through our site visits to 10 installations, where we conducted 15 focus groups with families, we learned that family members often choose to live in privatized housing for reasons that have nothing to do with the housing itself," Field said. She cited "reasons such as living in close proximity to medical and education services for children with special needs, or a concern that off-base housing is neither affordable nor safe."

The GAO report also noted discrepancies in work order data provided by the private companies that did not reflect actual performance. The report identified instances of "duplicate work orders, work orders with completion dates prior to the dates that a resident had submitted the work order, and work orders still listed as in-progress for more than 18 months."

The hearing was held a day after another lawsuit was filed by military families, alleging failures by private managers to address mold and other conditions that led to health problems. The suit, filed by five families at MacDill Air Force Base near Tampa, Florida against AMC East Communities and Clark Realty Capital, was at least the fourth of its kind filed this year, according to Shannon Razsadin, executive director of the Military Family Advisory Network, who attended the hearing. At the hearing, GAO's Field sat at the end of a long table to the right of Army Secretary Ryan McCarthy, Army Chief of Staff Gen. James McConville, Acting Navy Secretary Thomas Modly, Chief of Naval Operations Adm. Michael Gilday, Marine Corps Commandant Gen. David Berger, Air Force Secretary Barbara Barrett and Air Force Chief of Staff Gen. David Goldfein.

Sen. James Inhofe (R-OK), the committee's chairman, set the tone for the rare joint appearance of service leadership by asking when they were going to get ahead of a crisis in military housing that has been building for years. "I have to ask, when is enough enough? You are still failing to fix the problems. It is a nationwide scandal," Inhofe said. Inhofe said his remarks were not intended as a blanket indictment of the military for failing to heed the families' complaints, but added that the lack of oversight was giving a pass to "the bad actors we know are out there." Sens. Richard Blumenthal (D-CT) and Mazie Hirono (D-HI) urged the military to consider referring property managers for criminal prosecution in instances of fraud or retaliation against military families for filing complaints.

In their testimony, the chiefs and secretaries acknowledged past failures, but said they were taking corrective action. They also pressed the senators to get moving on passing a National Defense Authorization Act including a tenant bill of rights for the military. The NDAA and the defense budget for fiscal 2020 have been held up on a number of issues, including funding for the border wall, and the government is now operating on a continuing resolution set to expire 21 DEC that has kept spending at 2019 levels.

In his testimony, and in a later meeting with reporters, McCarthy said the Army was taking a "house-to-house" approach to addressing the housing crisis. "The immediate focus is to fix current housing issues that can be addressed by effective follow through on work orders and improved management," he said. "We owe it to the 45% of our force who live on post." McCarthy also noted that more than 2,000 Army families this year have been displaced to hotels or other accommodations by poor upkeep of their homes or natural disasters. "Since February, the Army tracked the displacement of 2,155 five families. Currently, 198 families are still in temporary housing while privatized companies are addressing issues in their homes," he said. "These aren't simply numbers, these are lives."

The Navy's Modly said "we are not completely satisfied" with how the service has handled housing issues, "and we will not rest" until the families' problems are addressed. Air Force Secretary Barrett said faulty construction and poor maintenance were mainly the result of "project owners who have simply failed" in their responsibilities. However, "the Air Force owns part of the responsibility as well," Barrett said, noting that the housing problems "have distracted from the Air Force mission. This is unacceptable."

One of the issues at the forefront for military families struggling to have their homes repaired has been the non-disclosure agreements some companies have required them to sign for work orders. Under the terms of these agreements, "you can't speak even about the existence of the agreement, and you can't speak disparagingly" about the

property manager or the work order might not be fulfilled, Tillis said. Those were reasons "why these damn things have to be eliminated," Tillis said, to applause from the military families in attendance at the hearing. [Source: Military.com | Richard Sisk | December 3, 2019 ++]

Base Housing

Update 16: Service Officials Grilled Over Efforts to Remedy



Senators peppered service officials for more than two hours 3 DEC with questions about ongoing problems with privatized family housing. Meanwhile, government auditors issued a report saying DoD's measures of tenant satisfaction are fundamentally flawed, leading to financial rewards to housing companies that may have been undeserved. The latest hearing came 10 months after the first hearings where family members testified about the hazards that threatened their health and safety, and their frustrations in getting their landlord to fix the problems—and no help from their military officials on base.

But things haven't changed much in the interim, said the chairman of the Senate Armed Services Committee. "We continue to hear regularly from families across the country about questionable practices, poor workmanship, and frankly, in some places, about housing contractors just not caring about the families they are serving," said Sen. Jim Inhofe (R-OK). "The time for talk is over. If these companies cannot get the job done, you owe it to our military families to find a company who will." Dozens of family members attended the hearing, often clapping at senators' questions and comments, such as when Sen. Martha McSally (R-AZ) suggested that some of the privatized company CEOs should move into military housing over the holidays. They clapped when Sen. Tammy Duckworth (D-IL) said she didn't understand why a single installation commander hasn't been fired because of these problems. Duckworth also said the services should notify all families who have previously lived in these houses about the problems, in case health issues surface in the future.

Although defense and service officials are headed in the right direction to fix problems that have led to mold, pest infestation, water leakage and other issues in family housing, it's going to take sustained effort over a number of years to fully meet their goal of providing safe, clean housing for all service members and their families, an official with the Government Accountability Office told senators.

The GAO findings about the flawed assessments are significant and not just because DoD's statements to Congress for years that the program has been successful overall may not be fully accurate. That's because DoD has been using these metrics to reward and pay incentive fees to the privatized housing partners, said Elizabeth A. Field, director of defense capabilities and management for the Government Accountability Office, in testimony before the Senate Armed Services Committee. The services and DoD have had more assessments for financial viability of the projects than for the habitability of the houses, Field said.

The military housing tenant bill of rights is finalized, but waiting on the passage of the defense authorization bill, according to the service secretaries who testified before the committee. The bill of rights will provide stronger government advocacy for military residents, and a dispute resolution process, among other things. The pending bill contains provisions related to the tenant bill of rights. Sen. Thom Tillis (R-NC) said he is still hearing from some families with issues with their landlords, including some who are being forced to sign non-disclosure agreements, to keep quiet about their housing problems. “When is enough enough?” Tillis asked the service secretaries of which none were in their positions when the problems first came to light about the hazards:

- “We might be there right now,” said Army Secretary Ryan. D. McCarthy.
- Acting Secretary of the Navy Thomas B. Modly and Secretary of the Air Force Barbara M. Barrett said they may be there, too, in certain cases.

Among other things, the services and DoD are looking at the procedures for providing incentive fees for the private companies, including adding more measures related to the condition of the houses. The Navy hasn’t given an incentive fee this year, Modly said.

Some of the families who attended the hearing said they were encouraged by parts of what they heard, such as the increased emphasis on the military chain of responsibility for family housing. Advocate Rachel Christian said she thinks the suggestion that it be part of the installation commanders’ evaluations would make it difficult to turn away families who need help with their housing issues. And referring the cases of possible criminal violations to the Justice Department would send a clear message to the housing companies, she said. Sen. Richard Blumenthal, D-Conn., asked the service secretaries for information on the status of investigations.

Families are also skeptical. Air Force wife Kelly Johnson, who lives at Dover Air Force Base, Del., has been displaced with her family four times in 19 months, out of their home for a total of 92 days. It’s especially difficult for her family, with two of their four children having special needs. Her daughter has been in the hospital 20 times, she said, including during two of their periods when they were displaced. “It’s hard to be excited about anything because nothing has been delivered,” Johnson said. [Source: MilitaryTimes | Karen Jowers | December 4, 2019 ++]

Humanitarian Service Medal

Update 02: Recent Natural Disaster Support/Deployment Authorizations



The chairman of the Joint Chiefs of Staff has signed off on authorization of a new medal for U.S. service members who deployed for and otherwise supported several recent natural disasters. According to a Marine Corps administrative message, the Humanitarian Service Medal -- recognizing meritorious participation in humanitarian actions -- is authorized for troops who participated in disaster relief and assistance for Typhoons Mangkhut and Yutu, which struck Guam, the Philippines and surrounding islands in late 2018.

The Navy's Wasp Expeditionary Strike Group, with the 31st Marine Expeditionary Unit aboard, deployed to assist with disaster relief after Typhoon Mangkhut, which killed more than 100 and stretched as far west as southern China and Hong Kong. Super Typhoon Yutu, which ripped through Saipan and Tinian in the Northern Mariana Islands, also prompted a response from the 31st MEU, with some 800 troops from across the services ultimately supporting disaster

relief. To be eligible for the medal in relation to the typhoons, personnel must have directly participated in relief efforts, and have been physically present in Guam or the U.S. Commonwealth of the Northern Mariana Islands, and provided direct humanitarian assistance between the dates of Sept. 11, 2018 and Feb. 2, 2019, according to the message.

The medal is also authorized for troops who supported assistance for Hurricane Harvey, which struck southeastern Texas, and for Hurricanes Irma and Maria, which devastated the Caribbean, all in late 2017. For Hurricane Harvey, eligible personnel must have directly participated in humanitarian assistance and hurricane relief and have been physically present in Brazoria, Calhoun, Jackson, Refugio, San Patricio, Victoria or Matagorda counties and Louisiana's Cameron Parish to provide direct humanitarian assistance between the dates of Aug. 23, 2017 and Oct. 31, 2018. Harvey brought massive flooding to parts of Texas and Louisiana and prompted a military response of historic proportions. Response efforts included the U.S. Coast Guard; Army National Guard units from five states; Air Force pararescue teams; a Navy amphibious ready group with Marines aboard; and Marine Corps Reserve units.

To earn the medal for support in the wake of Hurricanes Irma and Maria, troops must have provided direct disaster relief and have been physically present in the State of Florida or the Caribbean Islands "and adjacent waters, from Barbados Northward to Anguilla, and then westward to the Florida Straits," between Sept. 8, 2017 and Nov. 15, 2017, according to the message. Hurricanes Irma and Maria caused catastrophic regional damage, leveling paths through Puerto Rico and the U.S. Virgin Islands. In the wake of the storms, the U.S. military organized Joint Task Force Leeward Islands for disaster response. At peak strength, according to the Defense Department, the task force included "more than 300 Marines, Soldiers, Sailors and Airmen, as well as 10 Army and Marine helicopters, four U.S. Air Force C-130 Hercules aircraft, the U.S. Navy's amphibious ship USS Wasp, the expeditionary fast transport vessel USNS Spearhead, and support from Navy P8 Poseidon and P3 Orion aerial reconnaissance aircraft." [Source: Military.com | Hope Hodge Seck | December 3, 2019 ++]

PFAS Toxic Exposure

Update 10: Navy Asks Judge to Put Off Lawsuit Ruling

The Navy wants to hit pause on a Pennsylvania court case that would require it to acknowledge water contamination in and around two of its bases, caused by the use of firefighting foam, in anticipation that the state and federal government are going to put out mandatory clean-up and remediation guidance. Attorneys for the Navy filed a motion 19 NOV for a six-month stay of the case, according to court documents, based on two civil lawsuits from Pennsylvania residents arguing that Naval Air Station Joint Reserve Base Willow Grove and the former Naval Air Warfare Center Warminster have caused perfluorooctane sulfonate or perfluorooctanoic acid — collectively known as PFAS — contamination, and should be subject to the Pennsylvania Hazardous Sites Cleanup Act.

At issue is whether those chemicals, which have been linked to cancer and other illnesses but are not currently recognized by the government as hazardous at all levels of exposure, should require a decontamination process and whether people exposed to them can seek damages to cover the cost of medical expenses. So far, the government has argued that because PFAS is not recognized as hazardous, the case should be thrown out. "A determination by federal or state legislative or regulatory bodies that PFOS or PFOA is a hazardous substance could moot the United States' argument in its pending motion to dismiss that Plaintiffs have failed to state a claim, obviating the need for further briefing – and a Court ruling – on that portion of the United States' motion to dismiss," according to the motion.

According to court documents, the plaintiffs in the case acknowledge that both the state of Pennsylvania and the federal government are on the verge of classifying PFAS as hazardous, which would effectively give the plaintiffs their desired outcome. The lawsuit, which includes two combined civil actions, asks that the Navy pay for the residents and their families to receive medical monitoring for side effects of PFAS exposure, as well as a study of the towns neighboring the bases to determine what side effects those residents might experience or be experiencing.

“This is a cynical attempt by the Navy to stall this litigation and continue the Pentagon’s long history of avoiding responsibility for knowingly putting military personnel and civilians at serious risk from these toxic chemicals,” Melanie Benesh, an attorney for the Environmental Working Group, said in a 27 NOV release. “This is exactly why Congress must pass the military spending bill with robust PFAS cleanup provisions, so the federal government can finally do what is right — address this contamination crisis the military played a central role in creating in the first place.” The most recent version of the 2020 defense authorization bill includes legislation that would bring PFAS under the federal Superfund law and the Clean Water Act.

Currently, the Environmental Protection Agency considers a lifetime-exposure of 70 parts-per-trillion to be a safe amount of PFAS in water. Military bases have installed filtration systems to bring their drinking water below that level. But firefighting foam was used for decades by the military. The Department of Defense previously identified 401 sites on active and former military bases where the PFAS compounds, also known as PFOS and PFOA, were released or a suspected discharge occurred. But Assistant Secretary of Defense for Sustainment Robert McMahon said 20 NOV that continued Department of Defense efforts to identify locations with potentially harmful levels of chemicals uncovered more sites, namely National Guard facilities. He said the department will name the sites when it has verified the number and locations.

“In February, the EPA released a PFAS ‘action plan’ that has been roundly panned by public health and environmental advocates for lacking specifics and deadlines,” the environmental group’s release said. “Although EPA indicated in the plan that it has ‘initiated the regulatory process’ for designating PFOA and PFOS as hazardous substances under the federal Superfund law, the plan gives no indication of when EPA expects to complete that process.” In the meantime, the Pentagon has put money behind research on a new, non-toxic firefighting foam, while standing up a task force that will study the department’s current PFAS issues and make recommendations on handling it. On the clean-up front, in September the research lab at Wright-Patterson Air Force Base tested a plasma reactor process that researchers believe could remove PFAS completely from existing water sources. [Source: MilitaryTimes | Meghann Myers | November 28, 2019 ++]

PFAS Toxic Exposure

Update 11: Federal Study Facing Delays

A multimillion dollar federal study on toxic chemicals in drinking water across the country is facing delays due to a dispute within the Trump administration, according to several sources involved in the study or who have knowledge of the process. The dispute has implications for more than half a dozen communities where drinking water has been heavily contaminated with per- and polyfluoroalkyl substances (PFAS). Concerns about the chemicals have exploded nationally in recent years, following decades of PFAS use in products including non-stick cookware, water-resistant clothing, food packaging, carpets and military firefighting foams. Scientists say significant delays could limit the effectiveness of the study.

The unregulated chemicals are known to exist at some level in the drinking water of tens of millions of Americans, with one estimate placing the number as high as 110 million. The chemicals are also the subject of "Dark Waters," a film released in November starring actors Mark Ruffalo and Anne Hathaway. Some prior studies on PFAS have linked the chemicals to health problems, including high cholesterol, reproductive issues and testicular and kidney cancer. Other studies have failed to replicate some of those results, and some PFAS are better researched than others, leaving the exact implications of exposure unknown. With public concern rising, congressional lawmakers in 2018 appropriated \$10 million for a nationwide study to offer more definitive answers about health effects. The money was budgeted for the Department of Defense, which is also facing at least \$2 billion in PFAS cleanup liabilities. The money then flowed to the U.S. Centers for Disease Control and Prevention.

This summer, the U.S. Agency for Toxic Substances and Disease Registry, an arm of the CDC, announced that it would use the funds to study highly exposed communities in California, Colorado, Massachusetts, Michigan, New Jersey, New York and Pennsylvania. The design of the study shops out the actual research to academic or government partners in each state and provides grant funding to conduct the work. But the study is off to a slow start, with a dispute between the CDC and White House Office of Management and Budget playing a role, sources say.

The issue was first referenced publicly on 3 DEC by Robert Laumbach, an environmental health researcher at Rutgers University, during a press conference held by U.S. Rep. Frank Pallone (D-NJ). Laumbach is the lead investigator for the New Jersey portion of the study, which will focus on PFAS-impacted communities in Gloucester County, near Philadelphia. "Unfortunately, the study is being held up by the Office of Management and Budget, with no clear timeline for approval," Laumbach said.

Delay could hurt study

In an interview with USA TODAY Network, Laumbach said he heard from federal partners that the CDC had asked the White House to review a draft design of the national study. Under the federal Paperwork Reduction Act, studies such as the CDC's must go to the Office of Management and Budget for a formal review and cannot be started until approved. Laumbach said he was told that OMB "didn't pick up the review." Instead, the White House referenced an ongoing CDC pilot study on PFAS at the Pease International Tradeport in Portsmouth, New Hampshire. According to Laumbach, OMB said that the Pease study should be completed before the review of the national study could begin.

"They sort of sent it back and said, 'We thought you were going to wait for the Pease study,'" Laumbach said. Laumbach said he understands that the CDC is arguing that the Pease study, which started in October, can be done concurrently with a White House review of the larger national study. "Whether or not the OMB sort of accepts that reasoning is an open question," Laumbach said. Asked about the study, the CDC in an email offered no indication anything is amiss, adding the agency is "in the process of finalizing" the study design so it can be sent to OMB. "This is a normal process that all federal agencies go through," the CDC wrote. "We expect to send the protocol to OMB for review in early 2020."

The CDC said state partners in the national study have already begun some level of work and are developing strategies to recruit participants, collect data and further involve the public. An OMB spokesperson did not answer questions Tuesday or Wednesday, including direct inquiries about any conflict between the agencies. Despite the CDC's assurances, other sources familiar with the review process said they are aware of friction. Linda Birnbaum, who recently retired as director of the National Institute of Environmental Health Sciences, said she heard about delays from former federal colleagues. "I've heard others speak about frustration, that it's being held up at OMB," Birnbaum said. "And I know the CDC and (Agency for Toxic Substances and Disease Registry) are pushing back on that."

Given the study's size — the CDC has said it aims to study 6,000 adults and 2,000 children across the seven states, by looking for unusual correlations between PFAS blood levels and medical issues — an OMB review is required. But Birnbaum said the review process itself can cause delays even without formal disputes. It also creates a dynamic where only a few on-staff scientists at the White House are tasked with reviewing a study developed by numerous counterparts in other agencies. In this case, the draft study was also already peer-reviewed by a trio of independent scientists. "I've always found it problematic," Birnbaum said of the White House review process. "Things in general always take a long time if you have to take it to OMB, because they don't have the staff."

Tickling away in the background is the fact that the most well-known PFAS chemicals decrease in human blood by half every three to five years. With many impacted communities having stopped or curbed drinking water exposure by 2017, would-be study participants may already have less than half of the blood levels they did when exposure was first discovered. But without research to better identify safe levels in the blood, scientists don't know what any decreases would mean. Kyle Steenland, an Emory University professor who served as an epidemiologist in a landmark PFAS health study in West Virginia, says there are some scientific techniques that can "reconstruct" past exposures and blood levels. But he says it's still an exercise in estimation, and getting actual data more quickly can only help. "It's an iffy product if you don't have good data," Steenland said. "I'd be a little concerned if it drags on and on."

Laumbach said his understanding is that an OMB review can take a year or more, a timeline that Birnbaum also said is possible. The original funding of the PFAS health study was hailed as a bipartisan victory in Congress. Key senators this week offered continuing support. Sen. Pat Toomey, R-Pennsylvania, "has reached out to OMB regarding this matter," his office said. Sens. Tom Carper (D-DE) and Bob Casey (D-PA) said communities that face PFAS contamination deserve to know the results of the study as soon as possible. "In this administration, OMB has consistently been the quicksand into which all rules designed to protect health and the environment sink," Carper said. "This executive branch agency moves with the utmost haste when it comes to deregulation, but when it comes to basic protections for public health, time and again, OMB creates a standstill."

Pease pilot also delayed

Those familiar with the process say an OMB review already led to some delay for the Pease pilot study. Meeting minutes from the CDC show researchers originally hoped to start the project last summer but were unsure how quickly OMB would move. An official in February offered a conservative estimate that blood draws would begin in August. But the project wasn't approved by OMB until that month, and the CDC didn't begin recruiting study participants until October. "There definitely have been delays in the OMB process," said Mindi Messmer, a former New Hampshire state representative. "We're happy that it's getting started."

Other states are now waiting for the start of the larger federal study. Spokesman Nate Wardle said the Pennsylvania Department of Health is "awaiting additional guidance and information from the CDC" to get started but has begun other aspects of planning. Part of that planning requires knowing the study protocol," Wardle added. It is typical for a review to take time, said Betsy Southerland, a former director of science in the EPA's Office of Water who worked on PFAS prior to leaving the agency in 2017, but she criticized the budget office for not prioritizing PFAS. "It seems like these kinds of studies should get really expedited reviews because of the concerns these communities have," Southerland said.

Southerland also said the OMB process can serve as a "black box," where other federal agencies are able to exert influence away from the public eye. Emails obtained by the nonprofit Union of Concerned Scientists last year showed the White House previously communicated with the Department of Defense and EPA in an apparent effort to curb the findings of a prior CDC study on PFAS. "The question would be, is it just basically a bureaucratic delay," Southerland said. "Or is one of those agencies, such as DOD, feeling like these kinds of studies unmask ... issues that they don't want unmasked? [Source: Bucks County Courier Times | Kyle Bagenstose | December 02, 2019 ++]

Cyborg Soldier 2050

Human/Machine Fusion Study



By 2050, the U.S. military could have the ability to implant sophisticated machine technology into combat troops for enhanced performance capabilities such as super eyesight and advanced brain function for controlling unmanned drones and other weapons systems, according to a recent Defense Department study In "Cyborg Soldier 2050: Human/Machine Fusion and the Implications for the Future of the DOD," the Biotechnologies for Health and Human

Performance Council study group surveyed several current and emerging technologies designed to augment human performance to present the feasibility, military uses, and ethical, legal, and social implications of the technology.

"The [study group] predicted that human/machine enhancement technologies will become widely available before the year 2050 and will steadily mature, largely driven by civilian demand and a robust bio-economy that is at its earliest stages of development in today's global market," the report states. The report's analysis states that the development of "direct neural enhancements of the human brain for two-way data transfer would create a revolutionary advancement in future military capabilities."

The study group predicted that by the half-century mark, special neural implants would enable operator's brains to interact with battlefield assets such as weapon systems and reconnaissance drones as well as personnel within proximity or across distances through hierarchical relays with a central network. "The potential for direct data exchange between human neural networks and microelectronic systems could revolutionize tactical warfighter communications, speed the transfer of knowledge throughout the chain of command, and ultimately dispel the 'fog' of war," the report states.

The procedure for implanting such technology could be "invasive and involve methods that use microelectrodes directly implanted into regions of the brain or extended across the surface of the brain," according to the report, which adds that noninvasive methods such as using electrodes on the scalp can also be used. "The level of invasiveness of early iterations and the potential irreversibility of these implants may limit acceptance by military personnel and society, although specialized teams (Navy SEALs, Army Rangers, etc.) may be more inclined to accept these technologies if they could provide significant improvements in capability, lethality, survivability, and overall battlefield superiority," it continues. The study group also predicted that the technology for enhanced vision will also be available by 2050, offering operators "enhanced computational capabilities, which would allow for target identification, selection, and data sharing with other individuals or military systems," the report states.

