

RAO

BULLETIN

15 January 2020



PDF Edition

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1. The page number on which an article can be found is provided to the left of each article's title
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.

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Military Unmanned Ships

Update 01: US Navy's Surface Force Directed to Develop Concepts

The head of the U.S. Navy's Fleet Forces Command has ordered the service's surface force to develop a concept of operations for both the large and medium unmanned surface vessels in development, according to a 19 DEC message seen by Defense News. The message, which was coordinated with U.S. Naval Forces Europe and U.S. Pacific Fleet, directs the surface fleet's Surface Development Squadron to develop concepts for "the organization, manning, training, equipping, sustaining, and the introduction and operational integration of the Medium Unmanned Surface Vehicle and Large Unmanned Surface Vessel with individual afloat units as well as with Carrier Strike Groups, Expeditionary Strike Groups, and Surface Action Groups."



A rendering of DARPA's Sea Hunter, which has been transferred to the U.S. Navy's Surface Development Squadron. The squadron has been tasked with formulating a comprehensive concept of operations for unmanned ships.

The message comes after a long battle with Congress over funding for unmanned surface combatants, during which lawmakers expressed skepticism that the Navy was knowledgeable enough about the technology for which it was seeking funding. Ultimately Congress appropriated funds for the Navy to buy two large unmanned surface vessels, but lawmakers forbade the service from equipping the vessels with vertical launch tubes, as the Navy intended. The concepts of operations is meant to define what would be considered "initial operating capability" for the medium and large USVs and goes on to define what those platforms are intended to do.

- "Medium Unmanned Surface Vehicle will be a high-endurance vessel with capacity for carrying various modular payloads," the message read. "Large Unmanned Surface Vessel will be high-endurance vessel equipped with Vertical Launch System (VLS) cells.
- "The Medium Unmanned Surface Vehicle will initially focus on intelligence, surveillance and reconnaissance (ISR) payloads and electronic warfare (EW) systems, while the Large Unmanned Surface Vessel will focus on surface warfare (SUW) and strike missions."

The message directs the Surface Development Squadron, which was created last year to incorporate new technologies such as the DDG-1000 and Sea Hunter into the force, to examine several areas of consideration. The group is to examine command and control for the platforms, as well as potential challenges with interoperability and communications; examine issues with basing, maintaining and supporting the new platforms; look at what the vessels will need in terms of sensors, computers and various supporting systems; and look at what kind of training and personnel will be needed to support unmanned operations. The group is directed to have a first draft by February and a final draft prepared by September of this year. Ultimately the group's work is intended to help inform acquisition requirements.

The Navy recently emerged from a bruising fight with Congress over its designs for integrating unmanned technology into the surface force. Navy leaders have publicly acknowledged congressional skepticism. In October, the Navy's top requirements officer told an audience at the Expeditionary Warfare Conference in Annapolis, Maryland, that the platform will be difficult to develop. "I don't want to be Pollyannaish about this: It's going to be

hard work,” said Vice Adm. Jim Kilby, the deputy chief of naval operations for war-fighting requirements and capabilities. “And when we brief this, we go right to the upper right-hand corner of the difficulty spectrum. “So we have been working with the acquisition community to roll out a test and competence program so we can get something to the war fighter that they’re confident they can use.”

What Congress wants to see is more gradual development and proof of concept before it commits serious funding, Kilby told reporters after his remarks. "What I think they are interested in is ‘Block I will have the following capabilities and we’re going to test them in the following manner, and you can see the results of that test,’ ” Kilby said. “Then we are going to move on to Block II and Block III. They’re interested in us having a ramp-up and build confidence, achieve those capabilities and they can follow that.

“Let’s talk about that first instantiation: Maybe that’s going from point A to point B, follow [the International Regulations for Preventing Collisions at Sea], not hit anything, follow the rules of the road. Well, that serves a number of purposes from a deception standpoint. And if those platforms can do that, then maybe I can add capability as I prove out that concept.” The message from Fleet Forces Command described the Navy’s acquisition strategy as “a rapid, iterative, block approach to further develop, test, and employ new capabilities, aligned with the Surface Capability Evolution Plan,” referencing a document developed inside the office of the chief of naval operations that lays out plans for a future surface force.