Like the neural implants, the procedure for vision enhancement, in some cases, would be invasive. "The eyeball itself is completely replaced, and data feeds pass directly into the optical nerve bundle behind the eye," according to the report. "The sensory input for visualization would be completely mechanical or electronic in composition, which would allow data feeds of all types and across all spectra including those previously not capable of being visualized by humans." The development of high-bandwidth, implantable interfaces that stimulate nerves at the single-neuron level will facilitate two-way data transfer that is not currently possible, the study group predicted. "In essence, the eye would be completely artificial and capable of pulling in any manner of sensory data and feeding it directly into the brain for interpretation," the report states.

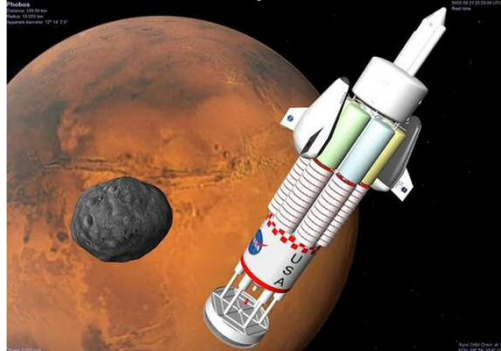
The report includes a disclaimer that stresses the study group's findings "are not an official policy or position of the Department of the Army, the National Defense University, the Department of Defense, or the U.S. Government." The Defense Department should develop legal, security and ethical frameworks for this emerging technology, the report states. The Pentagon should also support research to validate human-machine fusion technologies, the group recommended, "before fielding them and to track the long-term safety and impact on individuals and groups."

The report acknowledges that using such technology to enhanced human beings may not be accepted by the public. "Across popular social and open-source media, literature, and film, the use of machines to enhance the physical condition of the human species has received a distorted and dystopian narrative in the name of entertainment," the report states. "Efforts should be undertaken to reverse negative cultural narratives of enhancement technologies."

The report's authors ultimately recommended that the Pentagon should conduct global assessments of societal awareness and perceptions of human-machine enhancement technologies. "A generalized perception exists in the United States that our adversaries are more likely to adopt technologies that U.S. populations are reluctant or unwilling to field because of ethical concerns," the report concluded. "However, the attitudes of our adversaries toward these technologies have never been verified."

The study group recommended that a "more realistic and balanced (if not more positive) narrative, along with transparency in the government's approach to technology adoption, will serve to better educate the public, mitigate societal apprehensions, and remove barriers to productive adoption of these new technologies." [Source: Military.com | Matthew Cox | December 2, 2019++]

Military Proposed Weaponry Update 03: Project Orion



Still riding high from the possibilities of nuclear power, American engineers thought going to Mars and beyond would be possible with the use of an atomic engine. But this isn't an engine that is propelled by some sort of atomic chain reaction or any kind of vacuum energy, no. This engine was powered by atomic bombs. Nuclear bombs were supposed to give the spaceship lift and, once in space, the energy needed for an interplanetary excursion. The only problem was it left nuclear fallout and radioactive waste spread throughout the atmosphere. [Source: We Are the Mighty | Blake Stilwell | October 3, 2019 ++]

Overseas Troop's Thanksgiving 5,000 Turkeys Sent this Year



Deployed Soldiers got a taste of home this Thanksgiving after months of planning by logistics personnel to deliver tons of meat and fixings for the traditional meals. Many food items served can be found on American grocery store shelves, said Sgt. Maj. Kara Rutter, Army Central Command's culinary management NCO in charge. "We will ensure that Soldiers in some of those remote areas of our theater have the same Thanksgiving meal that they would have whether they were sitting at home or out in the middle of the desert," she said prior to bird day.

Preparations for the meals started as early as April, with many of the ingredients on hand at prime vendor locations by September, according to a Defense Logistics Agency news release. Overseas locations started to receive high-volume items, like the turkeys and more than 131 tons of trimmings, in October. "No matter where troops are stationed, they can expect DLA to provide the best possible meal for Thanksgiving," Col. Eric McCoy, DLA Troop Support Subsistence director, said in the release prior to Thanksgiving. "While it is not exactly the same as being home, it is our job to provide that taste of home to the troops." Thanksgiving meals for all overseas troops will include:

- 4,925 whole turkeys
- 66,741 pounds of roasted turkey
- 80,546 pounds of beef
- 43,648 pounds of ham
- 44,384 pounds of shrimp
- 27,605 pounds of sweet potatoes
- 39,797 pies
- 7,032 cakes
- 5,804 gallons of eggnog

Much of that food headed to the U.S. Central Command's area of operations, including Saudi Arabia where American troops recently deployed after Iran attacked oil facilities in September. "When we first came up with our numbers, we didn't have those locations to support," Rutter said, "so we've had to kind of adjust some things to get support out to them." The Army has also worked to cater to host nation concerns within the theater, which mainly consists of Islamic countries. While some nations have allowed the importation of pork products, some do not. In that case, the menu may change a bit to offer alternative meat options, like turkey or beef bacon instead of pork. "We're always very cognizant of the religious and cultural sensitivities," Rutter said.

The sheer amount of food items is also a challenge to deal with, while they're shipped to ports, go through customs and stored at warehouses until they can be delivered to troop locations. "It's a huge enterprise," Rutter said. The efforts are worthwhile once the hot meals finally make it onto Soldiers' plates. "It's incredibly rewarding to know what we do here is going to matter to [those] who sit down on Thanksgiving and have the same meal and experience that we'd be able to offer them in the states," Rutter said. After all, Thanksgiving is about tradition, especially those staple food items. "You can talk to most any Soldier and they grew up having turkey, stuffing, mashed potatoes and cranberry jelly," she said, "and that's the same thing they're going to have in the middle of Iraq this year." [Source: Army News Service | Sean Kimmons | November 25, 2019 ++]

USMC Political Activity

New Guidance Clarifies What is Allowed on Social Media

With shares and likes on cellphones, the rise of social media has made it easier for Americans to publicly express political opinions and participate in political campaigns. But the ease of social media politicking has created a gray area for members of the military who must navigate federal laws and military regulations that allow them a limited ability to participate in the [political discourse](#) while avoiding an actual or perceived official involvement by the Department of Defense. To help navigate this issue, the Marine Corps has released new guidance clarifying what Marines are and are not allowed to do when it comes to political activity on social media.

“The message is intended to inform or remind our Marines, Sailors and civilians of Federal statutes and policy when it comes to permissible participation in political activities,” Marine spokesman Capt. Joseph Butterfield told Marine Corps Times in an email 2 DEC. Similar MARADMINs have been released before past presidential election years, and this is just a reminder of what the rules are not a change in policy, Butterfield said. The guidance reaffirms that Marines can vote, express their personal opinion on candidates, and can even write a letter to the editor expressing their personal opinions and have a candidate’s bumper sticker on their personally owned vehicle, as long as it is clear they are not representing the Marines Corps in their opinion.

In the social media world, Marines are allowed to “express personal views on public issues or political candidates, much the same as they would be permitted to write a letter to the editor of a newspaper,” as long as they disclose that their opinion is their own and not that of the DOD or the Marine Corps, according to the Monday MARADMIN first reported by Military.com. However, in those posts Marines are prohibited from making “direct links to a political party, partisan political candidate, campaign, group, or cause,” because “such activity is akin to distributing literature on behalf of those entities, which is prohibited,” the MARADMIN says.

Active-duty members are allowed to “friend” or “like” social media pages or “follow” social media accounts for political parties, campaigns, candidates or causes, but they cannot ask others to “follow” or “like” the pages, the guidance explains. The guidance also bars Marines from posting “political messages to a social media account while in a federal building (including when off-duty), even if the individual uses their personal electronic device.” “Federal building’ connotes ‘the federal workplace,’” and does not refer to the barracks or on-base housing, Capt. Christopher Harrison said in a Dec. 5 email to Marine Corps Times. So as long as Marines are off-duty and otherwise follow the guidelines, they are free to talk politics on Facebook from their government provided beds.

Marines not on active duty are exempted from the social media policy, 'so long as the member does not act in a manner that could reasonably create the appearance of official sponsorship, approval, or endorsement by the DoD or the Marine Corps,' the MARADMIN says. [Source: Marine Corps Times | Philip Athey | December 3, 2019 ++]

Navy Tour Lengths

50,000+ Sailors to be impacted by Sea/Shore Duty Changes

More than 50,000 sailors will feel the impact of the Navy’s most recent overhaul of sea and shore tour lengths. The Navy announced the update in an administrative message 2 DEC to its enlisted career management policy, known as Sea Shore Flow. The policy prescribes the length a sailor can expect on their first sea and shore tours and every tour to follow along a 30-year career trajectory. “This was a necessary adjustment to ensure that we have the right people in the right billets to maintain our operational readiness across the Fleet,” said Chief of Naval Personnel Vice Adm. John B. Nowell Jr. in a statement accompanying Monday’s update. The updates affect sailors in 47 ratings. Of those, 20 ratings will see longer sea tours, 22 will have their sea tours cut short and seven will see longer shore tours.

This is the first update since 2016, when 13 ratings saw more sea time and 15 saw a drop. Three years ago, 42 ratings saw no change to tour lengths. This time, there was no change for 41 ratings. The sea-shore flow system maps out tour lengths, so that every sailor in a given rating will serve about the same amount of time at sea and shore over a 30-year career. The policy caps sea tours at five years, but sailors are allowed to extend that if they want. Sailors within 12 months of a planned rotation are not affected by the update. Those outside of their 12-month window will have their planned rotation date adjusted in their electronic record. Detailing windows will shift accordingly, also.

As the force grows and demands change, the Navy must realign tour lengths to reflect those needs, Fleet Master Chief Wes Koshoffer said in an interview with Navy Times. Each update is a reflection of several variables, including accessions, demand for billets from the fleet and the need for support from the shore. “We are a seagoing Navy,”

Koshoffer said. “We’re in great power competition. A layman might think you can just put sailors at sea forever and that would fix the problem. That’s really not true. In order to have a healthy Navy, you have to have balance.”

Of the 20 ratings that will see increased sea duty tour lengths, 14 will feel the extension during their first tours. That works out to 23,597 sailors out of a total 30,058 who will see more time on sea duty overall, according to documents provided by the Navy to Navy Times. Another 21,667 sailors will see less time on sea duty, including 12,329 sailors from 11 ratings during their first sea tour. To Koshoffer, that reflects a need to focus on filling gaps at the apprentice level. “That’s sort of what we’re chasing,” he said. This update also closes what Koshoffer called “persistent gaps at sea” in recent years. He used the mineman rating as an example. The billet can expect to see a 12-month increase for sailors on their first sea tour, with no increases for the second and fourth tours and a decrease of six months by the third, according to the update.

That update reflects a need that the Navy has right now as it counters threats by Iran, Russia and China. “It is a maritime era and the ability to know, if you look at the world situation with straits and choke points and these strategic or maybe tactical locations in places all over the world, the ability to detect and deal with mines and minefields is a high priority mission for us right now,” Koshoffer said. “We’re building capacity at sea right now to deal with mines and central to that is the minemen rating.” [Source: Military.com | Courtney Mabeus | December 2, 2019 ++]

MRAP Lawsuit

Pentagon Overcharged \$1.3 Billion

A defense vehicle manufacturer has been accused by one of its former employees of bilking the Pentagon of \$1.3 billion by vastly overcharging the Marine Corps for components of Mine Resistant Ambush Protected (MRAP) vehicles used by troops in Iraq and Afghanistan. The Illinois-based Navistar Defense company allegedly ran “a pervasive and long-running scheme to charge the U.S. Government wildly inflated prices,” states a court filing made public 3 DEC by the U.S. District Court in Washington, D.C. The whistleblower case was originally brought six years ago by Duquoin Burgess, who worked in Navistar Defense’s contract management department for over three years until October 2012.



Burgess alleged that his former employer and its parent company, Navistar International Corp., forged invoices, catalog prices and other documents to win the contract to build MRAP vehicles for the Marines. The government joined part of the case against Navistar Defense in September. Navistar was awarded a contract in 2007 to build several hundred MRAP vehicles for the Marines to replace the Humvee, which was vulnerable to roadside explosive devices, the Department of Justice said Wednesday. Over the next several years, the government paid Navistar Defense around \$9 billion, and the company produced around 4,000 vehicles. But nearly \$1.3 billion of the money paid out under the contract for parts, including suspension systems, engines and chassis, were based on fraudulent documents, the complaint states.

The fraudulent documents allegedly masked that the vehicle components Navistar Defense was selling to the Marine Corps either had no commercial sales history at all or, when they did, were worth about half the price the company was charging the government for them, according to the complaint. The company charged about \$250,000 for each chassis, but sold an identical product for half the price to other customers, the lawsuit alleges. The Marine Corps paid Navistar Defense around \$30,000 over the usual price for suspension systems, racking up nearly \$120 million in overcharges for that component alone, the complaint says.

“Navistar Defense exploited the government’s need for vehicles that would provide American soldiers with the protection they needed in the field, and fraudulently charged the government prices far exceeding those it charged other customers for the same parts and components,” states the complaint, which was made public this week. Navistar executives knew about the fraud and were actively involved in it, Burgess, the whistleblower, alleged. “The Department of Justice will hold accountable those contractors who falsify information and thereby cause the military to pay inflated prices,” U.S. Assistant Attorney General Jody Hunt said in a statement Wednesday. “We will take steps necessary to protect the military’s procurement process from abuse.”

Lyndi McMillan, a Navistar spokeswoman, told Bloomberg News on 4 DEC the whistleblower’s complaint had no basis in fact or law. “We believe our pricing was fair, reasonable and competitive, and we are disappointed the government has chosen to intervene in this matter,” McMillan said in an email to Bloomberg. “The company intends to defend itself as necessary and appropriate.” The case could take three to four years to come to trial, said Vince McKnight, a lawyer representing Burgess. [Source: React Gear | Seamus McAllistar | December 6, 2019 ++]

Navy Terminology, Jargon & Slang

‘EMI’ thru ‘Fanny’

EMI - Extra Military Instruction. Duties assigned as punishment which are also intended to improve one's military knowledge. Chipping paint would not qualify as EMI, while inventorying the ship's pubs (publications) would.

Ensign Locker – JO (Junior Officer) berthing aboard ship.

Enswine – Derogatory term for an Ensign.

EOOW - Engineer Officer Of the Watch. Pronounced 'ee-ow'.

EOS – Enclosed Operating Space. Space from which engineering spaces are controlled. Generally air-conditioned and soundproofed, the wimps.Essence - Good, pleasant, or attractive. "Having a totally essence time--the weather is here, wish you were beautiful."

Evap - Distilling unit, aka 'the still'. Used to produce fresh water at sea, both for the boilers and for potable usage. For many years, vacuum "flash" evaps were used; reverse osmosis systems are becoming more common now.

Ex – Short for ‘exercise.’ Some forms: mobex (an evolution involving a mob, i.e. poorly organized (or not organized at all)), drunkex (q.v.), borex (a boring exercise), sinkex (an exercise whose intent is to sink a target ship).

FAG - Fighter-Attack Guy. The pilot of an F/A-18.

Fairwater – (1) Submarine) The more modern term for the conning tower of a submarine. (2) A structure on a ship which is designed to deflect or redirect water flow.

Fairwater Planes – Diving planes located on a submarine’s fairwater.

Fake Down – To lay out a line to permit free running while maintaining seamanlike appearance. Generally used for large-diameter lines. The line is laid out in long parallel lines, generally starting up against a bulwark or deck edge and working inboard from there.

Fall of Shot – Point of impact of a shell or salvo of shells.

Fancy Dinns – (UK) Steak and wine night at sea. Usually hosted by the various departments.

FANG – Fucking Air National Guard, or Florida Air National Guard. See also FNG.

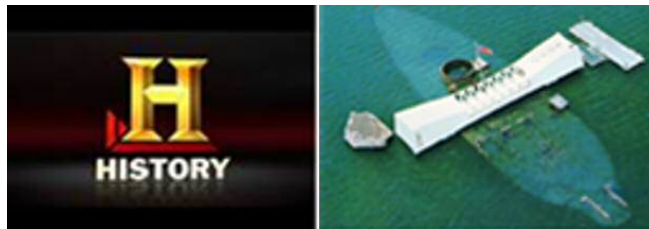
Fang Bosun (or Farrier) – Dentist.

Fanny – (UK) A mess tin. Named for Fanny Adams, a girl who was murdered and dismembered about the same time that tinned meat was introduced into the Royal Navy.

Note: 'RN' denotes Royal Navy usage. Similarly, RCN = Royal Canadian Navy, RAN = Royal Australian Navy, RM = Royal Marines, RNZN = Royal New Zealand Navy, UK = general usage in militaries of the former British Empire

[Source: <http://hazegray.org/faq/slang1.htm> | December 15, 2019 ++]

*** Military History ***



Desert Storm Memorial

Update 12: Design Concept Receives Formal Approval

The effort to build a National Desert Storm Memorial on the National Mall in Washington, D.C., passed a significant milestone in late NOV with formal approval of a design concept granted by the U.S. Commission on Fine Arts. Now, the plan is to have the memorial dedicated by Veterans Day 2021, which would mark the 30th anniversary of the 1991 Gulf War, said Scott Stump, CEO and president of the National Desert Storm War Memorial Association. The design will be unveiled this week. "Our eternal thanks go out to the entire design team, along with the Commission of Fine Arts and the National Park Service for helping us reach this very important milestone," Stump said in a statement.



Fundraising is still underway to meet the projected \$40 million cost of the memorial, at a site off Constitution Avenue near the Vietnam Memorial, to honor those who served in Operations Desert Shield and Desert Storm and liberated Kuwait from the forces of Iraqi dictator Saddam Hussein. The initial design called for a semi-circular wall to recall the "left hook" by U.S. ground forces through the Saudi desert to cut off Iraqi troops in Desert Storm. It would include the names of the fallen and the 34 countries that joined the U.S. coalition, according to the association's website.

The effort to establish a Global War on Terrorism Memorial is not as far advanced as the Desert Storm memorial. But it got a boost earlier in November with the introduction of a bill in the House by Reps. Jason Crow (D-CO) and Mike Gallagher (R-WI) that would designate three possible sites for the GWOT memorial. One proposed site for the memorial, which has yet to get design approval, is near the Vietnam Veterans Memorial; another is near the Korean War Veterans Memorial; and a third is in West Potomac Park near the Franklin D. Roosevelt Memorial. A GWOT memorial would be the first in the nation's capital for a war still underway. The project got past a roadblock in 2017 when Congress agreed to waive the requirement that the construction of war memorials on the Mall had to wait until 10 years after the conflict ended. The Global War on Terrorism Memorial Foundation is now in the process of raising an estimated \$50 million for the project, with a proposed groundbreaking in 2022 and a dedication in 2024. [Source: Military.com | Richard Sisk | December 2, 2019++]

Profile in Courage | Arthur MacArthur

Father of Gen. Douglas MacArthur Jr

With no less than 620,000 deaths recorded over four years of intense fighting between Confederate and Union forces, the American Civil War remains the bloodiest conflict in American history. Playing host to battles such as Shiloh, Antietam, Stones River, and Gettysburg, the Civil War holds tales of unprecedented violence, ferocious bravery, and unparalleled heroism. Among these many tales is that of Lieutenant General Arthur MacArthur Jr. whose bravery at the most critical moment inspired his regiment during the Battle of Missionary Ridge.



MacArthur Jr. was born in the Chicopee Falls area of Springfield, Massachusetts on June 2, 1845. His mother Aurelia was the daughter of Benjamin B. Belcher, a wealthy industrialist. She would die at the age of 45, leaving behind Arthur and his brother, Frank. MacArthur's father, Arthur MacArthur Sr., was a prominent judge and the fourth governor of Wisconsin. With his father's influence, MacArthur enrolled in the United States Military Academy. Thus began his journey as a Soldier. MacArthur was in Wisconsin when the Civil War broke out. He promptly received a commission as a first lieutenant and joined the 24th Wisconsin Volunteer Infantry Regiment. He participated in some of the deadliest hostilities of the war such as Stones River, Chickamauga, Chattanooga, the Atlanta Campaign, and Franklin.

The event that brought him into the limelight occurred during the Chattanooga Campaign in the Battle of Missionary Ridge, which took place on November 25, 1863, just after the Battle of Lookout Mountain. While the battle raged on, the 24th Wisconsin found themselves under intense fire from the Confederates as the former moved up Missionary

Ridge. Despite that, the Union troops kept surging forward behind their roaring guns, yelling "Chickamauga! Chickamauga!" as Confederate General Braxton Bragg's men unleashed their volleys from above, making men fall on all sides. The top of the ridge was the goal for the 24th Wisconsin, and they raced upwards, determined to knock the Confederates off the top. But with such heavy resistance from Bragg's men, the assault was soon in complete tatters.

At that moment, the flag bearer of the 24th Wisconsin was killed. He hit the ground as the Confederate gunfire struck him and rolled down the ridge in his death fall. His grip on the flag was broken, and it fell from his hands into the dirt. A comrade charged forth and reached for the flag, but the guns of the enemy were quick to knock him to the ground as well. Amidst the roars of surging warriors, the voice of the 18-year-old MacArthur tore through the damp air. His weary legs were quickened by the sight of the battle flag lying on the ground beside his fallen comrades, and he dashed on ahead of the others. The sounds of cannons and rifles did not terrify him. His will was stronger than the fear he felt. He reached for the flag, raised it from the dirt, and waved it passionately in the air.

Like a man chasing his own death, he raced up the ridge with the regimental flag dancing in the winds. His voice rang through the tumultuous atmosphere as he yelled "On, Wisconsin!" His comrades from the 24th Wisconsin surged after him, fueled by his energy. More Union troops joined in the revitalized onslaught. And by the coming of dusk, the center of the Confederates' line was broken. The Confederates fled the ridge, and by the end of the battle, the 24th Wisconsin's regimental flag was waving with its pole firmly mounted on the crest of Missionary Ridge. For such an extraordinary display of bravery, MacArthur received the Medal of Honor. The following year, only at 19 years old, he became a Brevet Colonel, which is why he was called "The Boy Colonel."

November 30, 1864, was the day of the Battle of Franklin. During this event, the 24th Wisconsin found themselves in a desperate engagement with Confederate forces. MacArthur was severely injured by gunshots to his chest and leg. But, somehow, he survived his wounds - and ultimately, the war. Following the end of the Civil War, he left the Army and went to study law. But a few months of studying law left him yearning for fulfillment, and it was clear that the only thing that would fill the void for him was the military. Thus, MacArthur returned to the Army. In 1885, he participated in the campaign against Geronimo. In 1898 he led the 1st Brigade of the 2nd Division, a subset of the Eighth Army Corps, to victory during the Battle of Manila in the Spanish-American War. He also played a role in the capture of Emilio Aguinaldo, and the effective end of the Philippine-American War.

MacArthur retired from the Army as a Lieutenant General on June 2, 1909, at the mandatory retirement age of sixty-four. Having married Mary Pinkney Hardy in 1875, he had three children: Arthur MacArthur III, Malcolm MacArthur, and Douglas MacArthur. On September 5, 1912, during a reunion ceremony of the 24th Wisconsin in Milwaukee, MacArthur collapsed from the dais while trying to give a speech. He died at the spot, aged 67. He was first buried in Milwaukee, but in 1926 he was relocated to Section 2, Gravesite 845-A of Arlington National Cemetery. While MacArthur Jr. lived on in memories, his son Douglas continued where he left off. Douglas MacArthur Jr. would earn the Medal of Honor during the First World War and would thus make history with his father. They became the first-ever father-son duo to earn America's most prestigious honor. [Source: Together We Served | December 2019 ++]

War Memorials ► **National War Memorial Canada**



The Response in Ottawa, Ontario, Canada

Tootsie Roll Marines

Ordered Annihilated by China's Chairman Mao

On November 26, 1950, 10,000 men of the First Marine Division, along with elements of two Army regimental combat teams, a detachment of British Royal Marine commandos and some South Korean policemen were completely surrounded by over ten divisions of Chinese troops in rugged mountains near the Chosin Reservoir. Chairman Mao himself had ordered the Marines annihilated, and Chinese General Song Shi-Lun gave it his best shot, throwing human waves of his 120,000 soldiers against the heavily outnumbered Allied forces.

A massive cold front blew in from Siberia, and with it, the coldest winter in recorded Korean history. For the encircled allies at the Chosin Reservoir, daytime temperatures averaged five degrees below zero, while nights plunged to minus 35 and lower. Jeep batteries froze and split. C-rations ran dangerously low and the cans were frozen solid. Fuel could not be spared to thaw them. If truck engines stopped, their fuel lines froze. Automatic weapons wouldn't cycle. Morphine syrettes had to be thawed in a medical corpsman's mouth before they could be injected. Precious bottles of blood plasma were frozen and useless. Resupply could only come by air, and that was spotty and erratic because of the foul weather.

High Command virtually wrote them off, believing their situation was hopeless. Washington braced for imminent news of slaughter and defeat. Retreat was hardly an option; not through that wall of Chinese troops. If the Marines defended, they would be wiped out. Instead, they formed a 12-mile long column and attacked. There were 78 miles of narrow, crumbling, steeply-angled road and 100,000 Chinese soldiers between the Marines and the sea at Hungnam. Both sides fought savagely for every inch of it. The march out became one monstrous, moving battle.

The Chinese used the ravines between ridges, protected from rifle fire, to marshal their forces between attacks. The Marines' 60-millimeter mortars, capable of delivering high, arcing fire over the ridgelines, breaking up those human waves, became perhaps the most valuable weapon the Marines had. But their supply of mortar rounds was quickly depleted. Emergency requests for resupply were sent by radio, using code words for specific items. The code for 60mm mortar ammo was "**Tootsie Rolls**" but the radio operator receiving that urgent request didn't have the Marines' code sheets. All he knew was that the request came from command authority, it was extremely urgent and there were tons of Tootsie Rolls at supply bases in Japan.

Tootsie Rolls had been issued with other rations to U.S. troops since World War I, earning preferred status because they held up so well to heat, cold and rough handling compared to other candies. Tearing through the clouds and fog, parachutes bearing pallet-loads of Tootsie Rolls descended on the Marines. After initial shocked reactions, the freezing, starving troops rejoiced. Frozen Tootsies were thawed in armpits, popped in mouths, and their sugar provided instant energy. For many, Tootsie Rolls were their only nourishment for days. The troops also learned they could use warmed Tootsie Rolls to plug bullet holes in fuel drums, gas tanks, cans, and radiators, where they would freeze solid again, sealing the leaks.

Over two weeks of unspeakable misery, movement, and murderous fighting, the 15,000-man column suffered 3,000 killed in action, 6,000 wounded and thousands of severe frostbite cases. But they reached the sea, demolishing several Chinese divisions in the process. Hundreds credited their very survival to Tootsie Rolls. Surviving Marines called themselves "The Chosin Few," and among themselves, another name: The Tootsie Roll Marines.

[Source: Together We Served | December 2019 ++]

Berlin Airlift **Operation VITTLES**



As World War II came to an end in 1945, the Allied powers held peace conferences at Yalta and Potsdam to determine how they would divide up Germany's territories. The agreements split the defeated nation into four "allied occupation zones." They gave the eastern part of the country to the Soviet Union and the Western part to the U.S. and Great Britain. In turn, those nations agreed to cede a small part of their territories to France. Even though Berlin was located entirely within the Soviet part of the country (it sat about 100 miles from the border between the eastern and western occupation zones), the Yalta and Potsdam agreements likewise split the German capital into Allied sectors: The Soviets took the eastern half, while the other Allies took the western. This occupation of Berlin, governed by a multipower agency called the Kommandatura, began in June 1945.

The Soviets were dissatisfied with this arrangement. Twice in recent memory, they had been invaded by Germany, and they had no interest in promoting that country's reunification—yet it seemed that was exactly what the United States, Great Britain, and France had in mind. For example, in 1946, the Americans and the British combined their two sectors into a single "Bizonia," and the French were preparing to join as well. In 1948, the three western Allies created a single new currency (the Deutsche Mark) for all of their occupation zones - a move that the Soviets feared would fatally devalue the already hyper inflated Reich marks that they used in the east. For the Soviets, it was the last straw.

The Russians were also concerned about a unified West Berlin: a capitalist city located right in the middle of their occupation zone that would likely be powerfully and aggressively anti-Soviet. They decided that something needed to

be done to stop this creeping Unificationism. They withdrew from the Kommandatura and began a blockade of West Berlin, a maneuver that they hoped would effectively starve the western powers out of Berlin. If West Germany was to become its own country, they argued, then Berlin, located more than 100 miles from its border, could no longer be its capital. On June 15, 1948, the Soviet authorities announced that the Autobahn, the highway connecting western Germany to Berlin, would be closed indefinitely "for repairs." Then, they halted all road traffic from west to east and barred all barge and rail traffic from entering West Berlin. Thus began the blockade of Berlin.

As far as the western Allies were concerned, withdrawal from the city was not an option. "If we withdraw," said the American military commander, "our position in Europe is threatened, and Communism will run rampant." President Harry Truman echoed this sentiment: "We shall stay," he declared, "period." Using military force to strike back against the Soviet blockade seemed equally unwise: The risk of turning the Cold War into an actual war - even worse, a nuclear war - was just too great. Finding another way to re-provision the city seemed to the Allies to be the only reasonable response. It was quickly settled: The Allies would supply their sectors of Berlin from the air. Allied cargo planes would use open-air corridors over the Soviet occupation zone to deliver food, fuel and other goods to the people who lived in the western part of the city. This project, code-named "Operation VITTLES" by the American military, was known as the "Berlin airlift." (West Berliners called it the "Air Bridge.")

The Berlin airlift was supposed to be a short-term measure, but it settled in for the long haul as the Soviets refused to lift the blockade. For more than a year, hundreds of American, British and French cargo planes ferried provisions from Western Europe to the Tempelhof (in the American sector), Gatow (in the British sector) and Tegel (in the French sector) airfields in West Berlin. At the beginning of the operation, the planes delivered about 5,000 tons of supplies to West Berlin every day; by the end, those loads had increased to about 8,000 tons of supplies per day. The Allies carried about 2.3 million tons of cargo in all over the course of the airlift. Life in West Berlin during the blockade was not easy. Fuel and electricity were rationed, and the black market was the only place to obtain many goods. Still, most West Berliners supported the airlift and their western allies. "It's cold in Berlin," one airlift-era saying went, "but colder in Siberia."

By spring 1949, it was clear that the Soviet blockade of West Berlin had failed. It had not persuaded West Berliners to reject their allies in the West, nor had it prevented the creation of a unified West German state. (The Federal Republic of Germany was established in May 1949.) On May 12, 1949, the Soviets lifted the blockade and reopened the roads, canals and railway routes into the western half of the city. The Allies continued the airlift until September, however, because they wanted to stockpile supplies in Berlin just in case the blockade was reinstated.

Most historians agree that the blockade was a failure in other ways, too. It amped up Cold War tensions and made the USSR look to the rest of the world like a cruel and capricious enemy. It hastened the creation of West Germany, and, by demonstrating that the U.S. and Western European nations had common interests (and a common foe), it motivated the creation of the North Atlantic Treaty Organization (NATO), an alliance that still exists today. [Source: Together We Served | December 2019 ++]

Military History Anniversaries

01 thru 15 DEC

Significant events in U.S. Military History over the next 15 days are listed in the attachment to this Bulletin titled, "**Military History Anniversaries 01 thru 15 DEC**". [Source: This Day in History www.history.com/this-day-in-history | November 2019 ++]

MOH Awards

Update 15: Legislation to Strip 20 Awarded at Wounded Knee

On Dec. 29, 1890, the U.S. Army's 7th Cavalry opened fire on hundreds of Native Americans in one of most shameful and bloody acts of violence against indigenous people in American history. "I have never heard of a more brutal, cold-blooded massacre than that at Wounded Knee," wrote Maj. Gen. Nelson Miles, who served as an Army commander during the Indian Wars. A majority of the fatalities were women and children. For these acts at Wounded Knee, 20 Medals of Honor were awarded to the soldiers of the 7th Cavalry. Over a century later, some lawmakers are trying to strip those awards away.

On 27 NOV, two Senate Democrats unveiled legislation to strip the Medals of Honor from the American soldiers who participated in the Wounded Knee Massacre. The bill, known as the "**Remove the Stain Act**", was announced by Elizabeth Warren of Massachusetts and Jeff Merkley of Oregon, and serves as the Senate equivalent of a House bill H.R.3467 introduced earlier this year by Reps. Deb Haaland (D-NM) and Denny Heck (D-WA). In a statement, Warren said the bill was "a step toward righting wrongs against Native peoples." Earlier this year, President Donald Trump invoked the Wounded Knee massacre to mock Warren for a controversial decision to take a DNA test to ascertain Native American ancestry.



Mass grave for the men, women and children massacred at Wounded Knee in 1890.

In December of 1870, Chief Big Foot, leader of the Minneconjou Lakota, was leading his people to refuge in South Dakota when they were intercepted by the U.S. Army. They surrendered, were brought to an encampment at Wounded Knee Creek and surrounded by 470 soldiers and their formidable artillery, according to historian Mark Hirsch. Precise details on the battle have been difficult to ascertain, but historians believe that on 29 DEC, a disagreement broke out as American soldiers attempted to disarm Big Foot's men; a shot was fired, and then the Americans attacked. Estimates for the number of deaths range from fewer than 200 to more than 400, but there's consensus that most of the Native Americans killed were women and children.

Among the victims, Miles recalled in a November 1891 letter, were "women with little children on their backs, and small children powder-burned by the men who killed them being so near as to burn the flesh and clothing with the powder of their guns, and nursing babies with five bullet holes through them." The Medals of Honor awarded to soldiers at Wounded Knee have long been criticized as unjustified decorations for a lopsided massacre where little fighting occurred, and where evidence has pointed to many U.S. soldiers wounded by their own men rather than by Lakota Indians. Many of the award citations simply noted "gallantry" and "bravery" with few specific details, contradicted claims or acts that did not appear especially notable, according to the Nebraska Historical Society.

Cpl. Paul Weinert received the medal for firing a howitzer into an Indian position in a ravine. The fire "undoubtedly" killed and wounded women and children, the society wrote. Weinert said he was raked by Native gunfire that was

"coming like hail," but other sources suggest only three or four Lakotas were there, the society said. One soldier's draft recommendation noted a kitchen hand received the medal because his act of bravery was "voluntarily leaving his work as cook." Another appeared to receive the award for staying on with the campaign after his enlistment ended, the society said. Historians have also pointed to the unusually high number of awards from a moment of armed resistance that lasted as long as one hour. The Civil War battle at Antietam, the bloodiest day in U.S. history, resulted in the same number of Medal of Honor recipients.

The Medal of Honor was given more liberally in the 19th century, especially in the Civil War, when it was the only authorized medal. It wasn't until 1918, following a review and purge of more than 900 medals, that Congress tightened the criteria for receiving the medal for conspicuous gallantry. But that purge did not include the 20 Medals of Honor given for action at Wounded Knee. As the Medal of Honor gradually evolved to become the nation's most rare and distinguished military award, Native Americans have fought to have them rescinded for participants in the massacre. In 2001, the Cheyenne River Sioux Tribe passed a resolution requesting the U.S. government revoke the medals. The National Congress of American Indians has issued resolutions dating back to 1997 that make the same request.

Later, in 2019, the NCAI issued another resolution that supported Reps. Haaland and Heck's House bill. Congress issued a formal apology in 1990 that expressed "deep regret on behalf of the United States to the descendants of the victims and survivors and their respective tribal communities." It did not, however, offer any form of reparations to these individuals, the Associated Press reported. Upon unveiling the new House legislation in June, Haaland said she hoped that it "shows the continued work and strength of the Native American people who have fought for over a century for the United States to acknowledge the genocide of our people that has taken place on this soil," Stars and Stripes reported.

"We have a responsibility to tell the true story of the horrific Wounded Knee Massacre," Merkley said in a statement on 27 NOV. "We cannot whitewash or minimize the dark chapters of our history, but instead must remember, reflect on, and work to rectify them. The massacre of innocents could not be farther from heroism, and I hope this bill helps set the record straight." [Source: The Washington Post | Kayla Epstein & Alex Horton | November 29, 2019 ++]

Medal of Honor Citations

Francis J. Herron | Civil War



The President of the United States takes pride in presenting the

MEDAL OF HONOR

To

FRANCIS J. HERRON

Rank and organization: Lieutenant Colonel, 9th Iowa Infantry U.S. Army

Place and date: At Pea Ridge, Ark., 7 May 1862

Entered service: Pittsburgh, Pa.

Born: 17 February 1837, Pittsburgh, Pa.

Citation

Was foremost in leading his men, rallying them to repeated acts of daring, until himself disabled and taken prisoner.



Herron was born in Pennsylvania in 1837 and briefly attended the Western University of Pennsylvania, but left to become a bank clerk. In 1855, he moved to Dubuque, Iowa, where he opened a bank with his brothers. In 1859, he formed a militia group called the Governor's Grays, and with a possible civil war looming in January of 1861, he offered the services of his unit to President-elect Abraham Lincoln. Although they were turned down, Herron and his men thus had the distinction of being the first troops to volunteer for the Civil War. In April 1861, the Governor's Grays became part of the 1st Iowa Volunteer Infantry, and Herron was appointed as captain. The regiment saw service in Missouri, fighting with General Nathaniel Lyon's troops in the battles of Boonville and Wilson's Creek.

After his three month enlistment with the 1st Iowa expired, Herron was appointed lieutenant colonel of the 9th Iowa Volunteer Infantry. It was with this regiment that Herron would fight at the Battle of Pea Ridge, Arkansas on March 7 and 8, 1862. During the battle, Herron was wounded and then captured, although he was exchanged shortly afterwards. For his bravery, he was promoted to brigadier general, and eventually received the Medal of Honor for "rallying [his men] to repeated acts of daring, until himself disabled and taken prisoner."

Herron was made commander of the 2nd and 3rd Divisions of the Army of the Frontier in Missouri, and in December of 1862, he further distinguished himself by coming to the aid of General James G. Blunt's forces at the Battle of Prairie Grove, Arkansas. Herron and his men made a forced march of over 100 miles in three days to attack Confederate General Thomas C. Hindman's troops and force them into a retreat. For his quick and decisive actions, Herron was promoted to major general, becoming the youngest man to hold that rank at that time in the war.

By June of 1863, the Army of the Frontier was dismantled, and Herron led his division to join General Ulysses S. Grant in the siege of Vicksburg. After the fall of Vicksburg, Herron was one of three generals chosen to accept the formal surrender on July 4, 1863. Grant then sent Herron to Louisiana, where he took part in the siege of Port Hudson and the start of the Red River Campaign. Due to ill health, he was not able to continue with the expedition.

In October of 1863, Herron returned to command the XIII Corps in the Department of the Gulf of Texas, providing aid to Mexican President Benito Juarez to prevent the French troops of Emperor Maximilian from establishing a presence along the Rio Grande. During the last months of the war, Herron returned to Louisiana to command the Northern Division and aided in the capture of Mobile, Alabama. In May of 1865, he negotiated the surrender of Confederate forces in the Trans-Mississippi District.

Herron resigned his commission in June 1865 and took up permanent residence in Louisiana, where he served as tax collector of New Orleans and U.S. marshal. After being removed as Secretary of State in 1873 due to a falling out with the governor, Herron moved to New York City, where he returned to his original profession as a banker. Unfortunately, Herron was not to see the success in his later life that he enjoyed during the war, and when he died on January 8, 1902, he was destitute and living in a tenement building. He was buried in Queens, New York.

WWII Bomber Nose Art

[44] Shirley Ann



* Health Care *



Prescription Drug Costs

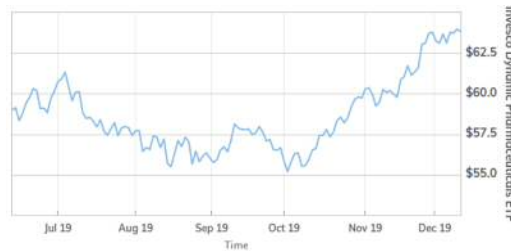
Update 40: Substantial Reforms Appear “Unlikely” In The Near Term.

Top Democratic lawmakers reiterated 11 DEC that the House is poised to pass their signature bill that aims to lower drug prices, as they continue to make an effort to show that they’re not solely focused on impeaching President Donald Trump. “We’re going to do this tonight and pass it tomorrow,” said House Energy and Commerce Chairman Frank Pallone, a New Jersey Democrat, referring to how the chamber is slated to begin consideration later in the day of the Elijah E. Cummings Lower Drug Costs Now Act. Pallone spoke Wednesday at a news conference with House Speaker Nancy Pelosi and other top Democrats.

His comment follows Pelosi’s move last week to talk up the drug-pricing bill and other legislation just two hours after announcing that House Democrats would proceed with drafting articles of impeachment against Trump. She also attacked Senate Majority Leader Mitch McConnell, the Kentucky Republican who has described himself as the “Grim Reaper” for blocking Democratic legislation. “The Grim Reaper says all we’re doing is impeachment. No, we have 275 bipartisan bills on your desk,” Pelosi said last week. Capital Alpha Partners analyst Kim Monk — who said three months ago that there’s no chance Pelosi’s bill will become law — wrote in a recent note that substantial drug-pricing reforms continue to appear “unlikely” in the near term.

Analysts have been predicting that a divided Washington won’t make major progress in 2019 on reining in rising drug prices or other bipartisan issues, and the Democrats’ impeachment inquiry has helped reinforce those predictions. To be sure, there has been bipartisan agreement on some issues, such as a key trade deal, the U.S.-Mexico-Canada Agreement. But in the case of Pelosi’s drug-pricing bill, the White House on 10 DEC said the president would veto the

measure. The lack of progress on dealing with rising drug costs may have encouraged investors to buy drugmakers' stocks. The Invesco Dynamic Pharmaceuticals ETF PJP, -0.25% on Monday notched its highest close in seven months, and it has gained about 19% in the past two months, while the broad S&P 500 index SPX, +0.06% has tacked on just 7% in the same period. The pharma ETF is now up 3% in 2019, still far behind the S&P's year-to-date climb of 25%.



Some analysts have said that if Pelosi's bill somehow were to become law, it would undermine pharmaceutical industry profits, while other measures wouldn't hurt nearly as much. A bipartisan bill from the Senate Finance Committee's highest-ranking members would have a "negligible" impact on the industry, affecting about 2% of drug sales and representing a "a positive outcome for the industry," said Bernstein analysts in a recent note. A Trump administration plan tied to an International Pricing Index (IPI) would hit about 3% of sales and significantly affect a few companies, but have "very modest effects" on most companies, the analysts added. "The Pelosi plan is more of the 'nuclear winter,' as it will apply to the entire U.S. market (not just government programs) and applies both IPI and large rebates" the Bernstein team wrote.

Washington is focused on drug prices after health care ranked as the most important issue for voters in the 2018 midterm election. Amid the increased attention and range of measures aimed at prices, drugmakers have ramped up their lobbying spending to levels last seen a decade ago. [Source: Market Watch | Victor REhlatis | December 11, 2019 ++]

Senior Surgery

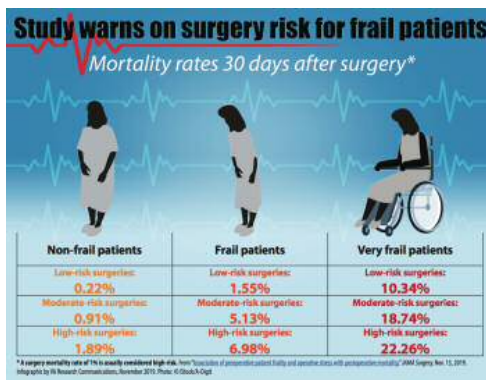
Update 01: Frail Patients May Be at Higher Risk than Previously Thought

A VA-funded study has shown that frail surgery patients may be at higher risk than previously thought. Mortality rates were high for frail patients even after surgeries normally considered low-risk. This led the researchers to conclude that "there are no 'low-risk' procedures among frail patients." The findings appeared Nov. 13, 2019, in the journal JAMA Surgery. Frailty refers to overall physical weakness. It is common in older adults. While it is a well-known surgery concern, most of the previous research on frail patients has focused on high-risk surgeries. A surgery is usually considered high-risk when the post-surgery death rate is above 1%.

The researchers looked at data on more than 400,000 Veterans who had non-cardiac surgeries within VA. Out of this group, 8.5% were considered frail and 2.1% were very frail, based on a measure called the Risk Analysis Index (RAI). "We certainly found it surprising that surgeries usually considered low-stress and low-risk had such high risk of mortality for frail patients." Patients were grouped based on what type of surgery they had. Low-risk surgeries included hernia surgery, appendectomy, and cyst removal. Surgeries such as amputation; arterial plaque removal; and knee, shoulder, or hip replacement were considered moderate-risk. High-risk procedures were mostly open surgeries on the aorta, lungs, liver or pancreas.

Mortality rates for frail and very frail patients were "alarmingly high" across all levels of surgery, compared with stronger patients. Thirty days after a low-risk surgery, 1.6% of frail patients and 10.3% of very frail patients had died. Non-frail patients had a 0.22% mortality rate after low-risk surgery. For moderate-risk surgeries, 5.1% of frail patients

and 18.7% of very frail patients died within 30 days. Mortality continued to rise for frail patients as time went on. The highest mortality rate recorded in the study was for very frail patients 180 days after moderate-risk surgery. About 43% of those patients had died. Frailty remained a significant predictor of mortality regardless of the number of complications a patient had.



New studies show that “there are no ‘low-risk’ procedures among frail patients.”

The results show that frailty adds significant risk to surgery, say the researchers, even when the surgery is considered minor. Based on the results, the researchers recommend that patients be assessed using the RAI before any type of surgical procedure. If frailty is found to be a factor, they say, surgeons could focus on pre-operative interventions to address it.

Dr. Daniel Hall, the corresponding author on the paper, is leading efforts to spread preoperative frailty screening in VA. The practice has been implemented in several VA medical centers already. Hall, a researcher at the VA Pittsburgh Healthcare System and the University of Pittsburgh, recently took part in a “Shark Tank” event held by VA’s Diffusion of Excellence program. The VHA Shark Tank Competition offers VA employees the opportunities to share practices that address clinical and operational priorities to improve the Veteran care experience. Through the competition, Hall received bids to implement the frailty screening at several more VA sites, earning Hall’s practice the honor of “Gold Status.” [Source: Vantage Point | Tristan Horrom | December 4, 2019 ++]

Styes and Chalazia

Eyelid Inflammation Treatment

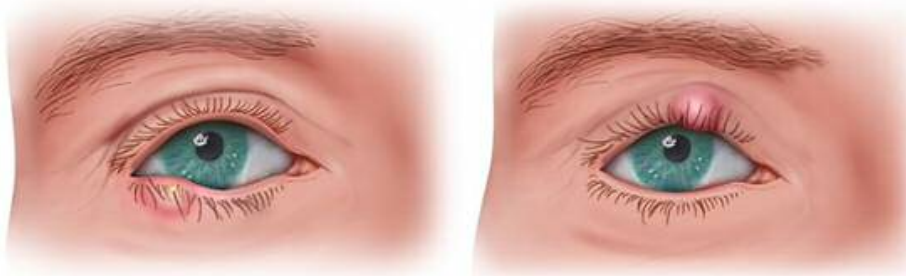
Eyelid inflammations can occur if a gland along the edge of the eyelid becomes inflamed. This leads to swelling. If it’s caused by bacteria, this can happen very quickly and hurt. It is then known as a stye (hordeolum) – a pus-filled swelling on the eyelid, caused by an infection. There’s another kind of eyelid inflammation called a chalazion (also known as a meibomian cyst). This develops more slowly and usually doesn’t hurt. It occurs after an oil gland (sebaceous gland) has been inflamed for quite a long time. It is not caused by bacteria.