Congress approved the two LUSVs the Navy requested, but forbade the service from installing a vertical launching system. Furthermore, lawmakers are withholding funding until the Navy’s top acquisitions official briefs them on the path forward for these systems. “Incremental upgrade capability for a vertical launch system may be addressed in future fiscal years,” read the agreement between House and Senate appropriators. “It is directed that no funds may be awarded for the conceptual design of future LUSVs until the Assistant Secretary of the Navy (Research, Development and Acquisition) briefs the congressional defense committees on the updated acquisition strategy for unmanned surface vessels.” [Source: DefenseNews | David B. Larter | January 3, 2020 ++]

DoD Lawsuit | Bad Paper Discharges

Update 02: Pentagon Withholding Info from Veterans' Advocates

In another lawsuit on the subject a veterans group said the Pentagon has stopped releasing information that helps former service members to contest less-than-honorable discharges from the military. The Defense Department has been breaking the law on this issue since April, according to the lawsuit filed 2 JAN in federal court in Virginia by the National Veterans Legal Services Program. The group says it lacks access to decisions made by military review boards. The boards grant or deny a veteran's request to upgrade a less-than-honorable discharge. Veterans’ lawyers study those decisions in hopes of building successful arguments for their clients.

The lawsuit comes at a time of growing recognition that a less-than-honorable discharge can stem from behaviors brought on by post-traumatic stress disorder or traumatic brain injuries. Liberal consideration is supposed to be given to veterans with combat-related mental health conditions and to those who were sexually assaulted while in the military. Lawyers and veterans' advocates "often look" at the past decisions of military review boards, said Bart Stichman, executive director of the organization that filed the lawsuit. “These decisions are redacted to protect privacy," he added. "You don’t see the name of the veteran who has PTSD or other personal information.”

Lisa Lawrence, a spokeswoman for the Defense Department, said in an email that the military is “reviewing the complaint and will consult with the Department of Justice on an appropriate response to this lawsuit.” Dana Montalto, a clinical instructor at Harvard Law School's Veterans Legal Clinic, backed up the lawsuit's claim that discharge decisions have not been available. She said there are thousands of decisions going back at least 15 years. She said the

lack of information hampers veterans' efforts to change their discharge statuses and to get more help. Veterans can lose some or all of the benefits that are available depending on the level of their discharge status.

“It would shock many people to learn that veterans are waiting years to get a decision from a review board, during which time they’re often shut out from receiving critical healthcare and support services that they desperately need,” she said. Montalto said military review boards have made significant efforts to account for mental health conditions. And requests that would not have been granted a decade ago are now being approved, she said. But she said success rates are still too low and that more needs to be done. “It may be surprising to know that post-9/11 vets have the highest rate of receiving less-than-honorable discharges than any era of veterans,” she said. “This generation is no less honorable and has notably volunteered.” [Source: The Associated Press | Ben Finley | January 4, 2020 ++]

Military Discharge

U.S. Appeals Court Rules USAF HIV Policy Obsolete



A US appeals court on 10 JAN upheld an injunction blocking the Air Force from discharging two HIV-positive airmen. The policy, the court ruled, is obsolete. "A ban on deployment may have been justified at a time when HIV treatment was less effective at managing the virus and reducing transmission risks," a three-judge panel of the 4th US Circuit Court of Appeals wrote. "But any understanding of HIV that could justify this ban is outmoded and at odds with current science," the ruling continues. "Such obsolete understandings cannot justify a ban, even under a deferential standard of review and even according appropriate deference to the military's professional judgments."

The ruling upheld a lower court's motion last February blocking their pending discharge from the Air Force. "I am extremely relieved to learn that I can continue to serve this country like any other service member," one of the two airmen said in a statement under the pseudonym "Victor Voe." "Serving in the U.S. military has been the greatest honor of my life and I'm thrilled to see this court affirm the lower court ruling in our favor," he added. "No one should be discharged or discriminated against because of HIV when it does not interfere whatsoever with our capacity to serve." Lynn Kirby, an Air Force spokesperson, told CNN, "We have received and respect the court's ruling and are committed to treating all Airmen fairly under the law. However, due to ongoing litigation we cannot provide further comment on this particular case."

The lawsuit, filed by the two airmen under the pseudonyms **Voe and "Richard Roe"** in December 2018, claimed that the Pentagon was discriminating against service members with HIV through a long-standing Defense Department rule that says they can't deploy outside the US without a waiver. The Trump administration introduced a new rule in February 2018 that said any service member who can't be deployed outside the United States for more than one continuous year should be separated from service. Proponents of the policy said it reduced the burden on deployable

service members, who were deploying at higher rates due to the need to cover for those service personnel who are not deployable.

"This directive arguably would have applied to almost all service members living with HIV," the airmen's lawsuit said. Roe and Voe argued that they faced "being discharged despite the contrary recommendations of their commanding officers and physicians solely because they have tested positive" for HIV -- despite adhering to treatment plans and not showing symptoms. Air Force spokesperson Ann Stefanek pushed back on the allegations when the airmen filed the lawsuit, stating that "the Air Force does not find all airmen with asymptomatic HIV unfit" and that each chronically ill Air Force member's "fitness determination is conducted on a case by case basis."