The eyelid has various glands in it that keep the eyes from becoming too dry: a lot of small sweat glands and oil glands near to the eyelashes along the edge of the eyelid, and oil glands on the inner part of the eyelid. The oil that is made there mixes with the tear fluid covering the eye, keeping the eye moist. If a gland at the edge of the eyelid becomes blocked or infected with bacteria, the tear fluid is affected, causing the eyelid to become inflamed.

Symptoms

If you have an eyelid inflammation, your upper or lower eyelid is red and swollen – usually at the edge of the eyelid, close to the eyelashes. The swelling can grow to about the size of a pea. Styes are painful. Pus collects in the middle of the swelling, and can often be seen as a yellow lump. Chalazia don’t have pus in them and usually aren’t painful either.

But many people find them bothersome. They often occur on the inner part of the eyelid. Both styes and chalazia can develop on the lower or upper eyelids.



Stye on the lower (left) and upper (right) eyelids

Causes and risk factors

Styes occur if bacteria infect a gland in the eyelid. These are usually staphylococcus bacteria. You're more likely to get styes if, for instance, you don't clean your hands properly before putting contact lenses in or taking them out. The risk is also greater if the oil or sweat made in glands can't flow out properly. This might happen if the glands are blocked by dried-up secretions or by make-up that hasn't been removed. Styes are also more common in people who have diabetes or another disease that weakens the immune system. Further risk factors include hormonal fluctuations, stress and skin conditions like rosacea.

Chalazia usually develop because an oil gland has become blocked and is then inflamed for a long time: The oil (sebum) builds up, and more and more of the tissue becomes inflamed and hard. This type of tissue is known as granulation tissue. The inflammation isn't caused by bacteria, so there's no pus. You're more likely to develop a chalazion if you have a chronic skin condition like rosacea.

Return to top

Prevalence, Outlook and Effect

Inflammations of the eyelid, such as styes and chalazia, are common and can occur at any age. Styes develop very quickly, but usually go away again soon after: The pus normally leaves the stye on its own after about a week, and the inflammation goes down. The swelling associated with chalazia develops more slowly. It usually goes down on its own, but also more slowly than the swelling associated with styes. It can take weeks or months for chalazia to go away completely. But they sometimes don't go away on their own.

If a stye doesn't go away completely, it might develop into a chalazion. Or a new stye might develop in the same place. The inflammation caused by styes might spread, for instance to the eye socket. But these complications are very rare, particularly in people who are otherwise healthy. It's important to avoid touching the inflamed area and to pay particular attention to good hygiene – for example, by not sharing towels with other people.

Diagnosis & Treatment

It's easy to diagnose styes and chalazia based on what they look like and the symptoms they cause: If the inflamed area doesn't hurt, even when you push against it, it's probably a chalazion. Eye doctors usually test your eyesight too, and take a closer look at your eyes and eyelids with the help of a special magnifying lamp (a slit lamp). Because styes are normally caused by staphylococcus bacteria, there's usually no need to do a swab test to find out what's causing the infection. Other tests, such as blood tests or tissue examinations, are only needed if the doctor thinks it could be cancer or if you have a weakened immune system. Some of the tests involve quite a bit of time and effort.

Styes and chalazia usually go away on their own. You can usually just wait. If a stye or chalazion doesn't go away, it might be possible to remove it during a minor surgical procedure. Styes normally burst open on their own after about one week. The pus then comes out and the swelling goes down. The following things are thought to relieve the symptoms of styes and make them go away faster. But there's no scientific evidence that they do:

- **Heat:** Applying heat is believed to make styes “come to a head” more quickly, so that the pus comes out sooner and it can heal faster. The heat can be applied to the eyelid using an infrared light three times a day for 10 minutes each time. You can also use eye masks or compresses that can be heated to a pleasant temperature. They are placed on the inflamed eyelid for 5 to 10 minutes several times a day. Wet cloths usually aren’t recommended. They might soften the skin too much when used for a long time, which could make the inflammation spread further.
- **Keeping the edge of the eyelid clean:** People are often advised to carefully massage and clean the edge of the eyelid, for instance with special cleansing wipes or compresses soaked in eyelid-cleansing fluids. These are available in pharmacies. It’s okay to briefly cleanse the eyelid with fluids in this way. The aim is to open the blocked pores, allowing pus and secretions to flow out more easily. It’s important not to try to pop styes.
- **Germ-fighting (antiseptic) substances:** These medications can be applied to styes in the form of creams or gels, for instance.
- **Antibiotics:** Antibiotic ointments should only be used after consulting a doctor. Treatment with tablets, syrups or infusions is only considered if someone has a higher risk of the inflammation spreading and causing complications, for instance because they have a weakened immune system.

Chalazia usually go away on their own too, but you need to be patient: It can take several weeks or even months for the swelling to go down completely. Just like with styes, there are various treatment options, but there’s a lack of good research on them. Things like anti-inflammatory ointments, gels or eye drops can be used as soon as a chalazion appears, with the aim of making it go away faster. If a chalazion doesn’t go away or it pushes against the eye so much that it affects your eyesight or causes pain, an eye doctor can perform surgery to remove the lump.

[Source: <https://www.informedhealth.org/styes-and-chalazia-inflammation-of-the-eyelid.2670.en.html> | December 5, 2019 ++]

Epilepsy

Overactivity in the Brain

In epilepsy, the brain or some parts of the brain are overactive and send too many signals. This results in seizures, also referred to as epileptic fits. Seizures sometimes only cause a few muscles to twitch – but they may also cause your whole body to convulse (shake uncontrollably) and result in loss of consciousness. Epilepsy can arise at any age. Some people already have their first seizure in childhood, and others have their first seizure in older age. There are usually no physical symptoms in between seizures. Many people worry about having another seizure, though. Medication can help to prevent seizures and maintain a good quality of life. Unfortunately, it doesn't always help: About 3 out of 10 people still have regular seizures. This makes it particularly difficult for them to live with epilepsy.

Symptoms

Epileptic seizures can vary greatly from person to person. Some only last a few seconds and even go unnoticed, some only affect one arm or one leg, whereas others affect the whole body. Sometimes people become unconscious, sometimes they are just mentally absent for a short while, and sometimes they remain fully conscious. Epileptic seizures don't usually last very long. If a seizure lasts longer than five minutes, it is referred to as "status epilepticus." This is a medical emergency requiring immediate treatment with medication. People may also have several seizures within a short space of time. There are two main categories of epileptic seizures: Generalized and Partial (focal)

- Generalized seizures affect the whole brain. They aren't necessarily worse than seizures that affect individual parts of the brain (partial seizures). But generalized seizures are more likely to lead to loss of consciousness and make your whole body convulse. There are different types of generalized seizures:
 - *Tonic seizures:* Your arms and legs become rigid and stiff. This kind of seizure usually passes quite quickly and doesn't always affect your state of consciousness.

- *Atonic seizures* ("drop attacks"): Here the muscles in one part of your body suddenly become limp. As a result, your chin might drop down towards your chest, or your legs might give way, for instance. You may also briefly become unconscious and fall.
 - *Clonic seizures*: Large muscle groups – for instance in the arms or legs – jerk in a slow rhythm. This is usually accompanied by loss of consciousness.
 - *Myoclonic seizures*: Individual muscle groups twitch rapidly. Your state of consciousness is usually not affected.
 - *Tonic-clonic seizures* (sometimes called "grand mal seizures"): Your whole body convulses and twitches, and you become unconscious.
 - *Absence seizures* (sometimes called "petit mal seizures"): In this mild type of seizure, people suddenly lose awareness (appear to "zone out") for a brief moment.
- Partial seizures arise in just one part of the brain. The symptoms will depend on what that part of the brain does, and may include things like twitching of the arm (motor disturbances), abnormal sensations (sensory disturbances) or changes in vision (visual disturbances). When people have partial seizures they may experience abnormal sensations, lose awareness, or hear, see or smell things differently. They may also feel dizzy, feel anxious or hallucinate. This is known as an aura. Some people smack their lips, grimace, stammer, walk around aimlessly or fiddle with things. Partial seizures may be accompanied by twitching or convulsions. Sometimes partial seizures affect your awareness or ability to concentrate. Partial seizures may spread across the whole brain, resulting in a generalized seizure.

Causes and risk factors

The brain is made up of billions of nerve cells (neurons). Different areas of the brain are responsible for different things, including movement, speech, perception and feelings. The nerve cells communicate with each other using electrical and chemical signals. During an epileptic seizure, the interactions between nerve cells temporarily go haywire. As a result, certain areas of the brain or all areas of the brain become overly active and fire off too many signals. The resulting "storm in the brain" has noticeable effects, such as convulsions, in the rest of the body.

Epilepsy can be caused by a wide variety of things, including injuries, inflammations of the brain or the lining of the brain, strokes or tumors. If there is a known cause for someone's epilepsy, it is referred to as "symptomatic epilepsy." But it is often not possible to find a clear cause. Sometimes several people in different generations of a family have epilepsy. This is a sign that it may be genetically inherited. Things like strobe lights in night clubs can trigger seizures in some people. Certain conditions might also sometimes cause seizures. Examples include not getting enough sleep, a lack of oxygen, poisoning, alcohol or – particularly in children – a high fever. These kinds of factors can even cause a seizure in someone who doesn't have epilepsy. It is then known as a provoked seizure. Children who are prone to febrile seizures, for instance, only rarely have epilepsy as well.

Prevalence & Outlook

Doctors only consider it to be epilepsy if someone has had a number of seizures for no apparent reason. That happens in just under 1 out of 100 people. Including provoked seizures, it's estimated that about 10 out of 100 people will have at least one seizure at some point in their life. Epilepsy can arise at any age. Many people who have epilepsy already develop it in childhood. It is a little less likely to develop in middle age, between the ages of 40 and 59. The likelihood then increases again in people aged 60 and over. Many people only ever have one seizure in their life, or only have epilepsy for a few months or years. Others have it all their lives. About half of all people who have one seizure will have another one. People who have had a second seizure are even more likely to have further seizures: About 7 out of 10 of them have another seizure within a few years.

But these are only averages. The individual's risk of having another seizure will greatly depend on the exact cause. For instance, some people have seizures for no known reason or because they have a genetic predisposition (it runs in their family). Compared to them, people who have had seizures with a known cause (such as a brain disease) are twice as likely to have further seizures. Some people take medication and don't have seizures for years – even after they stop

taking the medication. Others only remain seizure-free when they are on medication. About 3 out of 10 people with epilepsy have regular seizures despite having various kinds of treatment.

Effects & Diagnosis

It can take a while to recover from more severe epileptic seizures. Some people are exhausted for a few hours afterwards, and sleep a lot. They may also feel down for a bit or have temporary problems with forgetfulness, speech, or paralysis. Other people feel normal again after a few minutes and can return to work or school activities. Epileptic seizures may lead to injury. This is particularly likely if people have generalized seizures, where their whole body convulses (shakes uncontrollably). They could fall, hurt themselves or bite their tongue. The fear of having another seizure can be very distressing, especially if they occur frequently. Epilepsy can also increase the likelihood of developing depression.

Epileptic seizures don't cause lasting damage to the brain or result in mental disability. Having frequent and severe seizures over many years can make you more forgetful and less able to concentrate, though. Whether epilepsy affects your life expectancy will very much depend on what is causing it. People whose epilepsy is caused by another medical condition generally tend to have a shorter life expectancy, but that's often due to the underlying condition, not the epilepsy. People whose epilepsy is caused by genetic factors have a similar life expectancy to people without epilepsy. Epilepsy can itself lead to death in the following situations:

- If someone has an accident because of a seizure and it results in a life-threatening injury.
- If a severe, long-lasting seizure (status epilepticus) prevents the brain from getting enough oxygen, and that leads to heart and lung failure.

Sudden, unexpected death in epilepsy (abbreviated as SUDEP) is extremely rare. Someone is considered to have epilepsy if the seizures keep recurring. Epilepsy is usually diagnosed if

- They have had at least two seizures,
- There was a period of at least 24 hours between the seizures, and
- There is nothing to suggest that the seizures were caused by certain factors (provoked seizures).

Your medical history is important for making a diagnosis: For instance, when and under what circumstances did the seizure occur? What happened during the seizure? People who have seizures often can't remember much about what happened themselves. Then it makes sense to take someone along who saw the seizure and can describe exactly what happened. Physical and neurological examinations are done, and a blood sample is taken. The most important of these is an electroencephalogram (EEG), a painless test that measures the electrical activity in your brain. Certain EEG patterns indicate that you are more likely to have seizures. But an EEG alone isn't enough to diagnose epilepsy. An MRI (magnetic resonance imaging) scan is usually done too. This helps to find out whether there are changes in the brain that could be causing the seizures. In rare cases the cerebrospinal fluid is tested – typically if doctors think that you might have an inflammation in your brain or in the membranes surrounding the brain and spinal cord (meningitis). The fluid is taken from the lumbar (lower back) region of the spine, using a needle. This procedure is known as a lumbar puncture or spinal tap.

Treatment

The most suitable kind of treatment for a specific person will depend on the type of epilepsy they have and the course of their disease so far. Epilepsy is usually treated with medication known as anti-epileptic drugs (AEDs). Various kinds of medications – from different groups of drugs – can be used as AEDs. If a certain medication doesn't work at a low dose, the dose can be increased. If that doesn't work, a medication from a different group of drugs can be tried out or several medications can be used together.

Seizures are often one-off events, so you can usually wait before having any treatment. People typically only start treatment if they have a second seizure. But if you have a higher risk of further seizures, for example if you have a brain disease, then it may be a good idea to already start with treatment after the first seizure. It's important to discuss your personal situation with your doctor.

People who decide to take medication usually take it for several years. If they don't have any seizures during that time, some people can stop taking the medication and see what happens. Others have to take medication for the rest of their lives. Anti-epileptic drugs can have side effects like tiredness or dizziness. There are also sometimes specific risks, for example ones affecting an unborn baby during pregnancy. Then it's especially important to discuss the options in detail with your doctor. If seizures can't be prevented with medication, other options may be considered. These include the following:

- *Surgery*: If someone has partial seizures and it's clear which part of the brain is triggering them, that part of the brain can be surgically removed. But that's not always possible.
- *Vagus nerve stimulation*: In this procedure, a device that produces electrical signals is implanted in your chest area. It is connected to the vagus nerve in the neck by wires and is meant to prevent the nerve cells from being too active. The vagus nerve is an important part of the vegetative nervous system and is involved in regulating the body's internal organs.

The treatment is overseen by a neurologist. Children are treated by child neurologists (pediatric neurologists). One part of the examination and treatment is usually done in a hospital. There are outpatient facilities and clinics that specialize in treatments for people with epilepsy (e.g. epilepsy centers, epilepsy outpatient hospital departments, and specialized doctors' practices). These are particularly suitable if you have a specific problem, if the diagnosis is not clear, or if you keep on having seizures despite treatment.

The most important thing that helpers can do during an epileptic seizure is stay calm and prevent injury. If the seizure lasts longer than five minutes or if several seizures occur within a short space of time, the emergency services should be informed (e.g. by calling 112 in Germany and most European countries, or 911 in the U.S.). People who have a severe epileptic seizure sometimes have to stay in hospital for a bit. It may be helpful to have psychological treatment too. This can help you to cope with the effects of epilepsy and improve your quality of life. It is not yet clear from scientific research whether this can also lower the number of seizures.

[Source: <https://www.informedhealth.org/epilepsy.2587.en.html> | December 5, 2019 ++]

TRICARE Premium Payments

Computer Glitch Charges 100 Times Monthly Amount Due

Beneficiaries of the TRICARE military health system in the Eastern U.S. were surprised by eye-popping charges on their credit cards and bank accounts 5 DEC due to an apparent computer glitch that charged them 100 times what their monthly premiums should have been. The problem appeared to have originated with a third-party payment processor used by Humana Military, the contractor that serves TRICARE beneficiaries in all states east of the Mississippi River, plus Louisiana, Arkansas, Oklahoma and most of Texas. In effect, the system moved premium amounts two decimal places to the right — turning, for example, what should have been a \$50 monthly charge into \$5,000.

Humana did not immediately answer questions about what caused the problem or what it was doing to correct it. But the Defense Health Agency confirmed that it had occurred. DHA said the payment processor was working to reverse the errant charges, and that people who were overbilled should see credits to their original payment methods within 48 hours. It was not immediately clear how many TRICARE beneficiaries were affected, but DHA said the glitch likely would have impacted anyone in the TRICARE East region who pays for their coverage by monthly premiums. That would include most military retirees and some members of the National Guard and Reserve. Advertisement Active duty service members and their families, however, would not have been affected, since they do not pay monthly premiums.

The Humana payment problem is not the only technical difficulty facing TRICARE users during the busy annual open season for benefit elections. Since mid-November, the Defense Department website that beneficiaries normally use to change their health plans during the open season window has been offline. Because of that, anyone who wants to change their plan before open season ends on Dec. 9 must do so by mail or phone.

[Source: Federal News Network | Jared Serbu | December 5, 2019 ++]

Heart Transplant

Vet Becomes First U.S. Recipient of a DCD Heart

A veteran became the first U.S.-based adult patient to receive a heart transplant from a donor whose heart and circulatory system had been declared dead. Heart transplants are traditionally made during the short interval when a donor has been declared neurologically dead but has a still-beating heart. The surgery team at Duke University Hospital in Durham, North Carolina, conducted the groundbreaking procedure as part of a trial to test the TransMedics Organ Care System, a device that circulates warm, oxygenated blood through a heart that has stopped beating. Once the heart restarts, it can remain in the system until the recipient is ready for the operation.

Transplants of this nature have been done for other organs, but to this point, only surgeons in Europe and Australia have conducted the procedure, which is classified as a Donation after Circulatory Death, or DCD, according to the Duke University press release. “It’s important to conduct this clinical trial to determine whether those outcomes are realized,” Dr. Jacob Schroder, the surgical director of Duke’s Heart Transplant Program in the Department of Surgery, said in the release. “We are grateful for the courage and generosity of both the donors and recipients.”

The ability to revive — or reanimate — the heart should drastically increase survivability of those desperate for transplants by expanding the donor pool by up to 30 percent, Schroder said. “Increasing the number of donated hearts would decrease the wait time and the number of deaths that occur while people are waiting.” Duke is currently one of just five U.S.-based surgical centers authorized to use the TransMedics Organ Care System to perform the DCD heart transplant. The veteran recipient, whose name was left out of the release, is reportedly recovering well. The patient was afforded the opportunity for the procedure through the VA’s Mission Act. [Source: MilitaryTimes | J.D. Simkins | December 4, 2019 ++]

Skin Regeneration

New Technology Can Help Wounded and Ill Vetes Regrow Skin

Two skin regeneration products going to market this month may help wounded veterans heal faster and prevent limb-threatening diabetic ulcers. MTF Biologics, a global nonprofit and the world's largest tissue bank, is unveiling both an injection that promotes fat cell growth under the skin and an epidermis-like bandage at a limb salvage conference in Phoenix this week. Both products are available at the Department of Veterans Affairs through Academy Medical, a procurement service. The first product, called *Leneva*, lets doctors create skin cell growth below the surface with an injection. The other, *SomaGen Mesh*, is a breathable cover that promotes rapid skin regrowth to speed up healing for open wounds like diabetic ulcers.

Dr. Matthew Regulski, a podiatric surgery specialist who's used both products on patients, said 80% of chronic wounds occur from the knee down. Diabetics are at risk of developing chronic foot ulcers. These can result in amputation, and 40% of such patients die within five years from associated complications. Veterans are more likely than civilians to become diabetic, recent research has shown. Data from the Centers for Disease Control published in

2017 showed 9.4% of the general population had diabetes. The US National Health and Nutrition Examination Survey found nearly 25% of veterans had diabetes.

Regulski said most people don't know how debilitating diabetes can be: It affects the whole body physically by slowing down the immune system. There is also a mental effect because patients are told how to live their lives and what to eat, which can lead to depression. As the seventh leading cause of death, diabetes has killed more people than all cancers combined, he said. For this reason, *Leneva* has huge potential to heal and prevent diabetic ulcers by encouraging more blood flow under the surface of wounds by creating new fat cell growth, Regulski explained.

Meanwhile, he said what sets SomaGen apart from current products is its design, which lets it expand up to 150% to accommodate wounds of various sizes, making it useful for combat wounds and burn victims. "With *SomaGen*, you get these large pieces," he said. "It's already penetrated. It has folds to allow fluid to move through from the wound." It's also a cheaper alternative to typical skin regeneration, he added, which must be harvested and stored. "The recurrence of chronic and complex wounds are painful and can be both life-threatening and costly to treat," said Kim Rounds, vice president of wound care at MTF Biologics.

[Source: Military.com | Dorothy Mills-Gregg | December 4, 2019 ++]

Cancer Q&A

191201 thru 191215

(Q) How does obesity and eating fish impact on cancer?

Answer. Because people are interested in the possible links between specific foods, nutrients, or lifestyle factors and specific cancers, research on health behaviors and cancer risk is often reported in the news. No one study, however, provides the last word on any subject, and single news reports may put too much emphasis on what appear to be conflicting results. In brief news stories, reporters cannot always put new research findings in their proper context. Therefore, it is rarely, if ever, a good idea to change diet or activity levels based on a single study or news report. The following address common concerns about obesity and eating fish in relation to cancer:

- *Does being overweight increase cancer risk?* Yes. Being overweight or obese is linked with an increased risk of cancers of the breast (among women after menopause), colon and rectum, endometrium, esophagus, kidney, and pancreas, and probably cancer of the gallbladder as well. It may also be linked with increased risk of cancers of the liver, cervix, and ovary, as well as non-Hodgkin lymphoma, multiple myeloma, and aggressive forms of prostate cancer.

Research on whether losing weight reduces cancer risk is limited, but some research suggests that weight loss lowers the risk of breast cancer in women past menopause and possibly other cancers. Because of other proven health benefits, people who are overweight are encouraged to lose weight and keep it off. Avoiding excess weight gain as an adult is important not only in possibly lowering cancer risk but also in reducing the risk of other chronic diseases.

- *Will increasing physical activity lower cancer risk?* Yes. People who get moderate to vigorous levels of physical activity are at a lower risk of developing several cancers, including those of the breast, colon, and endometrium (lining of the uterus), as well as advanced forms of prostate cancer. For some cancers, this risk is lowered whether or not the activity affects the person's weight.

Data for a direct effect on the risk of developing other cancers is more limited. Even so, physical activity is a key factor in reaching and staying at a healthy body weight, and being overweight or obese has been linked with many types of cancer. Physical activity is also helpful in lowering the risk of heart disease, diabetes, and other diseases.

- Does eating fish protect against cancer? Fish is a rich source of omega-3 fatty acids. Studies in animals have found that these fatty acids may stop cancer from forming or slow its growth, but it is not clear if they can affect cancer risk in humans.

Eating fish rich in omega-3 fatty acids is linked with a reduced risk of heart disease, but some types of fish (such as swordfish, tuna, tilefish, shark, and king mackerel) may contain high levels of mercury, polychlorinated biphenyls (PCBs), dioxins, and other pollutants. Some studies have also shown that farm-raised fish may carry more of these harmful substances than fish caught in the wild. Women who are pregnant, planning to become pregnant, or breast-feeding, and young children should not eat these fish, and should limit eating albacore tuna to no more than 6 ounces a week and canned light tuna to no more than 12 ounces a week. People should vary the types of fish they eat to reduce the chance of exposure to toxins.

[Source: American Cancer Society | December 1, 2019 ++]

TRICARE Podcast 530

Overseas Holiday Travel - Plan Finder - Moving w/Dental Program

Overseas Holiday Travel -- Tis the season for holiday travel. According to the Transportation Security Administration, a record number of flyers is expected this holiday season. Are you one of them? Remember that when you travel, your TRICARE coverage goes with you. But the rules for getting care vary based on your sponsor status, your location, and your health plan. And it's important to note that when you're traveling out of the country, your TRICARE health plan has slight differences. If you intend to travel overseas this holiday season, here are some tips to keep in mind if you need to get care:

- If you reasonably think that you have an emergency, you should go to the nearest emergency care facility, or call the Medical Assistance number for the area where you are to coordinate emergency care.
- For non-emergency care, or to find a provider, you can call the TRICARE Overseas Program Regional Call Center for your area. Visit www.tricare-overseas.com for contact information.
- If you need urgent care, you can get it from any civilian provider. But review the rules for getting urgent care overseas at www.TRICARE.mil/urgentcare.
- When you get care overseas, you may need to pay up front for services and file a claim to get money back. Keep all receipts and file claims with the TRICARE Overseas Program claims processor, not with your regional contractor in the U.S. If you're enrolled in the US Family Health Plan or Continued Health Care Benefit Program, you should file claims with your contractor. If you're admitted to a hospital, call the TRICARE Overseas Program Regional Call Center before leaving the facility, preferably within 24 hours or on the next business day.

To learn more about getting care when traveling overseas, read this week's article, "Traveling Overseas This Holiday Season? TRICARE Travels With You," at www.TRICARE.mil/news.

-o-o-O-o-o-

Overseas Holiday Travel -- Did you know that the TRICARE website can help you learn what health plans you may be eligible for? And that you can compare plan features and costs? Your plan options vary depending on who you are and where you live. If you aren't sure what health plans you may be eligible for, start by using the TRICARE Plan Finder at www.TRICARE.mil/planfinder. Answer a few simple questions, and the tool will display the plans you may be eligible for based on your sponsor status, age, and location. You can do this for yourself or for family members. Remember that different family members may be eligible for different plans. You may also choose multiple plans and compare their features side-by-side using the Compare Plans Tool at www.TRICARE.mil/compareplans.

-o-o-O-o-o-

Moving with TRICARE Dental Program - When making plans to travel or move, know how your dental benefit goes with you. If you're enrolled in the TRICARE Dental Program, or TDP, you're covered around the world, whether moving to a new duty location or traveling on leave. When moving, your TDP dental benefit transfers with you. This means you don't have to fill out a new enrollment application as your coverage remains in place. But you'll need to update your address in the Defense Enrollment Eligibility Reporting System.

Before you move, get copies of your dental records. TDP doesn't cover copying records for a sponsor's permanent change of station. If you don't get copies, you may have to pay for them at your new location. After you move, you should find a new TDP network dentist. On the United Concordia Companies, Inc. website at uccitdp.com, you can click on "Find a Dentist" to locate a dentist near you. To learn more about moving or traveling with your dental benefit, read the article, "Traveling or Moving? TRICARE Dental Program Goes With You," at www.TRICARE.mil/news.

-o-o-O-o-o-

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> | November 26, 2019 ++]

TRICARE Podcast 531

Benefit Updates - Tobacco Cessation Services

Benefit Updates -- TRICARE recently expanded coverage for beneficiaries who meet certain criteria. Coverage now includes concurrent pediatric hospice and curative care, portable CPAP machine, and platelet rich plasma injections. There are many changes to the TRICARE program every year. To stay current on updates to the TRICARE benefit, sign up for email updates at www.TRICARE.mil/subscriptions. You can also see what TRICARE covers by going to www.TRICARE.mil/coveredservices. To learn more about these three benefit updates, check out the latest article, "TRICARE Expands Care With New Policy Changes," at www.TRICARE.mil/news.

-o-o-O-o-o-

Tobacco Cessation Services -- Do you want to quit tobacco? This includes smoking, vaping, and smokeless tobacco. TRICARE can help. Tobacco use is the leading cause of preventable disease, disability, and death in the U.S., according to the Centers for Disease Control and Prevention. You don't need to have a tobacco-related illness to use your TRICARE benefits. TRICARE covers certain prescription and over-the-counter products at no cost to you to help beneficiaries quit tobacco. You must:

- Have a prescription from a TRICARE-authorized provider.
- Fill your prescription through the TRICARE Pharmacy Home Delivery or at a military pharmacy.
- Be age 18 or older if you're living in the U.S.
- Be enrolled in TRICARE Overseas Program Prime if you're living overseas or in the U.S. territories of Guam, Puerto Rico, or the U.S. Virgin Islands.

Learn more about why you should quit tobacco use and how TRICARE can help. Read the article, "Choose to Quit Tobacco: TRICARE Can Help," at www.TRICARE.mil/news.

-o-o-O-o-o-

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> | December 9, 2019 ++]



SBP DIC Offset

Update 62: Widow's Tax on Verge of Elimination

Lawmakers are poised to get rid of the military “widows tax” that cost some families of deceased service members tens of thousands of dollars annually in lost benefits payments because of federal accounting problems. Advocates hailed the move as a major step forward for military spouses who have faced frustration and financial hardship for years. “This has been a decades-long battle to provide surviving spouses the benefits they have earned and paid for,” said Ashlynn Haycock, deputy director for policy and legislation at the Tragedy Assistance Program For Survivors. “We are incredibly grateful for all those who have fought so hard and for so long to see this and we look forward to seeing the bill become law in the coming days.”

The fix is included in the compromise version of the fiscal 2020 defense authorization bill, released 9 DEC. The proposal is expected to be voted on by the full House on 11 DEC and the Senate next week. Addressing the widows tax has been a bipartisan promise of Congress for years, but the expected cost — \$5.7 billion over the next decade — has proven to be a barrier in finding a permanent solution. The problem stems from how the government handles two separate military survivor payouts.

The first, the Dependency and Indemnity Compensation program, awards around \$15,000 a year to survivors of veterans or troops who die of service-related causes. There is no cost to troops or families to enroll. The other, the Survivor Benefit Plan, gives families of military retirees who enroll up to 55 percent of their loved ones' retirement pay after the veteran dies. The life insurance-type payouts are subsidized by DoD, but require enrollees to pay-in part of their retirement benefit to be eligible.

Individuals who qualify for either SBP money or DIC benefits receive full payouts from the respective programs. But family members who qualify for both are subject to an offset, where for every dollar paid out in DIC their payouts under SBP are reduced by one dollar. That costs those families up to \$1,000 a month in payouts that advocates insist they deserve. Some families have avoided the offset penalty by transferring benefits into their children's accounts, but that creates other complicated tax issues. The problem affects about 65,000 military families.

In the annual defense bill, lawmakers inserted a three-year phase-out of the offset. Starting Jan. 1, 2021, families affected by it will receive one-third of their full SBP payout. A year later, that will rise to two-thirds. In 2023, it grows to the full SBP amount. The bill will also drop the option to transfer those benefits to children after 2023. Families currently using that loophole will be able to move those benefits back to surviving spouses at that time. “While we still have to get through both chambers and the White House, it is heartening to know Congress maintained their commitment to repeal the widows tax in spite of having to weigh the many competing priorities presented in conference,” said retired Air Force Lt. Gen. Dana Atkins, president of Military Officers Association of America.

The changes do not address the related “kiddie tax,” where families who transferred the military benefits to an underage dependent faced hefty bills this year as a result of the 2017 tax code overhaul. That issue will have to be dealt with in separate legislation. However, advocates are hopeful that by fixing the offset problem, fewer families will use that financial move in the future, limiting the impact of that problem. Lawmakers are planning a press conference to celebrate the fix — and reaching a compromise on the broader authorization bill — later this week. The measure has been adopted by Congress in some form for the last 58 years in a row. [Source: MilitaryTimes | Leo Shane III | December 10, 2019 ++]

Retirement Planning

Update 21: Surprising Benefits of Not Doing It with Your Spouse

When you have a partner, you might assume that you need to make sure you retire in lockstep. After all, what's the good of having a retirement if your beloved isn't right there with you? As it turns out, there are actually some benefits associated with retiring at a different time than your spouse. Here are some advantages to consider as you move forward with your plans.

1. More time to save in tax-advantaged accounts

Generally, earned income is required in order to contribute to a tax-advantaged retirement account. If one partner retires before the other, the remaining partner can keep contributing to a tax-advantaged account. This can be especially useful if the still-working spouse is getting a 401(k) match. More money for the nest egg! Finally, it's also possible to open an IRA for a non-working spouse and contribute on their behalf. With one partner still working, that can go a long way toward boosting overall retirement savings.

2. Bigger Social Security payments

With one person still working, you might have enough income to enable both partners to delay claiming Social Security, meaning a bigger monthly benefit down the road. Combined with a bit of a boost in the nest egg, it could be easier to arrange a more comfortable long-term retirement. Plus, even if one spouse dies, the survivor will still have a bigger benefit, providing a little more security in their own later years.

3. Lower health care costs

One of the biggest expenses in retirement is health care. If you and your spouse aren't old enough to qualify for Medicare, it can be especially important for one person to keep working for the health insurance benefits. Even if the employer-sponsored health insurance covers only the worker, that can reduce overall expenses as only one partner needs to buy insurance from the marketplace.

4. Lower tax burden

Depending on your situation, there might be tax benefits associated with retiring separately from your spouse. When one person stops working, the resulting lower income can lead to lower taxes for a couple if that lower income puts them into a lower income bracket. A lower income bracket means a lower tax rate. Carefully consider how taxes are likely to impact your finances and consider consulting with a professional to work out how to reduce your tax liability as you and your partner plan retirement.

5. An easier retirement transition

In some cases, retiring at the same time can throw partners together suddenly. After all, with both partners retired, patterns of behavior change and suddenly you're both spending a lot more time together. According to some relationship experts, this can cause strain during the retirement transition. Even if you only offset your retirement dates by a few months, that might go a long way toward helping you ease the transition. By retiring at different times, you have the chance to adjust your schedules bit by bit and get used to spending more time with each other.

6. A better relationship

Not only can retiring at different times help ease the transition, but it might also improve your relationship. With one person no longer working, there might be more time to spend together without overdoing it at the beginning. Plus, if there are still kids in the picture, the retiree might be able to help out around the house more and be the stay-at-home parent. Having that person available to smooth household activities and transitions can reduce stress on a couple. This role reversal can help a man appreciate his wife's long years of service to the family, and also give them more time together.

Bottom line

Each situation and relationship is different. If you have a partner, deciding when each of retires can be a complicated decision involving each person's income, how they feel about their job and the impacts on taxes and benefits. Consider sitting down with a retirement specialist to take a look at your situation and decide if it makes sense to retire at different times — even if staggering your retirements seems counterintuitive at first. [Source: MoneyTalksNews | Miranda Marquit | December 3, 2019 ++]

Debt Collection

Update 15: Survivors Impact After a Loved One Dies

It's not uncommon for creditors to nudge grieving relatives into paying their deceased loved one's bills. Usually the first collections call come within a week or so after the death. Whether or not there are any credit card issues or loans there is most likely some lingering medical bills. When the caller asks for the deceased and it is explained he/she is dead, you will get the courtesy condolences, followed by the question of whether or not you are the spouse or a relative. If so you will be nicely told it was time to pay up. If they are told you need to pay for the funeral first, they say 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, here is what you should know. 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 generally does not get passed down to heirs. 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. There are exceptions where you might be expected to pay up. 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 a little further down in this story).
- 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.

Estates are liable for debt

While you're generally not on the hook for your loved one's debt, the deceased's estate generally is. In other words, your loved one's remaining assets often must be used to pay any 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 "nonprobate 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, and Wisconsin. Some marriages in Alaska may also be community property unions, but it's optional, the IRS notes. [Source: MoneyTalksNews | Maryalene LaPonsie | December 2, 2019 ++]

Vet Pay/Cost Changes

2020 Pay Bump versus Part B Increase

Military retirees, those who receive disability or other benefits from the Department of Veterans Affairs, federal retirees and social security recipients will see a 1.6% increase in their monthly checks for 2020. The annual Cost Of Living Allowance (COLA) is smaller than the 2.8% increase from last year but in line with the historical increases seen over the last ten years. Each year military retirement pay, Survivor Benefit Plan Annuities, VA Compensation and Pensions, and Social Security benefits are adjusted for the rate of inflation.

Retirement Pay Increase

As a result of the increase, the average military retirement check for an E-7 with 20 years of service will go up by \$38 a month, while an O-5 with the same time in uniform will see a \$72 monthly increase. Retirees who entered military service on or after Aug. 1, 1986 and opted-in for the Career Status Bonus (CSB/Redux retirement plan), have any COLA increases reduced by 1 percent, so they will see a smaller increase in 2020. The 1.6% increase means that you will get an additional \$16 for every \$1,000 in government benefits you receive.

VA Disability Increase

Disabled veterans will also get a bump. The average VA disability check will go up about \$2 per month for those with a 10 percent rating, and \$49 for those rated at 100 percent

Other Federal Retirees and Beneficiaries

Military retirees and VA beneficiaries aren't the only ones who benefit from the COLA increase. Civil Service retirees, and Social Security recipients will also see the 1.6% jump in their monthly checks as well. For Social Security recipients, the monthly increase will mean an extra \$12 per month for the average beneficiary.

How the COLA Is Determined

The Department of Labor determines the annual COLA by measuring the Consumer Price Index (CPI), which is a measurement of a broad sampling of the cost of consumer goods and expenses. The CPI is compared to the previous year, if there is an increase there is a COLA. If there is no increase, there is no COLA. The COLA affects about one in every five Americans, including Social Security recipients, disabled veterans, federal retirees, and retired military members. Last year, the COLA increase was 2.8%; in 2018, retirees saw a 2.0% increase.

Medicare

The standard Medicare Part B premium will rise about \$9 a month beginning Jan. 1, 2020, but beneficiaries in higher income brackets will see a larger increase. Individuals whose 2018 modified adjusted gross income (MAGI), as reported on their federal tax return, was \$87,000 or less, or was \$174,000 in a joint return, will pay \$144.60 a month in premium costs, up from \$135.50 in 2019. Beneficiaries in five higher income brackets pay an extra charge, known as an Income Related Monthly Adjustment Amount (IRMAA), which also goes up at the start of the new year:

- If your individual tax income was above \$87,000 to \$109,000, or your joint income was above \$174,000 up to \$218,000, you'll pay \$202.40 per month.
- From \$109,000 to \$136,000 individual or \$218,000 to \$272,000 joint, you'll pay \$289.20 per month.
- From \$136,000 to \$163,000 individual or \$272,000 to \$326,000 joint, you'll pay \$376 per month.
- From \$163,000 to \$500,000 individual or \$326,000 to \$750,000 joint, you'll pay \$462.70 per month. If you are married but file a separate tax return with income above \$87,000 but less than \$413,000, you'll also pay this rate.
- Above \$500,000 individual or above \$750,000 joint, you'll pay \$491.60 per month. If you are married but file a separate tax return with income above \$413,000, you'll also pay this rate.

The new figures reflect slight changes to income brackets from 2019. All brackets showed some increase, with the top bracket up more than \$30 a month year over year (\$460.50 to \$491.60). These premiums are deducted automatically from Social Security, Office of Personnel Management (OPM), and/or Railroad Retirement Board benefits. Those who don't receive benefits from these agencies will receive a bill; regardless of how you file your returns, you and your spouse will have separate Part B premium payments.

The income figures used to determine your Part B premium payment may not reflect your current financial situation, especially in the event of a retirement, a divorce, or other life-changing events. If you've undergone one of these events, you can file Form SSA-44, Medicare Income-Related Monthly Adjustment Amount – Life Changing Event, or visit your local Social Security office to request an adjustment. Qualifying events include:

- Marriage, divorce/annulment, or death of a spouse.
- Work stoppage or reduction.
- Loss of income-producing property.
- Loss of pension income.
- Employer settlement payment.

The form is available at <https://www.ssa.gov/forms/ssa-44-ext.pdf>. You can find your local office online at <https://secure.ssa.gov/ICON/main.jsp>. You can also call the Social Security Administration (SSA) at 1-800-772-1213 for more information. [Source: Military.com | Douglas Sacha & Kevin Lilley | Oct-Nov 11 & 13, 2019 ++]

Medicare Cost | Military Retirees

Update 02: 2020 Premium Changes

Health care already accounts for more than 10% of spending by senior households, on average. And 2020 brings more bad news for the pocketbooks of seniors on Original Medicare. Several premiums and deductibles for folks on the traditional, government-managed type of Medicare will increase in the new year, the federal government recently announced. What's more, these increases for 2020 will be significantly greater than they were for 2019:

- 2020 Medicare Part B standard monthly premium: \$144.60 per month, which is an increase of \$9.10 per month from 2019. That's compared with an increase of only \$1.50 per month one year prior.
- 2020 Medicare Part B annual deductible: \$198 per year, an increase of \$13. That's compared with an increase of \$2 one year prior.

- 2020 Medicare Part A annual inpatient hospital deductible: \$1,408 per benefit period, an increase of \$44. That’s compared with an increase of \$24 one year prior.

More bad news: The higher cost increases for 2020 will effectively negate much of the 1.6% cost-of-living adjustment (COLA) that will increase retirees’ monthly Social Security benefit payments in the new year. For the average retiree, the 2020 COLA translates to only an extra \$24 a month.

What Medicare Parts A and B cover

Medicare *Part A* covers the following types of care:

- Inpatient hospital services
- Skilled nursing facility services
- Some home health care services

About 99% of Medicare beneficiaries don’t have to pay a premium for their Part A coverage thanks to how long they worked. That is, they get this break because they had Medicare taxes withheld from their paychecks during their working years.

Medicare *Part B* covers the following types of care:

- Physician services
- Outpatient hospital services
- Certain home health services
- Durable medical equipment
- Certain other medical and health services not covered by Medicare Part A

Note that Part B premiums are based on income. The standard monthly premium above applies to individuals who earn up to \$87,000 and married couples who earn up to \$174,000 and file a joint federal tax return. Folks with higher incomes pay higher Part B premiums — which will be anywhere from \$202.40 to \$491.60 next year, depending on income.

Medicare Advantage premiums projected to fall

Original Medicare and Medicare Advantage are the two main types of Medicare. Original Medicare is the traditional, fee-for-service Medicare program managed by the federal government. The costs of Original Medicare generally include the premiums and deductibles above. Medicare Advantage plans are an alternative to the traditional program offered by private insurance companies. So, the costs of these plans, including any premiums and deductibles, vary by plan and insurer. On average, though, Medicare Advantage premiums for 2020 are expected to be 23% lower than they were for 2018, according to the Centers for Medicare & Medicaid Services (CMS), the federal agency that oversees the Medicare program. In fact, the average 2020 Medicare Advantage premium will be the lowest in the past 13 years, which CMS attributes to the agency’s efforts to drive competition. The number of Medicare Advantage plans available for 2020 is greater than ever, according to a recent analysis by the nonprofit Kaiser Family Foundation. [Source: MoneyTalksNews | Karla Bowsher | December 6, 2019 ++]

Vet Income

Consistently Larger than Non-Vets

Veteran households consistently outearn their non-veteran counterparts — a trend that has prevailed for nearly 40 years, according to a new report. “Households headed by veterans have higher incomes and are less likely to be in poverty, on average, and this is especially the case for veterans in racial or ethnic minority groups and those with less education,” a report from the Pew Research Center published Monday said. The report, based off of information from the U.S. Census Bureau, showed that the median annual income for veterans households in 2017 was approximately

\$88,700 — about \$12,000 more than the median annual income among non-veteran households. The report, however, does not explain why.

This is not a recent development. In fact, the study notes that the median income for veteran households was \$77,000 in 1980. For non-veteran households, that number dropped to \$61,500. Since then, veteran households have always earned more each year than non-veteran households, according to the report.

- The gap in income is even starker when examining households headed by racial or ethnic minorities. For example, black veteran households earned an average of \$77,400 in 2017, whereas non-veteran black households earned an average of \$50,300 that year.
- The report also found that Hispanic veterans households earned more than \$30,000 on average a year than non-veteran Hispanic households in 2017.
- Likewise, veterans with a high school diploma significantly out earned non-veterans with the same educational background by about \$20,000 in annual income, the report found.
- Among those with bachelor’s degrees, the disparity was less severe and veterans had a roughly \$2,500 advantage.

The analysis only reflected those between the ages of 25 and 54 to focus on those in their “prime working years,” since veterans are more likely to be older than non-veterans, the study said. The Pew Research Center report comes days after the Bureau of Labor Statistics announced that the veterans unemployment rate rose slightly from 3 percent in October to 3.4 percent in November. Even so, veterans unemployment has stayed under the national average for 19 consecutive months. The national unemployment rate reached 3.5 percent last month. [Source: MilitaryTimes | Diana Stancy Correll | December 10, 2019 ++]

Unexpected Expenses

How to Avoid Being Surprised by 7 Nasty Ones

Unexpected expenses are bound to happen. Cars break down, roofs leak and faulty plumbing floods homes. Yet 4 out of 10 adults would be unable to cover an emergency expense of \$400 without borrowing money or selling possessions, according to a 2018 report from the Federal Reserve. One way to be prepared is to build an emergency fund that is big enough to cover all of your living expenses for months so you could weather a job layoff without going into debt. You should also protect yourself by buying homeowners, health and auto insurance. Following are some of life’s most unpleasant expenses that can catch you off-guard, and more strategies for coping with them.

1. Automobile breakdowns

Vehicle breakdowns are hard to anticipate. Some drivers buy mechanical breakdown insurance or extended repair warranties for added peace of mind. Mechanical breakdown insurance is supplemental insurance that covers repairs unrelated to accidents. An extended auto warranty covers repairs after factory warranties have expired. The items such warranties protect vary, but they typically exclude wear-and-tear and routine maintenance, such as replacing tires, notes U.S. News & World Report. Some warranties are backed by vehicle manufacturers and others are backed by car out this dealers or warranty companies. To read more about the pros and cons of these warranties check out “[Should I Buy an Extended Car Warranty?](#)”

2. Costly home repairs

Anyone who owns a home knows there are plenty of unexpected expenses. A flooded kitchen or a damaged roof easily can lead to thousands of dollars in repairs. Aside from building an emergency fund, the best way to cope is to have a homeowners insurance policy. Be sure to get quotes from several carriers and compare levels of coverage. If you don’t want to do the comparison shopping yourself, there are now companies that specialize in getting quotes for you. [Gabi](#) is one example.

Homeowners policies don't cover normal wear and tear or damage to electrical systems, plumbing and household appliances, however. One way to guard against expenses associated with such wear and tear is to buy a home warranty, which is like a service contract. You can learn more about the pros and cons of this type of protection in "[Should You Buy a Home Warranty? How to Judge for Yourself.](#)"

3. Funeral expenses

The national median cost of a funeral with viewing and burial is \$7,360, according to the [latest data](#) from the National Funeral Directors Association. The average price of a casket alone is little more than \$2,000, according to the Federal Trade Commission. You can limit funeral costs if you shop for the lowest prices and beware predatory business practices. Funeral providers are required by law to provide you with an itemized statement of the total cost of the funeral you've selected. This should include the cost of complying with any legal requirements. However, optional services and products can add to your costs. For more ideas, read "[11 to Make a Funeral Affordable but Not Cheap.](#)"

4. Medical costs

The high cost of health care in America can deplete your bank account. According to the federal health care marketplace website, HealthCare.gov (<https://www.healthcare.gov>). It's easy to underestimate how much medical care can cost:

- Fixing a broken leg can cost up to \$7,500
- The average cost of a 3-day hospital stay is around \$30,000
- Comprehensive cancer care can cost hundreds of thousands of dollars

You can try to stay well by exercising and eating healthy foods. But the best way to protect yourself from unexpected medical costs is to have health insurance. One way to lower prices is to negotiate with health care providers for reduced bills. Another option is to buy catastrophic health insurance through HealthCare.gov or the [state](#) health insurance marketplace in 11 states and the District of Columbia. These catastrophic plans have low monthly premiums but high deductibles, the share of costs that you must pay, [says](#) Healthcare.gov. For 2019, the deductible for all catastrophic plans is \$7,900. Low-income Americans may qualify for [Medicaid](#), a health insurance program run through state and federal governments. People who are 65 or older generally qualify for [Medicare](#), a federal health insurance program.

5. Totaled automobiles

Having your auto insurance company declare your damaged car to be a total loss can trigger a financial crisis if you don't receive a large enough payout to buy a replacement vehicle. It's common for cars to be totaled when the damage exceeds the car's market value. If your car is an older model, it may have a low market value even though it runs great. If you believe your totaled car is valuable enough to justify repair costs, you can contest your insurer's decision to total your vehicle.

One way to do this is to demonstrate that cars like yours are selling for more than your insurer thinks yours is worth. Kelley Blue Book and the National Association of Automobile Dealers [publish guides](#) that you can use to judge car values. Another option is to keep the totaled car and pay for the repairs yourself. If you want the car, typically your insurer will pay you the cash value of the damaged vehicle, minus any required deductible and the amount it could have sold for to a salvage yard. It will be up to you to arrange for repairs.

6. Lawsuit judgments

Losing a lawsuit can deal a serious financial blow if you're found to be legally responsible for damages. To help avoid that outcome, respond quickly when a suit has been filed against you. "Failing to timely file an answer to a [lawsuit] can result in a default judgment filed against you," Boston attorney Christopher Earley tells Money Talks News. One of your first steps should be to contact an attorney. Make sure you understand how he or she will bill you. Liability insurance is a good way protect yourself from the cost of a lawsuit. It will cover the cost of your legal defense and pay judgments against you, up to the limits of the policy. Liability protection typically is included in a homeowners insurance policy to cover you in the event that someone is injured on your property, for example. If you own a business, you may need a separate policy to protect your business from liability claims.

7. Burglaries

Burglary victims often face serious expenses when it comes to replacing missing items. After you've installed good locks and an alarm system, the best defense is to have an insurance policy for your home or business that will replace stolen items. If you choose an [actual](#) cash value (ACV) policy, you may save money compared with a replacement cost protection plan. However, if a loss occurs, it will pay only what your property is worth at the time of the claim — meaning after depreciation. Under a replacement policy, however, your insurer pays the full cost of replacement. Standard homeowner policies generally limit how much you can collect when high-value property is stolen or damaged. If you have expensive artwork, collectibles or jewelry, you may need to buy an insurance rider — a written agreement that increases your benefits to cover expensive items that your policy would not otherwise cover.

[Source: MoneyTalksNews | Emmet Pierce | September 6, 2019 ++]

IRA & 401k RMDs

50% Tax Penalty at Age 70 ½ If You Miss Deadline

Many retirees who turned 70½ years old prior to the start of 2019 are up against a potentially costly tax deadline. Folks that age who own certain types of retirement accounts generally must withdraw what the IRS calls “[required minimum distributions](#),” or RMDs, by Dec. 31. If they miss this deadline, they face a whopping 50% tax penalty — which could translate to hundreds or thousands of dollars. RMDs are a minimum amount of money that the IRS requires you to withdraw from most types of retirement accounts each year starting the year in which you turn 70½. Those accounts include:

- Traditional individual retirement account (IRA)
- Simplified employee pension (SEP) IRA
- Savings incentive match plan for employees (SIMPLE) IRA
- Traditional 401(k)
- Roth 401(k)
- 403(b)
- 457(b)

Roth IRAs are not subject to RMDs during the original account owner's lifetime, as we note in “7 Secret Perks of Individual Retirement Accounts.” The deadline for your first RMD — the one for the year in which you turn 70½ — is different. The IRS gives you a little more time to withdraw that first RMD — until April 1 of the following year. So, folks who turned or will turn 70½ during 2019 have until April 1, 2020, to take their first RMD. If that's you, just be aware that if you postpone taking your 2019 RMD until 2020, you would end up having to take two RMDs in one year: your first one by April 1 and your second one by Dec. 31, 2020. As a result, you'd likely owe taxes on both of those RMDs in the same year, as RMDs are generally taxable income. And that could hike your tax bill. If you fail to withdraw an RMD in full by any applicable deadline, however, the IRS can penalize you. The agency will tax whatever RMD amount you failed to withdraw on time at 50%. That could easily amount to four figures.

The exact amount of an RMD you must take depends on your life expectancy and retirement account balance. The IRS offers RMD [worksheets](#) to help you determine your RMD amount. The agency also cautions that this task is on you: “Although the IRA custodian or retirement plan administrator may calculate the RMD, the IRA or retirement plan account owner is ultimately responsible for calculating the amount of the RMD.” [Source: MoneyTalksNews | Karla Bowsher | December 10, 2019 ++]

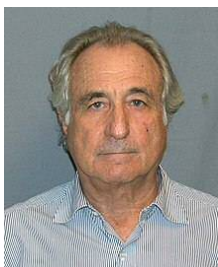
Social Security Benefits

Update 07: Something to Think About

The Social Security check is now (or soon will be) referred to as a Federal Benefit Payment. This is NOT a benefit. It is OUR money, paid out of our earned income! Not only did we all contribute to Social Security but our employers did too! It totaled 15% of our income before taxes. Consider the following:

- If you averaged \$30K per year over your working life, that's close to \$180,000 invested in Social Security.
- If you calculate the future value of your monthly investment in social security (\$4,500 a year or \$375/month, including both you and your employers contributions) at a meager 1% interest rate compounded monthly, after 40 years of working you'd have more than \$1.3+ million dollars saved.
- Upon retirement, if you took out only 3% per year, you'd receive \$39,318 per year, or \$3,277 per month.
- That's almost three times more than today's average Social Security benefit of \$1,230 per month, according to the Social Security Administration, and
- Your retirement fund would last more than 33 years (until you're 98 if you retire at age 65)!

You can only imagine how much better most average-income people could live in retirement if our government had just invested our money in low-risk interest-earning accounts. Instead, the folks in Washington pulled off a bigger Ponzi scheme than Bernie Madoff ever did. He is the former non-executive chairman of the NASDAQ stock market, the confessed operator of the largest Ponzi scheme in world history, and the largest financial fraud in U.S. history. Prosecutors estimated the fraud to be worth \$64.8 billion based on the amounts in the accounts of Madoff's 4,800 clients as of November 30, 2008. On June 29, 2009, Madoff was sentenced to 150 years in prison, the maximum allowed.



Bernie Madoff

The government takes our money and uses it elsewhere. They didn't have a referendum to ask us if we wanted to lend the money to them ... and they didn't pay interest on the debt they assumed. And recently they've told us that the money won't support us for very much longer. Isn't it funny that they NEVER say this about welfare payments? [Source: RAO Bulletin Subscriber Input | December 10, 2019 ++]

Online Shopping Scam

Update 03: Beware of This Delivery Trick

This holiday season, BBB Scam Tracker has received many reports of a new trick scammers are using to steal from online shoppers. The con artists are exploiting a PayPal policy and deceiving online shoppers into paying for goods that don't exist.

How the Scam Works:

- You are shopping online and find a site with amazing deals, often brand name goods at a significant discount. The website and the products look legitimate, so you decide to take a chance and make a purchase. The site instructs you to pay through PayPal, which should provide extra security.

- After checkout, you get a confirmation email that contains a tracking number from UPS, FedEx, or another shipping service. After a few days, you log onto the site and see that your package has been delivered. That's funny, because no box ever arrived! You call the shipping company, and they confirm that the package was delivered... but to the wrong address.
- When you try to correct the mistake, you find that the ecommerce site is either unresponsive or unhelpful. In some cases, the site doesn't provide contact information; in others, they simply don't respond to your emails or calls.
- Some scam victims report filing a claim with PayPal because their protection promise says you can open a dispute if your order never arrives. But because the scammer technically shipped the package and the tracking number marked it as delivered, PayPal rejected their claims. One consumer reported to BBB Scam Tracker: "PayPal denied my claim because the seller showed the tracking number as being delivered. I even had UPS send PayPal the proof that I didn't receive my package, but all PayPal required is a tracking number loaded and shows delivered."

Tips to avoid these scams

- Before paying, know your rights and responsibilities. In everything from check cashing scams to cons involving new peer-to-peer payment systems, scammers often take advantage of what consumers don't know when it comes to processing payments. Don't make a purchase from a shady seller assuming you'll be protected no matter what.
- Before buying online, confirm the site has real contact information. Make sure the seller has a working phone number and address on the website, so you can contact them in case of problems.
- If the price seems too good to be true, there's probably something wrong. Be wary if the item is selling for significantly lower than what you've seen elsewhere.
- Review BBB online shopping tips. Many online purchase scams use similar tactics. See www.BBB.org/ShoppingOnline for more advice.

For More Information

Learn more about spotting and reporting [PayPal fraud](#). For more resources on shipping fraud, see FedEx's [website](#) and UPS's online [resource center](#). To learn more about scams, go to www.BBB.org/ScamTips. If you've been targeted by this scam, help others avoid the same problem by reporting your experience at BBB.org/ScamTracker. [Source: BBB Scam Alert | December 6, 2019 ++]

Social Media Gift Exchange Scam

An Illegal Pyramid Scheme



A "Secret Santa" around the office, friends and family can be fun. A gift exchange among online friends you haven't met, well, that's a little different and carries a heftier consequence. These gift exchanges, while they look like innocent

fun, are really pyramid schemes – and are considered illegal. The “Secret Sister” gift exchange campaign quickly became popular in 2015 through Facebook posts promising participants would receive up to 36 gifts, in exchange for sending one gift. Each holiday season the scheme pops back up. A newer version of this scam revolves around exchanging bottles of wine.

How the Scam Works

- The scheme starts with a convincing invitation, either by email or social media to sign up for what seems like a great, fun program. All you must do is provide your name and address and personal information of a few additional friends, and tack this information on to a list that’s already started of people you’ve never met on the Internet. Next, it’s your turn to send an email or social media invitation to send a modest gift or bottle of wine to a stranger along with their friends, family and contacts.
- The cycle continues and you’re left with buying and shipping gifts for unknown individuals, in hopes that the favor is reciprocated by receiving the promised number of gifts in return. Unfortunately, it doesn’t happen. Just like any other pyramid scheme, it relies on the recruitment of individuals to keep the scam afloat. Once people stop participating in the gift exchange, the gift supply stops as well, and leaves hundreds of disappointed people without their promised gifts.

It should be noted that pyramid schemes are illegal in the [US](#) and [Canada](#). The U.S. Postal Inspection Services [explains](#) that these gift exchanges are considered a form of gambling and that participants could be subject to penalties such as jail time, fines or a lawsuit for mail fraud. There is another layer of danger to participating in these schemes. When signing up, the alleged campaign organizer is asking for personal information such as a mailing address or an email. With just a few pieces of information, cyber thieves could expose you to future scams or commit identity theft.

The next time someone promises a bounty of gifts or cash by mail, email, or social media, BBB recommends the following:

- Ignore it! Keep in mind that pyramid schemes are international. Chain letters involving money or valuable items and promise big returns are illegal. Stop and ask, is it worth breaking the law? Report it instead to [Canadian agencies](#) or to the [U.S. Postal inspection Services](#).
- Report social media posts. If you receive an invitation to join a pyramid scheme on social media, report it. You can report these Facebook posts by clicking in the upper righthand corner and selecting “Report post” or “report photo.”
- Never give your personal information to strangers. This will open you up to identity theft and other scams.
- Be wary of false claims. Some pyramid schemes try to win your confidence by claiming they’re legal and endorsed by the government. These imposter schemes are false as the government will never endorse illegal activity. No matter what they claim, pyramid schemes will not make you rich. You will receive little to no money back on your “investment” or gift exchange.

More information on scams is available by visiting [BBB Scam Tips](#) and become an advocate by reporting scams to [BBB Scam Tracker](#). [Source: Better Business Bureau | November 13, 2019 ++]

Tax Burden for Utah Retired Vets

As of DEC 2019

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 Utah. Note that the info is based on 2018 data which was all that was available when this article was written.

Sales Taxes

State Sales Tax: 5.95% (prescription drugs exempt); 1.75% on residential utilities; 2.75% on food and food ingredients; local option taxes may raise the total tax to 9.95%.

Gasoline Tax: 47.6 cents/gallon (Includes all taxes)

Diesel Fuel Tax: 47.7 cents/gallon (Includes all taxes)

Cigarette Tax: \$1.70/pack of 20 | Average cost per pack \$6.43; other tobacco products are subject to a state excise tax of 86% / manufacturer's price as well as federal excise taxes, little cigars are taxed as cigarettes. The tax on Snuff per ounce is \$1.83.

Personal Income Taxes

Tax Rate Range: Flat tax of 4.9%. If you paid federal taxes on interest you received from a Utah municipal bond, you may be entitled to a deduction on your Utah return. Refer to <http://incometax.utah.gov> for details.

Personal Exemptions: The Utah personal exemption is \$565 per dependent you were allowed to claim on your federal return for the federal tax credit (IRC §24). Multiply the total qualifying dependent's number on line c in box 2 of your tax form by \$565

Standard Deduction: Federal amount.

Dental Deduction: Federal amount.

Federal Income Tax Deduction: Utah permits taxpayers to deduct one-half of the federal income tax liability as shown on their federal return for the same tax year. The federal tax deduction is based on the tax calculated on their federal return, not on the amount of federal tax withheld by employers.

Retirement Income Taxes: Utah taxpayers may be able to claim a retirement tax credit on their Utah Individual Income Tax Return. Previously, an income exclusion was allowed taxpayers age 65 or over, and a deduction of retirement income received was allowed taxpayers under the age of 65. A taxpayer who meets the following requirements may be able to claim a nonrefundable tax credit of up to \$450: \$900 for a married couple filing a joint return. The credit will be phased-out for income that exceeds a certain amount. The retirement credit for persons under age 65 has expired.

Retired Military Pay: Up to age 65, individual can deduct up to \$4,800 of qualified retirement; \$7,500 at age 65 or older. Deductions apply to survivor benefits.

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.

Military Personnel & Their Spouses: Under a new federal law, earned income of the spouse of a nonresident active duty military service member is now exempt from Utah income tax. The military income of the service member continues to be exempt from Utah tax, but the exemption now extends to the earned income of the non-military spouse

Property Taxes

Property taxes are assessed and collected locally. The taxable value of tangible personal property and real property except residential property is assessed at 100% of its fair market value, less any exemptions that may be permitted. Refer to <https://tax.utah.gov/forms/pubs/pub-36.pdf>:

- Residential property owned by persons age 65 and over claiming tax abatement for the poor is assessed at 35% of fair market value. The assessed valuation of a residential property is 55% of its fair market value. The median rate is \$1.30/\$1,000.
- Homeowners 66 and older who earn \$29,210 or less can get a credit for property taxes paid up to \$865, plus a credit equal to the tax on 20 percent of their property's fair market value.
- A circuit breaker tax credit for persons age 65 or over (or surviving spouse) permits an abatement or deferral of property taxes but the amount of the credit varies with household income and can apply to the portion of rent that goes to pay property taxes.
- There is also a veteran's exemption for vets with at least a 10% rating that increases up to \$266,670 taxable value of a residence for a 100% rating, based on the percentage of disability incurred in the line of duty. The exemption can also be applied toward tangible personal property, such as motor vehicles. No exemption is allowed for any disability below 10%. Contact the Tax Commission at 801-297-3600 ext 3600 for details or <http://tax.utah.gov/forms/pubs/pub-36.pdf>.
- Solar Energy Systems Phase-out. The 2018 Utah Legislature passed SB 141, phasing out the Renewable Residential Energy Systems Credit (credit 21) for solar panels starting in 2018. The maximum credit for solar power systems installed in 2018 is \$1,600.
- Indigent Abatement or Deferrals. These are granted at the discretion of your county's legislative body. To qualify:
 - 1. You are a homeowner or manufactured homeowner.
 - 2. Your home is owner-occupied.
 - 3. You have lived in your home for at least 10 months.
 - 4. Your 2018 income was less than \$33,530.
 - 5. You are either at least 65 years of age, or can demonstrate a disability or extreme hardship
 - 6. The abatement is 50 percent of the total tax for the current year, or a maximum of \$1,015, whichever is less (Utah Code §59-2-1107).

Inheritance and Estate Taxes

Utah's estate tax system is commonly referred to as a "pick up" tax. This is because Utah picks up all or a portion of, the credit for state death taxes allowed on the federal estate tax return (federal form 706 or 706NA). Federal changes phased out the national inheritance tax and, therefore, eliminated Utah's inheritance tax after December 31, 2004. Since there is no longer a federal credit for state death taxes on the federal estate tax return, there is no longer a basis for the Utah inheritance tax.

Other State Tax Rates

To compare the above sales, income, and property tax rates to those accessed in other states go to:

- Sales Tax: <http://www.tax-rates.org/taxtables/sales-tax-by-state>.
- Personal Income Tax: <http://www.tax-rates.org/taxtables/income-tax-by-state>.
- Property Tax: <http://www.tax-rates.org/taxtables/property-tax-by-state>.

-0-0-0-0-0-

Go to <https://tax.utah.gov/forms/current/tc-40.pdf> for a copy of the latest online form. For further information visit the Utah State Tax Commission site <https://tax.utah.gov/forms/current/tc-40inst.pdf> or call 800-662-4335. [Source: <http://www.retirementliving.com> | December 2019 ++]



Notes of Interest

November 16 thru 30, 2019

- **Unaffordable Medical Treatment.** Based on a survey of 1,099 U.S. adults conducted in SEP 2019, Gallup and West Health have estimated that 34 million American adults know someone who died after not getting treatment and 58 million adults report being unable to pay for needed drugs in the previous year. The percentage of adults who reported not having had enough money in the previous 12 months to "pay for needed medicine or drugs that a doctor prescribed" has increased significantly, from 18.9% in JAN 2019 to 22.9% in SEP. Only 7% reported that the Trump administration has accomplished "a great deal" on the issue of drug prices, while 66% said the administration has accomplished "Not very much" or "None at all."
- **Captain James D. Reily, Jr.** USS Midway former supply officer responsible for all the supplies aboard a floating city of 4,500 voracious young men tells his story at <https://youtu.be/FMiD2kFvE1w>.
- **Hospitalized Vets.** Say Thank You and Happy Holidays to an American Hero. If you would like to send a Christmas card to a hospitalized vet, please use this address: c/o Walter Reed Army Medical Center, 6900 Georgia Avenue, NW Washington, DC 20307-5001.
- **VVA Endorsements.** VVA President says the organization may not make any endorsements of political candidates for any elected office. "VVA's Constitution and our not-for-profit tax status strictly prohibit the national organization, as well as local VVA chapters and state councils, from making any such endorsements. Occasionally, confusion arises when individual VVA members—who are often very politically active—are identified as representatives of our organization.
- **Hong Kong.** China said 2 DEC it will suspend U.S. military ship and aircraft visits to Hong Kong and sanction several American pro-democracy and human rights groups in retaliation for the signing into law of legislation supporting anti-government protests in the semi-autonomous territory.
- **White House Xmas.** At <https://www.youtube.com/watch?v=d8jmPdHO0GE> can be viewed the 2019 Xmas tree delivery to the first lady. Go to <https://www.youtube.com/watch?v=pgAAdNaL4oM> to view this year's White House Xmas decorations.
- **Vet Depression discussion.** Combat veterans can often suffer from anxiety and depression. Whether it's from PTSD or other issues, Army veteran, Dr. Geoffrey Grammer, Chief Medical Officer and Bill Leonard, President / CEO of Greenbrook TMS NeuroHealth Centers, discuss how electromagnetic stimulation works and if TMS can successfully treat brain regions directly associated with mood regulation at <https://omny.fm/shows/vetstory/playlists/podcast/embed?style=artwork&share=1&selectedClip=52f3ec1e-3585-4ead-824b-ab180117e029>.
- **VA Disability Compensation.** To view the 2020 rate tables effective 12/1/19 along with the tables from past years go to https://www.benefits.va.gov/COMPENSATION/resources_comp01.asp.
- **VA Claims.** Disability claims backlog reached its lowest point ever, Nov 23 from its previous record low achieved May 2018. Additionally, the percentage of the total inventory in backlog is less than 18%, surpassing the previous record from October 2016. Veterans who apply for disability benefits currently receive a response in an average of 107 days.

- **Hide A Key.** At some point, everyone has found themselves locked out of their home. One expensive call to a locksmith is enough to convince you that it's time to hide a spare key so you'll have a backup plan in the future. But where should you keep the little lifesaver? For four genius ways to hide one check out <https://www.youtube.com/watch?v=7Vs5oyyvSXg>
- **Nearly Useless Factoid.** The chemical element cobalt (Co) is named after "kobold," a goblin from German folklore. In the 16th century miners working near the silver veins of Saxony encountered the ore which resembled silver, but didn't melt as expected. It also had "mischievous effects" on their health, in other words toxic, so they named it after the mystical mountain-dwelling creatures which they claimed spoiled silver for their own benefit.
- **U.S. Embassy Manila Outreach.** Tentative schedule for next Outreach is 0800-1100 *hrs* at the Marriott Hotel, Clark Philippines on JAN 16, 2020. When confirmed, we will provide additional details.

[Source: Various | December 15, 2019 ++]

Afghan Peace Talks

Update 05: Trump's Visit Reignites

The Taliban said on 29 NOV they were ready to restart peace talks with the United States, a day after President Donald Trump visited U.S. troops in Afghanistan and said he believed the radical group would agree to a ceasefire. Trump's surprise Thanksgiving Day visit was his first to Afghanistan since becoming president and came a week after a prisoner swap between Washington and Kabul that raised hopes for a long elusive peace deal to end the 18-year war. "The Taliban wants to make a deal and we are meeting with them," Trump told reporters after arriving in Afghanistan on 28 NOV. "We say it has to be a ceasefire and they didn't want to do a ceasefire and now they want to do a ceasefire, I believe. It will probably work out that way," he said.

Donald Trump's more than three-hour Thanksgiving fly-in to Afghanistan was a closely guarded secret, carried out with cloak-and-dagger precision to ensure the U.S. president's security. After what seemed like a normal day at his Mar-a-Lago resort in Florida with a round of golf Wednesday morning, the president was spirited away and flown back to the Washington area from an undisclosed airport late Wednesday — unbeknownst to press traveling with him. Back in Washington, another group of journalists was instructed to gather atop an area parking garage under cover of darkness, where they were picked up and whisked to nearby Joint Base Andrews. News organizations had agreed to not report on the trip at first due to security reasons. Passengers boarded Air Force One in a closed hangar and took off and landed in the darkened plane, with shades drawn throughout the journey.

Members of the media weren't told until late in the flight what country Trump was headed to, and Air Force One's destination clock — typically indicating for passengers the time at their destination — was switched off as well. The trip was weeks in the making, said White House press secretary Stephanie Grisham. "It's a dangerous area and he wants to support the troops," Grisham said. "He and Mrs. Trump recognize that there's a lot of people who are away from their families during the holidays, and we thought it'd be a nice surprise." As part of the tight security, all passengers' phones and other potential transmitting devices, like tablets, were seized before boarding the plane. The rule applied to everyone on board, leading the White House to queue up a couple of Thanksgiving-themed tweets from the president's account for Thursday morning. The White House lifted its reporting embargo as Trump was about to leave the country after meeting with U.S. military personnel and the Afghan president.

A handful of aides joined Trump, including Grisham, acting chief of staff Mick Mulvaney, national security adviser Robert O'Brien, White House director of social media Dan Scavino, and aides Dan Walsh and Judd Deere. Wyoming Republican Sen. John Barrasso, wearing cowboy boots, was the lone lawmaker on the trip. First lady Melania Trump remained in Florida. Trump landed after dark local time at Bagram Airfield after a 12-hour flight during which he

didn't speak to reporters. Aboard the plane, Grisham told reporters that there was a potential meeting with Afghan President Ashraf Ghani at the base, but didn't know at that time if it would happen. Ghani was given a few hours' notice of Trump's visit and was invited to participate in a bilateral meeting on the air base, said Deere, a White House spokesman.

Trump canceled peace negotiations in September after the militant group claimed responsibility for an attack in Kabul that killed 12 people, including an American soldier. Zabihullah Mujahid, a spokesman for the hardline Islamist insurgent group, said on 29 NOV they were "ready to restart the talks". "Our stance is still the same. If peace talks start, it will be resumed from the stage where it had stopped," Mujahid told Reuters. Taliban leaders have told Reuters that the group has been holding meetings with senior U.S. officials in Doha since last weekend, adding they could soon resume formal peace talks. "We are hoping that Trump's visit to Afghanistan will prove that he is serious to start talks again. We don't think he has not much of a choice," said a senior Taliban commander on conditions of anonymity.

Trump did not answer reporters' questions when he returned on Friday morning to Florida, where he was spending the U.S. Thanksgiving holiday weekend away from Washington. There are currently about 13,000 U.S. forces as well as thousands of other NATO troops in Afghanistan, 18 years after a U.S.-led coalition invaded the country following the Sept. 11, 2001, al Qaeda attacks on the United States. About 2,400 U.S. service members have been killed in the course of the Afghan conflict. A draft accord agreed in September would have thousands of American troops withdrawn in exchange for guarantees that Afghanistan would not be used as a base for militant attacks on the United States or its allies. Still, many U.S. officials doubt the Taliban could be relied upon to prevent al Qaeda from again plotting attacks against the United States from Afghan soil. [Source: Task & Purpose | Reuters Staff | November 29, 2019 ++]

Afghan War

Update 03: Washington Post's 'Afghanistan Papers' Story Reaction

The outgoing Pentagon senior enlisted adviser and his incoming replacement weighed in on reporting 9 DEC that military leaders have been misleading the American people about the direction and success of the war in Afghanistan since within months of U.S. troops hitting the ground in October 2001, roundly denying that they ever felt lied to about the mission and touting the progress the country has made in the intervening years. Army Command Sgt. Maj. John Troxell, the senior enlisted adviser to Chairman of the Joint Chiefs of Staff Army Gen. Mark Milley, told reporters that while he had not fully read the Washington Post's "[Afghanistan papers](#)" *At war with the truth* story, he disagreed with assertions that either the troops or public had been manipulated into believing a certain narrative about the war.

"It has been baby steps as we move forward to assist the Afghan military in securing the Afghan nation," Troxell said. "And it's going to be step by step as we get after business." The documents, compiled from hundreds of interviews with national security leaders as part of an internal Pentagon review, detail statements by top leadership in the Pentagon and Afghanistan — including Milley, as a three-star general — lamenting the lack of clear strategy in the country and the moving goal posts for metrics of success. "I've been to Afghanistan 10 times in the last four years in this job and I feel that we've never been lied to and we are continuing to move forward," he said, adding that he served as the senior enlisted adviser to the International Security Assistance Force in 2011 and, "I firmly thought the strategy we had in place was working."

Troxell was joined Monday by Air Force Chief Master Sgt. Ramon Colon-Lopez, a career special operations pararescueman, who also weighed in on his experiences deployed to Afghanistan. "The men and women that have been going back to since 2002 to perform this mission have been pouring their heart and soul into its success," he said. And, he added, he never questioned his superior officers' orders during the many capture-or-kill missions he

completed in the country. "We were there with a purpose," he said. "And up to today, from 2002, I will tell you that there's a lot more safety and security because of the actions taken — not only by myself, personally, but by my peers."

Their comments were in sharp contrast to those of more than 600 national security officials, intelligence experts and top military commanders interviewed during the "Lessons Learned" project, which lasted from 2015 to 2018. Interviewees said that the strategy ping-ponged from retribution for 9/11 and a take-down of al-Qaida and the Taliban organization that allowed them to train and plan in Afghanistan, to full-blown nation building. "Our policy was to create a strong central government which was idiotic because Afghanistan does not have a history of a strong central government," a former State Department official said in 2015, according to documents obtained by the Post. "The timeframe for creating a strong central government is 100 years, which we didn't have."

The opposite perspectives illustrate the vast difference between the somewhat compartmentalized mission that lower-ranking troops carry out during any given deployment and the larger strategy cobbled together by top officials throughout the Pentagon, White House, State Department and intelligence community. In a statement Monday, Iraq and Afghanistan Veterans of America responded to the report, urging Americans to recognize the difference between the troops on the ground and the national security establishment that has molded the outcomes in Afghanistan.

"The post-9/11 generation of veterans cannot be subject to the same mistreatment that Vietnam War veterans experienced upon their return from service," IAVA CEO Jeremy Butler said. "Veterans of the War in Afghanistan have done everything this country asked of them — they put their heads down and worked hard to achieve the missions they were assigned. Public perception of veterans must be kept separate from the political blame game." [Source: MilitaryTimes | Meghann Myers | December 10, 2019 ++]

Afghan Taliban

Update 03: US, Australian Hostages Freed for 3 Taliban Figures

The Taliban freed an American and an Australian held hostage since 2016 on 10 DEC, in exchange for three top Taliban figures who were released by the Kabul government and flown out of Afghanistan the previous day. The hostages were released in southern Zabul province, ending more than three years of captivity since they were abducted outside the American University in Kabul, where both work as teachers. Kings' family issued a statement later Tuesday saying he was now safe with U.S. officials in Afghanistan and getting the medical care he needs ahead of his return home to be reunited with his family. It was not clear if Weeks was also with Australian officials.

The two were released in Zabul's Naw Bahar district, a region largely under Taliban control, according to a Taliban official who spoke on condition of anonymity because he wasn't authorized to talk to the media. King and Weeks were handed over to U.S. forces and transported from the area in a U.S. helicopter. "We are so happy to hear that my brother has been freed and is on his way home to us," said King's sister, Stephanie Miller. "This has been a long and painful ordeal for our entire family, and his safe return has been our highest priority. We appreciate the support we have received and ask for privacy as we await Kevin's safe return."



American Kevin King and Australian Timothy Weeks

Their freedom came hours after the Afghan government freed three Taliban prisoners and sent them to Qatar. They included Anas Haqqani, the younger brother of the Taliban's deputy Sirajuddin Haqqani, who also leads the fearsome Haqqani network. The other two were Hajji Malik Khan, an uncle of Haqqani and a Haqqani lieutenant, Hafiz Abdul Rashid. It appears the Taliban had refused to hand over the two professors until they received proof their men had reached Qatar. A Taliban statement said the prisoner exchange was a good step "for building trust" and something that "can help in peace process." The American University of Afghanistan confirmed the release of the two, saying that its "community shares the relief of the families of Kevin and Timothy, and we look forward to providing all the support we can to Kevin and Tim and their families."

Pakistan's Prime Minister Imran Khan also welcomed the professors' freedom, saying he appreciates "steps taken by all involved to make it possible." Pakistan wields some influence over the Taliban and has played a behind-the-scenes role in trying to restart peace talks. Afghan President Ashraf Ghani a week ago announced the "conditional release" of the three ranking Taliban figures, saying at a press event broadcast live on state television that it was a very hard decision he felt he had to make in the interest of the Afghan people. King's family gave a special mention to Washington's peace envoy Zalmay Khalilzad, U.S. Secretary of State Mike Pompeo and National Security Adviser Robert O'Brien for their "behind the scenes" efforts to get Ghani on board with the prisoner swap. Pompeo and O'Brien made separate calls to Ghani on Monday.

In 2017, several months after their abduction, the Taliban released two videos showing the captives. A January 2017 video showed them appearing pale and gaunt. In the later video, King and Weeks looked healthier and said a deadline for their release was set for June 16 that year. Both said they are being treated well by the Taliban but that they remain prisoners and appealed to their governments to help set them free. It was impossible to know whether they were forced to speak. Subsequently, U.S. officials said that American forces had launched a rescue mission to free the two, but the captives were not found at the raided location.

The prisoner exchange was intended to try to restart talks to end Afghanistan's 18-year war and allow for the eventual withdrawal of U.S. troops from Afghanistan. The United States had been close to an agreement in September with the Taliban but a fresh wave of violence in the Afghan capital that killed a U.S. soldier brought talks and an impending deal to a grinding halt. The agreement called for direct talks between the Taliban and Afghan government as well as other prominent Afghans to find a negotiated end to the war and set out a roadmap for what a post-war Afghanistan would look like.

Ghani in his discussions with Pompeo and O'Brien said he wanted a reduction in violence and an all-out cease-fire, his spokesman said. According to a U.S. State Department statement Tuesday, Pompeo told Ghani the United States was "committed to work closely together to address violence if the President's decision does not produce the intended results." Southern Zabul province, where the two professors were freed, is heavily controlled by the Taliban and vast parts of it have long been a no-go area for the government. But according to the Taliban, an unofficial cease-fire is now being observed in three districts of the province - Shahjoy, Shahmatzo and Naw Bahar - possibly to facilitate the release of the two hostages. [Source: Together We Served | December 2019 ++]

DPRK Nuclear Weapons

Update 28: Denuclearization Now Off the Negotiation Table

North Korea said 7 DEC that denuclearization has "already gone out of the negotiation table" and it does not need to have lengthy talks with the United States as the end-of-year deadline set by its leader Kim Jong Un for substantial U.S. concessions in nuclear diplomacy looms. A statement released by North Korea's U.N. ambassador, Kim Song, accused the Trump administration of persistently pursuing a "hostile policy" toward the country "in its attempt to stifle it." He also said Washington's claims it is engaged in a "sustained and substantial dialogue" with Pyongyang solely for "its domestic political agenda." "We do not need to have lengthy talks with the U.S. now and the denuclearization is already gone out of the negotiation table," he said.

Song's statement was a response to the 4 DEC condemnation by six European countries of North Korea's 13 ballistic missile launches since May. He accused the Europeans — France, Germany, Britain, Belgium, Poland and Estonia — of playing "the role of pet dog of the United States in recent months." He called their statement "yet another serious provocation" against North Korea's "righteous measures of strengthening national defense capabilities." "We regard their behavior as nothing more than a despicable act of intentionally flattering the United States," Song said. His comments follow other recent North Korean statements indicating that prospects are dim for a resumption of nuclear diplomacy between the United States and North Korea.

On 5 DEC, North Korea's first vice foreign minister, Choe Son Hui, issued a warning threatening to resume insults of U.S. President Donald Trump and consider him a "dotard" (a senile person) if he keeps using provocative language, such as referring to North Korea's leader as "rocket man." His statement via state media came days after Trump spoke of possible military action toward the North and revived his "rocket man" nickname for North Korean ruler Kim Jong Un. North Korea has ramped up its missile tests in recent months, and experts say the launches are likely to continue as a way to pressure Washington into meeting Pyongyang's demand for new proposals to revive nuclear diplomacy by the end of December.

Diplomatic efforts have largely remained deadlocked since a second summit between Trump and the North Korean leader failed last February. The North's Foreign Ministry said 3 DEC that it is entirely up to the United States to choose what "Christmas gift" it gets from the North. North Korean officials have previously said whether North Korea lifts its moratorium on long-range missile and nuclear tests depends on what actions the U.S. takes. When Trump and Kim held their first summit in Singapore in June 2018, North Korea said it was willing to deal away its advancing nuclear arsenal in return for outside political and economic benefits.

Before the Singapore talks, North Korea had long said it would denuclearize only if the U.S. withdrew its 28,500 troops from South Korea, ended military drills with the South and took other steps to guarantee the North's security. But many foreign experts doubt whether North Korea would completely abandon a nuclear program that it has built after decades of struggle and sees as essential to its survival. [Source: Texarkana Gazette | December. 8 2019 ++]

NATO Defense Spending

Update 04: Trump Move to Reduce U.S. Aid Share

The Trump administration in late NOV moved to cut U.S. aid to NATO under a new formula reportedly agreed to by ally countries. NATO and U.S. defense officials have confirmed in multiple reports that the Trump administration is seeking to reduce its contribution to NATO to approximately 16 percent of the organization's budget in order to bring

U.S. funding closer to that of Germany, which pays 14.8 percent. Under earlier agreements, the U.S. provided 22 percent of NATO's direct funding, which covers the maintenance of NATO's headquarters, joint security investments and some combined military operations, CNN reported. The move is largely symbolic, as NATO's current budget is relatively small, approximately \$2.5 billion. That money is separate from the 2 percent of gross domestic product that NATO members agreed to spend on their defense budgets in 2014. Only eight of the 29 members currently meet that goal, but all members have pledged to dedicate the money by 2024.

The new formula, which will result in other member countries picking up former U.S. funding, was reportedly agreed to in the last week of NOV. One defense official told CNN that the money saved by the U.S. will help fund other military operations in Europe. "All Allies have agreed a new cost sharing formula. Under the new formula, cost shares attributed to most European Allies and Canada will go up, while the U.S. share will come down," an unnamed NATO official told CNN. "This is an important demonstration of Allies' commitment to the Alliance and to fairer burden-sharing."

President Trump is set to travel to London in early DEC to celebrate the 70th anniversary of the alliance. For years, he has blasted the other members of the alliance and U.S. leadership for paying a greater portion than other member countries. NATO officials, including Secretary General Jens Stoltenberg, have credited Trump with the rise in spending in the organization, CNN reported. NATO has spent an extra \$100 billion since 2014, but officials have also acknowledged that the funds have increased over Russian seizure in Crimea. The civilian NATO budget was set at approximately \$260.5 million for 2019. The money is used primarily to fund the NATO headquarters. The organization has a military budget of \$1.56 billion for the year. Overall defense spending by member nations is set to exceed more than \$1 trillion in 2019. [Source: The Hill | Marina Pitofsky| November 27, 2019 ++]

Nuclear Weapons Treaty

Concerns over Allowing New START to Expire

U.S. President Donald Trump was optimistic 3 DEC about notional negotiations with Russia and China on a new nuclear weapons treaty, but State Department officials painted a murkier picture in testimony to skeptical lawmakers on Capitol Hill. The conflicting accounts came as arms control advocates and some lawmakers worry that the Trump administration could let a 2010 arms reduction treaty, New START, expire in 2021, leaving no limits on the world's two largest nuclear arsenals.

With time running out for Trump to achieve his ambitious goals of a new trilateral agreement with Russia and China that sets new limits on Russia's shorter-range "tactical" nukes, lawmakers told administration officials that a lack of progress is no reason to let New START expire. "I think what we don't want to see is China used as an excuse to blow up the existing or potential extension of an agreement with Russia that contributes to international security, and of course in the nuclear realm that's important to our survival," Sen. Jeff Merkley (D-OR) told State Department officials 3 DEC during a Senate Foreign Relations Committee hearing on Russia.

Though the treaty, which limits the number of strategic weapons, has been in doubt since Trump pulled the U.S. out of the Intermediate-Range Nuclear Forces Treaty this year, Trump said at NATO's London meeting that his conversations with Russian President Vladimir Putin and Chinese officials on nuclear arms control had gone well. "With respect to nuclear weapons, I've spoken with President [Vladimir] Putin, and I've communicated with him. He very much, and so do we, want to work out a treaty of some kind on nuclear that will probably include China at some point, and [France] by the way, but it will include China and some other countries," Trump said. Top Chinese officials previously made clear that Beijing will not participate in trilateral talks, but Trump on 3 DEC said that when he raised the issue with Chinese officials during separate trade negotiations, "they were extremely excited about getting involved. ... So some very good things can happen with respect to that."

The U.S. previously argued that Russia was out of compliance with the INF Treaty — something Russia denied. However, Washington’s position is that Moscow is in compliance with New START, which restricts each country to a total of 1,550 warheads deployed on bombers, submarines and in underground silos. There is an option to extend the treaty for up to five years should the U.S. and Russia agree, but the Trump administration has not committed to doing so. Proposed bipartisan legislation in both the House and Senate is a signal that some in Congress want the government to extend New START, so long as Russia is in compliance, but neither bill has been taken up in committee.

At the Russia hearing, testimony from Assistant Secretary of State for International Security and Nonproliferation Christopher Ford suggested the administration’s efforts had not made significant headway, even as the official warned Russia and China have expanded their nuclear arsenals. The State Department has thus far convened teams of experts on a possible New START extension and other issues, Ford said in written testimony. He made no mention of any dedicated negotiation strategy, team or dedicated talks. “We are hard at work on these issues and hope to have more to say about this soon,” Ford said.

Senate Foreign Relations Committee Chairman Jim Risch (R-ID) opposed New START before it was ratified 2010, and he recently said that it should be allowed to lapse under current circumstances. After Tuesday’s hearing, he described himself as “very cautious and skeptical” about the administration’s process, and he stopped short of saying it was moving forward. “I wouldn’t characterize it as that at this point. I’m hopeful that will happen. I don’t think we’re there yet,” Risch said.

In one key exchange during the hearing with Sen. Todd Young (R-IN) Ford said there had been two engagements with Russia on arms control broadly since the start of the Trump administration but no date yet for a third dialogue. Young asked whether there is enough time for the administration to meet its goals before New START lapses in 15 months. Ford suggested the treaty could be renewed “very quickly” for a period of less than five years, but he also said “three-way dynamics” associated with adding China would take more study. “We have conceptual templates from the Cold War that are bilateral, and those don’t make sense in an at-least trilateral world,” Ford said.

China’s nuclear arsenal is thought to be modest compared with the respective American and Russian arsenals. Would a new treaty have China grow to meet America, have the U.S. shrink to meet China, or can China can be locked into differential numbers with the U.S., Merkley asked pointedly. “Those kinds of questions are just the kind of thing we need to be and should be talking about with our Russian and Chinese counterparts,” responded Ford, adding that both countries need to come to the table. Merkley fired back: “OK, but you haven’t engaged in those serious conversations yet, and I know from past arms control negotiations that it can take many years to work out the details when there are actually fairly uniform relationships between two powers — and this is not a uniform relationship.”

Along similar lines, Sen. Ed Markey (D-MA) worried the administration would let the treaty lapse and sacrifice the on-site inspections of deployed and non-deployed strategic systems that New START provides. He suggested that the agreement’s expiration would trigger a new arms race. “My concern is if we mishandle this, we could wind up with a new nuclear arms race that could cost us trillions of unnecessary dollars because we missed the opportunity for a negotiated agreement first with the Russians,” Markey said. “If we don’t take that opportunity, I think we will wind up with a deficit that is just ballooning.” [Source: DefenseNews | Joe Gould | December 4, 2019 ++]

Host Nation Support

Concerns over Pressuring Asian Allies for Share Increases

Leaders from the House Armed Services and Foreign Affairs committees are worried about the Trump administration dismantling relationships with key Asian allies, amid reports that the U.S. is pressuring South Korea to pay nearly five times as much in host-nation support to keep approximately 28,000 U.S. troops there. The substantial increase is concerning to House Armed Services Committee Chairman Adam Smith (D-WA) and House Foreign Affairs

Committee Chairman Elliot Engel (D-NY) who wrote a letter to Secretary of State Mike Pompeo and Secretary of Defense Mark Esper pressing for information about the situation.

“At a time when the United States, South Korea and Japan should be working jointly to counter regional security threats ranging from increased North Korean provocations to growing Chinese assertiveness across the region, U.S. demands for a massive increase in South Korean annual contributions serves as a needless wedge between us and our allies,” the lawmakers wrote in the letter, which was sent 22 NOV and released to the media 3 DEC. South Korea has already stepped up its financial contributions to offset stationing costs of keeping U.S. troops there, and now pays nearly \$1 billion in host-nation support. That number, which was agreed to in February 2019 as part of a one-year Special Measures Agreement, is \$70 million more than South Korea paid the previous year.

Furthermore, South Korea has historically shelled out a pretty penny for major U.S. projects in South Korea. Take Camp Humphreys, the largest U.S. base overseas that’s been built up over the last decade and cost almost \$10.8 billion. According to former Commander of United States Force Korea Army Gen. Vincent Brooks, South Korea footed the bill for roughly 90 percent of the project. But multiple media reports from November indicate that the Trump administration is pushing for South Korea to contribute a total of \$4.7 billion in host-nation support in 2020, and is also eyeing to push Japan to shell out more in host-nation support as well. In their letter, the lawmakers noted that keeping U.S. troops on the Korean Peninsula is “not solely about protecting South Korea.” “In fact, the primary purpose of our forward presence is to enhance U.S. national security,” they wrote.

While Smith and Engel said they are on board with fair burden-sharing agreements, they stressed that future host-nation support negotiations should not advance in a way that could dismantle alliance relationships or continued presence in the region. As a result, they requested Pompeo and Esper respond to a series of questions within two weeks, including the total annual cost of maintaining U.S. forces on the Korean Peninsula by taking into account expenses stemming from exercises and training, operation and sustainment, among other things. Smith and Engel also asked the basis for requesting such a steep increase in host-nation support, and how U.S. operations and readiness in the Korean Peninsula will be impacted in the event an agreement isn’t reached before the 31 DEC deadline for a 2020 host-nation support agreement. Historically, host-nation support agreements have lasted five years. But last year’s negotiations led to a one-year agreement, meaning the U.S. and South Korea must hash out a deal annually.

Retired Army Col. David Maxwell, who has several decades of military service in Asia, previously told Military Times that he doubts a resolution will be passed by 31 DEC and cautioned about the “ongoing problems” if these agreements continue as annual deals. Failure to secure an agreement by January will mean that military personnel will be forced to take up logistical and administrative essential services in order to keep United States Forces Korea operational without host-nation support, he said. “We are headed for a train wreck,” Maxwell said in November.

Trump has routinely signaled he would demand more financial contributions from allies, and tweeted in August that South Korea is a “very wealthy nation that now feels an obligation to contribute to the military defense provided by the United States of America.” Esper echoed similar sentiments in November when he visited Seoul as he stressed increased “burden-sharing” with South Korea. Ultimately, discussions between the U.S. and South Korea were dismantled in November due to the disagreement over South Korea’s financial contributions.

Trump previously said in February 2019 that South Korea was costing the U.S. \$5 billion annually, but the Trump administration and South Korea have been tight-lipped on the specific amount the U.S. was seeking in host-nation support. However, South Korean negotiator Jeong Eun-bo told reporters in November after the negotiations unraveled there was a large disparity between the proposals. “It is true that there is a substantial difference between the U.S. side’s overall proposal and the principles we pursue,” Jeong said, according to Reuters. “The talks could not proceed as planned as the U.S. side left first.” [Source: MilitaryTimes | Diana Stancy Correll | December 3, 2019 ++]

Retirement Planning

Update 22: Surprising Facts That Nobody Tells You About

Most of us spend decades working and dreaming of a day when we can retire. But when we finally arrive at our post-work destination, it's not unusual to find ourselves in a world of surprises. Knowing what to expect in advance can help you prepare for — and adjust to — life in your golden years. The following are some key things no one tells you about before you retire.

1. Housing will remain your biggest expense

Many retirees dream of paying off their mortgage so they will be free to spend money on travel and other activities. But the reality is that housing likely will remain the biggest expense in your budget for as long as you live. Retirees in four separate age cohorts all said they spent more money on housing than anything else, according to research from the Employee Benefit [Research Institute](#). Some of this spending pain may be self-inflicted. A Merrill Lynch Retirement Study in partnership with Age Wave [surveyed](#) 3,000 retirees and found that 30% of those who moved during retirement purchased a larger — and presumably, more expensive — home than their previous digs.

2. Work will not end — it will simply change

You will probably work in retirement — and not just because you have to. More than 70% of people say they want to work during retirement, according to the findings of “[Work in Retirement: Myths and Motivations](#),” another joint study by Merrill Lynch and Age Wave. As you age, chances are good that the nature of work will change, though. The study found that 3 in 5 retirees plan to launch a new line of work that differs from what they have done in the past. Working retirees also are three times more likely than pre-retirees to own their own business.

3. If you've never volunteered before, you won't start in retirement

About 90% of Americans say they would like to do volunteer service for someone or some cause that needs their help. But just 25% actually do so, according to the [Stanford Center on Longevity](#). When asked why they don't follow through on the wish to help, Americans most commonly cite a lack of free time. Yet, retirees — with plenty of time on their hands — do not volunteer at rates that are any higher than those of workers. And among people who did not volunteer during their working years, just one-third finally begin volunteering during retirement.

4. Retirement can be especially lonely for single men

In some ways, retirement is more challenging for women. Because they live longer than men, they will have to stretch the funds from their nest eggs over a longer period. To make matters worse, women generally start with [less](#) in retirement savings than men do. But women who are single have one big advantage over their male counterparts: They are less likely to be lonely. Just 48% of retired men who live alone say they are very satisfied with the number of friends they have, according to an analysis of Pew Research Center [survey](#) findings. However, a robust 71% of women who live alone are satisfied with the number of friends they have.

5. Health issues likely will catch you by surprise

Slightly more than one-third of retirees say health problems have put a damper on their retirement years, according to a survey from the [Nationwide Retirement Institute](#). And 75% of those folks say their health problems emerged sooner in life than they expected. To make matters worse, about one-quarter say health-related expenses keep them from living the retirement of their dreams. Such sobering numbers underscore why many people planning for retirement would benefit from opening a health [savings account](#) and stashing as much cash as possible into that HSA.

6. As you grow older, you will feel younger

Everyone has heard the cliché: “You're only as old as you feel.” If that is true, here is some good news for retirees: Paradoxically, the older people get, the younger they are likely to feel, according to “[Growing Old in America: Expectations vs. Reality](#),” a paper from the Pew Research Center. For example, among people ages 18-29, about half say they feel their age, one-quarter feel older than their age and another one-quarter feel younger. However, among those 65 and older, 60% say they feel younger than their age and 32% say they feel exactly their age. Just a scant 3% say they feel older than their age.

7. **Your early golden years might not gleam as you had hoped**

Nearly one-third of recent retirees — 28% — say life is worse in retirement than it was during their working years, according to the Nationwide Retirement Institute survey. What is the source of this gloom and doom? Money — or lack thereof. Among those who lament post-work life, 78% cite a lack of income and 76% cite a high cost of living as the top factors in giving them the blues during their golden years. The message to future retirees is obvious: Save early, save often and keep saving. For more tips, check out “[9 Ways to Rescue Your Retirement in 2019](#).”

8. **Initial disappointment will give way to later satisfaction**



If you are among those disappointed with retirement, take heart: As with so many things, retirement is what you make it. You can take steps to boost your overall satisfaction with life during your golden years. For example, [researchers](#) at the University of Exeter in the United Kingdom found that people who volunteer are less likely to be depressed and more likely to be satisfied with life. There is even evidence that volunteers live longer. So, if retirement has got you down, stop gazing at your navel and start looking outward at ways to help others. A lot of other research has found that a happy marriage and spending time with close family and friends can greatly boost retirement satisfaction. Even if you don't take steps to make yourself happy, you might just end up feeling joyous anyway. The Pew Research Center found that 45% of adults 75 and older believe life has turned out better than they expected. Just 5% say it has turned out worse.

[Source: MoneyTalksNews | Chris Kissell | December 21, 2018 ++]

Dog Tags

Directive to Stop Sales of Tags Containing Religious Symbols

A private company says it's fighting a directive from the Army Trademark Licensing Program to halt sales of replica dog tags stamped with the service's emblems alongside biblical scripture. Shields of Strength LLC, which describes itself as a "faith-based business," started selling the trinkets under an Army-granted license in 2012, but the company operated without a license before that, selling millions of replica dog tags since 1998. However, the company's ability to use Army emblems was put in jeopardy this July following formal complaints from the Military Religious Freedom Foundation, or MRFF, an advocacy group focused on service-related First Amendment issues.

Mikey Weinstein, founder of MRFF, told Army Times that the "proselytizing merchandise" was "a clear-cut violation" of Pentagon policy, which doesn't allow trademarked logos to be used to promote religious beliefs, as well as non-belief. The Marine Corps Trademark Counsel was also sent a complaint by MRFF in July and agreed that month to disallow its emblem's use on similar products by Shields of Strength. The Army responded on 12 AUG, but not to Weinstein. Kenny Vaughan, president of Shields of Strength, said he received an email from Army Trademark Licensing Program director Paul Jensen with the subject line "Negative Press." "You are not authorized to put biblical verses on your Army products. For example Joshua 1:9. Please remove ALL biblical references from all of your Army products," Jensen wrote.

The email was included in a complaint sent to Jensen on 3 DEC from Michael Berry, the chief of staff for First Liberty Institute, a religious freedom organization representing Vaughan. The complaint urges the Army to allow Vaughan's business to continue producing military-themed items such as the replica dog tags, or face further legal action. Jensen did not return a request for comment sent Tuesday afternoon. "The subject line of the email that Kenny, our client, received said 'Negative Press,'" Berry told Army Times. "That should be a dead giveaway that there's not really any legal concern here. They didn't like the negative media attention they received." At this time, Army logos still appear on products sold on the Shields of Strength website.



A sampling of the replica dog tags sold by the private faith-based business.

Weinstein called the replica dog tags with biblical scripture "Christian proselytizing," and said he only filed the complaint about Vaughan's trademark violation after more than 50 active-duty service members brought it to his attention. "Such craven utilization of American military logos and related symbology by this sectarian Christian group (Shields of Strength) not only viciously violates well established DoD regulatory law but also poisons the Constitutionally-mandated separation of Church and State," Weinstein said in a prepared statement. The attorney representing Vaughan disagreed in his letter to the Army Trademark Licensing Program director.

Once the Army created a limited public forum through trademark licensing, and allowed private companies to obtain licenses, service officials cannot "discriminate against speech on the basis of its viewpoint" in awarding licenses, Berry wrote. "The government grants licenses to people and entities all the time," Berry said over the telephone. "What the government can't do is discriminate when it grants those licenses. ... It is basically saying 'we're happy to grant licenses to anyone, as long as it's not religious.' And that's clearly what the Army is doing here." Weinstein called the First Liberty Institute's legal argument an attempt to "obfuscate and pollute the well" of settled law.

Shields of Strength has been operating since 1998, but only applied for a trademark license in 2011, when the Army first notified the company that it would need to obtain a license in order to continue selling their Army-themed products. While waiting to receive its license in 2012, Vaughan was told in an email from the Army Trademark Licensing Program that "if it's not approved, it would most likely be due to the biblical scripture. There is a big concern in the Army right now, as some religious groups have been challenging the Army on different issues." [Source: ArmyTimes | Kyle Rempfer | December 4, 2019 ++]

Trump Vegan Challenge

Go 30 Days for \$1 Million Donation to Vets

President Trump's penchant for making deals is legendary, and now a 9-year-old is playing him at his own game. Evan, a boy who is passionate about animal rights and eats only vegan himself, has challenged the President to do the same for the month of January – in return for \$1 million donated to veterans. "President Trump: I'm Evan, president of Animal Hero Kids, and I'd like to make you an offer," he says in a video posted by a nonprofit, Million Dollar Vegan, the organization that would donate the money. "We will give \$1 million to the veterans if you go vegan for January." It's a win-win, as Evan points out. "We want to make America healthy again, and eating plant-based foods is a great place to start," he says. "Our veterans get one million dollars, and you get to eat great plant-based food. Mr. President, do we have a deal?"



It's anyone's guess as to whether Trump will rise to the plant bait. While running for president he campaigned heavily based on veteran support, affirming that he would "strengthen the military so that it's so big and so strong and so great" that "nobody's going to mess with us," reported Military Times earlier this month. He also promised to fire "corrupt and incompetent leaders" of the U.S. Department of Veterans Affairs and reform it. Yet in mid-November, a judge ordered him to pay \$2 million to a group of charities because he had allegedly diverted the funds to his presidential campaign, New York magazine reported earlier this month.

In addition, Trump's recent controversial pardon of three military men for war crimes did not sit well with many veterans. "It puts us on a par with the enemy," Lt. Col. Gary Solis, who served in Vietnam and later as a JAG officer, then taught law at West Point and Georgetown University, told NPR. "And we can't allow that. In the future, those who witness war crimes are going to be less apt to report them because they've seen what happens."

But if he's willing to forego fast food, Trump could win some points and improve his health, as Million Dollar Vegan points out. "The consumption of animal products is fueling health problems across the United States," the group points out on its website. "Heart disease, obesity, type 2 diabetes, stroke and some cancers are directly connected to what we eat, and they cost people their health, their well-being and even their lives." [Source: New York Daily News | Theresa Braine | December 02, 2019 ++]

Appliances

Update 03: Maker Reliability | 12 Most and Least

America's top-rated appliance maker is not a household name, according to new rankings from Consumer Reports. Speed Queen took top honors in the publication's first-ever Appliance Brand Reliability Rankings. Speed Queen makes washing machines and dryers only. So, if you are looking for another type of appliance, you might want to consider Miele, Ikea or LG, which took the next three spots in the rankings. In compiling its list, Consumer Reports looked at data collected from its members on more than 381,000 kitchen and laundry appliances purchased between 2008 and 2018.

"To calculate predicted reliability, we asked members how many times the products they own broke or stopped working as well as they should. We used that data to estimate how new models from a given brand will hold up over the first five years." The publication also gave each appliance brand an "average predicted reliability score" on a scale from 1 to 100. The scores are adjusted to account for differences among different types of appliances. The most reliable brands are as follows:

- Speed Queen — average predicted reliability score of 83 out of 100
- Miele — 75
- Ikea — 70
- LG — 68
- Thermador — 63
- Bosch — 63

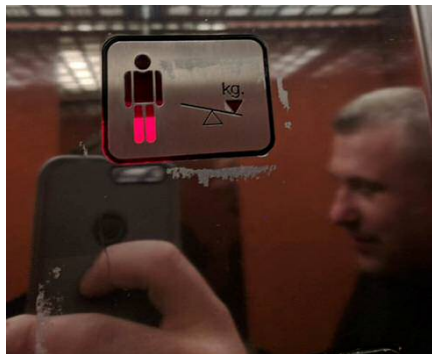
The least reliable brands are:

- JennAir — average predicted reliability score of 37 out of 100
- Asko — 37
- Fisher & Paykel — 29
- Dacor — 29
- Electrolux — 28
- Viking — 15

Consumer Reports emphasizes that reliability is different from performance. For example, while Speed Queen is tops for reliability, its machines “don’t always perform well in our lab tests,” the publication says. Still, some models are “remarkably consistent” when it comes to reliability, Consumer Reports says: “If you’re looking to outfit your kitchen or laundry room with appliances from the same brand, you’d do well to consider Miele, LG, Thermador, and Bosch. And you’ll want to be careful when considering Samsung, Jenn-Air, Dacor, Electrolux, and Viking because each has multiple appliance categories that earn a Poor reliability rating.” [Source: Consumer Reports | Chris Kissell | October 22, 2019 ++]

Interesting Inventions

Elevator Capacity Indicator



This elevator shows how close to capacity it is based on the weight of the riders.

Have You Heard?

Military Humor 9 | Blond Jokes 1 | The Budget

Military Humor 9

My gunnery sergeant and I were inspecting a Marine training exercise when we spotted a second lieutenant ambling about. “Where is your foxhole, Lieutenant?” I asked.

He snapped off a salute and responded, “I don’t know, sir!” Turning to the sergeant, he asked, “Gunnery, where is my foxhole?”

“You’re standing in it, sir,” said the sergeant. “All you have to do is remove the dirt.”

#####

“Halt!” shouted our drill instructor. He had noticed that, for the umpteenth time, a recruit kept going to his right on a left command. Our instructor approached the directionally challenged Marine and stomped on his left foot.

“Now,” he said, “when I say ‘left,’ it’s the one that hurts.”

#####

Students are great about sending our troops letters, and the troops love ’em. You can see why:

- “Dear Soldier, If you’re having a rough day, remember the most important thing in life is to be yourself. Unless you can be Batman.”
- “Dear Veterans, You rock more than AC/DC or Metallica or Red Hot Chili Peppers.” “I am so happy you are risking your life for the USA! My grandpa Bob was in the Navy. Now he likes peanuts.”

#####

An Air Force officer, was riding his scooter when he passed an airman who didn’t salute. He stopped, turned around, and glared at the airman.

“Thanks for coming back for me,” the airman said, jumping on the back of the scooter. “Airmen’s mess, sir.”

#####

I was working in Army security when a VIP from another base called to ask to whom he should address an important letter. Knowing my tough-to-spell last name would give him fits, I said, “Just put down Sergeant Gary, as my last name is too hard.”

The next day, I received a letter addressed to Sgt. Gary Toohard.

#####

While on maneuvers in the Mojave Desert, our convoy got lost, forcing our lieutenant to radio for help. “Are you near any landmarks that might help us locate you?” the base operator asked him.

“Yes,” said the lieutenant. “We are directly under the moon.”

-o-o-O-o-o-

Blonde Jokes 1

- Why do blondes tip-toe past medicine cabinets? ... So they don’t wake up the sleeping pills.
- How do you keep a blonde busy? ... Write “flip” on both sides of a sheet of paper.
- How do you keep a blonde in the shower all day? ... Hand her a bottle of shampoo that says “lather, rinse, repeat.”
- Why did the blonde get so excited about finishing a jigsaw puzzle in six months? ... Because the box said it was for “2 to 4 years.”
- What did the blonde say after glimpsing a box of Cheerios? ... “OMG! Donut seeds!”
- What’s every blonde’s dream in life? ... To be like Vanna White and actually learn the alphabet.
- How do you know if a blonde’s been using your computer? ... You’ll find White Out all over the screen.

- What did the blonde say when she found out she was pregnant? ... “I wonder if it’s mine.”
- Why do blondes stare at orange juice containers for hours on end? ... Because they say “concentrate.”
- Why did the blonde put her iPad in the blender? ... She was trying to make apple juice.
- How do you drown a blonde? ... Put a scratch and sniff sticker at the bottom of the pool.

-o-o-O-o-o-

The Budget

The Budget explained in simple terms:

I love it when complex things are simplified so that we can all understand.

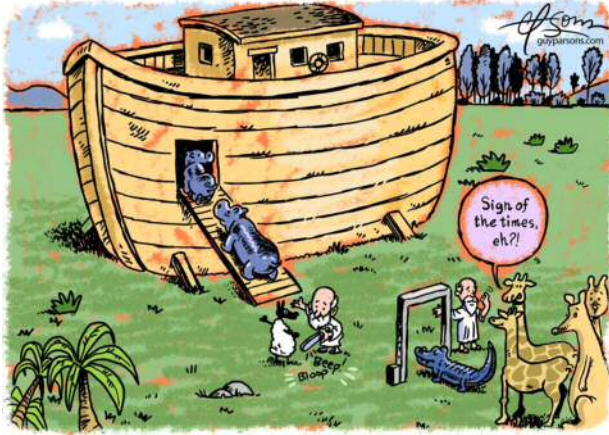
United States Tax revenue: \$2,170,000,000,000
 Fed Budget: \$3,820,000,000,000
 New debt: \$1,650,000,000,000
 National debt: \$14,271,000,000,000
 Recent budget cut: \$38,500,000,000

Now remove 6 zeros and pretend it’s a household budget:

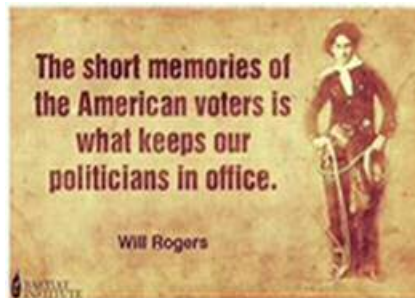
Annual family income: \$21,700
 Money the family spent \$38,200
 New debt on the credit card \$16,500
 Outstanding balance on credit card: \$142,710
 Total budget cuts politicians are proud about: \$385

Stop the insanity now. Vote them out and demand a balanced budget.





Thought of the Week



FAIR USE NOTICE: This newsletter may contain copyrighted material the use of which has not always been specifically authorized by the copyright owner. The Editor/Publisher of the Bulletin at times includes such material in an effort to advance reader's understanding of veterans' issues. We believe this constitutes a 'fair use' of any such copyrighted material as provided for in section 107 of the US Copyright Law. In accordance with Title 17 U.S.C. Section 107, the material in this newsletter is distributed without profit to those who have expressed an interest in receiving the included information for educating themselves on veteran issues so they can better communicate with their legislators on issues affecting them. To obtain more information on Fair Use refer to: <http://www.law.cornell.edu/uscode/17/107.shtml>. If you wish to use copyrighted material from this newsletter for purposes of your own that go beyond 'fair use', you must obtain permission from the copyright owner.

-o-o-O-o-o-

TO READ and/or DOWNLOAD THE ABOVE ARTICLES, ATTACHMENTS, OR PAST BULLETINS GO Online To:

- <http://www.nhc-ul.org/rao.html> (PDF Edition w/ATTACHMENTS)
- <http://www.veteransresources.org> (PDF & HTML Editions w/ATTACHMENTS)
- <http://frabr245.org> (PDF & HTML Editions in Word format)
- <http://veteraninformationlinksasa.com/emos-rao.html> (PDF & HTML Editions w/ATTACHMENTS)
- <http://www.nj-americanlegionpost493.org> (PDF Edition w/ATTACHMENTS)
- <http://www.veteransresources.org/rao-bulletin> (past Bulletins)

Note: The above websites are blocked by some, if not all, USAF & USCG military commands for security purposes. To gain access you may need to open them using a non "...@us.af.mil" / "...@uscg.mil" source. Contact raoemo@sbcglobal.net if you are unable to do this.

Notes:

1. The Bulletin is provided as a website accessed document vice direct access. This was necessitated by SPAMHAUS who alleged the former Bulletin's size and large subscriber base were choking the airways interfering with other internet user's capability to send email. To avoid removal of my email capability by them I notified all subscribers of the action required to continue their subscription. This Bulletin notice was sent to the 19,378 subscribers who responded to that notice and/or have since subscribed. All others were deleted from the active mailing list.

2. Bulletin recipients with interest in the Philippines, whether or not they live there, can request to be added to the RAO's Philippine directory for additional receipt of notices on Clark Field Space 'A', U.S. Embassy Manila, and TRICARE in the RP.

3. New subscribers and those who submit a change of address should receive a message that verifies their addition or address change being entered in the mailing list. If you do not receive a message within 3 days it indicates that either I never received your request, I made an error in processing your request, or your server will not allow me to send to the email addree you provided. Anyone who cannot reach me by email can call (858) 842-1111 to ask questions or confirm info needed to add them to the directory.

4. If you have another email addree at work or home and would like to receive Bulletin notices there also, just provide the appropriate addree to raoemo@sbcglobal.net.

5. Past Bulletin articles as well as an index of all previously published article titles are available on request to raoemo@sbcglobal.net. Bear in mind that the articles listed on this 200 page plus index were valid at the time they were written and may have since been updated or become outdated.

6. The Bulletin is normally published on the 1st and 15th of each month. To aid in continued receipt of Bulletin availability notices, recommend enter the email addree raoemo@sbcglobal.net into your address book. If you do not receive a Bulletin check either <http://veteraninformationlinksasa.com/emos-rao.html>, www.nhc-ul.org/rao.html, www.veteransresources.org, or <http://frabr245.org> before sending me an email asking if one was published. If you can access the Bulletin at any of the aforementioned sites it indicates that something is preventing you from receiving my email. Either your server considers it to be spam or I have somehow incorrectly entered or removed your addree from the mailing list. Send me an email so I can verify your entry on the validated mailing list. If you are unable to access the Bulletin at any of these sites let me know.

7. Articles within the Bulletin are editorialized information obtained from over 100 sources. At the end of each article is provided the primary source from which it was obtained. The ++ indicates that that the information was reformatted from the original source and/or editorialized from more than one source. Because of the number of articles contained in each Bulletin there is no way that I can attest to their validity other than they have all been taken from previously reliable sources. Also, just because an article appears in the Bulletin it does not necessarily mean I support its content. If an article is based on the author's opinion vice a government entity I try to note that after the author's name. Readers who question the validity of any article's content are encouraged to go to the source provided to have their questions answered or express their opinions. I am always open to comments but, as a policy, shy away from anything political. Too controversial and time consuming.

8. Recipients of the Bulletin are authorized and encouraged to forward the Bulletin to other vets or veteran organizations.

== To subscribe first add the RAO email addree raoemo@sbcglobal.net to your address book and/or white list. Then send to this addree your full name plus either the post/branch/chapter number of the fraternal military/government

organization you are currently affiliated with (if any) “AND/OR” the city and state/country you reside in so your addressee can be properly positioned in the directory for future recovery. Subscription is open at no cost to all veterans, dependents, military/veteran support organizations, and media.

== Anyone who wants to remove or change their email addressee from the Bulletin mailing list can use the automatic “UNSUBSCRIBE” or “Change of Address” tabs at the bottom of this message or send a message to raoemo@sbcglobal.net with the word “DELETE” or “COA” in the subject line.

-o-o-O-o-o-

RAO Bulletin Editor/Publisher:

Lt. James (EMO) Tichacek, USN (Ret) Tel: (858) 842-1111 Email: raoemo@sbcglobal.net
Bulletin Web Access: <http://www.nhc-ul.org/rao.html>, <http://www.veteransresources.org>, <http://frabr245.org>,
and <http://veteraninformationlinksasa.com/emos-rao.html> [PDF & HTML Editions w/ATTACHMENTS]

RAO Baguio Director:

SSgt Terrance (Terry) Parker, USAF (Ret), PSC 517 Box 4107, FPO AP 96517-1000, Tel: Smart 0921824728 or Globe 09454073380, Email: rao.dir.baguio@gmail.com

RAO Baguio Office: Mountain Lodge, 27 Leonard Wood Road, Baguio City, 2600 Philippines
FPO Mail Pickup: TUE & THUR 09-1100 --- Outgoing Mail Closeout: THUR 1100

Warning:

DELETE the end-paragraph (i.e. UNSUBSCRIBE Option) of the Bulletin before you forward it to others. The option following this warning is required by law and offers the recipient an opportunity to “UNSUBSCRIBE”, if they choose to. This “unsubscribe” link contains YOUR email address vice theirs and whoever receives your re-distribution has the opportunity, whether purposely or inadvertently, to terminate your future receipt of Bulletin messages if they should click on it.