Scott Schoettes, a lawyer for the airmen and HIV Project Director at Lambda Legal, was confident that the case would ultimately be successful when it went to trial as the airmen remained in the Air Force "because the Government is unable to offer a reasonable justification for their discriminatory treatment of service members living with HIV." "At the root of these discharge decisions and other restrictions on the service of people living with HIV are completely outdated and bigoted ideas about HIV," he said in a statement Friday. "Today's ruling clears the way for us to definitively prove at trial that a person living with HIV can perform the job of soldier or airman as well and as safely as anyone else." [Source: CNN | Caroline Kelly | January 10, 2020 ++]

Defense Health Agency

Update 10: Military Medical Facilities Transition

The transition of military medical facilities to the Defense Health Agency's management should be invisible to patients, but they should notice improvements to care, the agency's director says. Lt. Gen. Ronald Place, who became DHA's third director in September, told Military.com in an interview this month that service members and their families should not see a change to protocol as all of the services' clinics and hospitals, about 245 of them across the country, transition to the DHA's care. "They shouldn't notice that it was an Army medicine facility, Navy medicine facility, Air Force facility and now it's a DHA facility," he said. "That should all be invisible."

But Place said they "absolutely positively" should see improved care. "The majority of these administrative changes," he said, "at least in the short term, are for making it easier for our patients to understand our system and for us to be able to take care of them." Faster prescription pickups and painless appointment booking off base are the types of improvements patients should see when the DHA standardizes management of clinics and hospitals across the military health system, Place said.

Congress mandated the military medical reorganization, which is the largest change in decades, in 2017. Lawmakers hoped it would save money and let the services focus more on military readiness and delivering care rather than managing clinics and hospitals. Place said the DHA found that most of the system's expertise was in each service's medicine headquarters. A longer transition would have reduced staff in those headquarters, causing problems, he explained. So implementation of the transition plan was shortened last summer from four years to three. This means management of all medical treatment facilities across the U.S. began 1 OCT; the DHA will take over overseas military medical facilities on Oct. 1, 2020.

"... We believe we made [the transition] short enough to minimize the risk of not enough staff in the headquarters but long enough to be able to do the "This is who's doing that now. This is who's doing it in the future. What's the handoff? What's the discussion between them?" That sort of thing," Place said. [Source: Military.com | Dorothy Mills-Gregg | January 6, 2020 ++]

Tricare/CHAMPUS Fraud

Update 21: \$12 Million Prescription Scheme

A former Norfolk boys basketball coach has been accused of taking part in a scheme which defrauded the U.S. military's health insurer of millions of dollars. Federal prosecutors announced 10 JAN that **Derek Clifton** and Dr. **Joe David May**, both of Alexander, Ark. have been charged in a 43-count indictment. Clifton, identified in the indictment as a medical sales representative, was the boys basketball coach at Norfolk School from 2006 until 2009. According to prosecutors, Tricare, the military's health insurer, paid over \$12 million in 2015 for prescriptions, which were prescribed without physicians examining patients. Authorities allege Clifton sent May prefilled prescriptions and May rubber stamped them for over 100 beneficiaries, for which Tricare paid \$4.5 million.

The charges in the indictment include conspiracy, wire fraud, mail fraud, anti-kickback violations, aggravated identity theft, money laundering, lying to the FBI, falsifying records and obstruction of justice. The indictment says Clifton, May and others who aren't named conspired "to conceal the truth from the pharmacy, Tricare and law enforcement alike." Cody Hiland, U.S. attorney for the Eastern District of Arkansas, announced the charges along with Diane Upchurch, special agent in charge of the FBI's Little Rock field office, and Latisha Cleveland, acting special agent in charge of the Dallas regional office of the U.S. Department of Health and Human Services' Office of Inspector General.

According to the news release, Tricare beneficiaries allegedly were recruited, sometimes for pay, to receive expensive compounded drugs they didn't need. Prescriptions went to a Mississippi pharmacy, which shipped drugs nationwide and billed Tricare for reimbursement. Clifton received more than \$740,000 tied to May's prescriptions, and used the money to buy a car, fund his retirement account and buy a home. Clifton began by recruiting three former basketball players he coached who had joined the military. Each of the former players, it says, agreed to receive the drugs after being offered money, and one later received \$1,200 cash hidden inside a Stetson cowboy hat. The players together received nearly \$500,000 in drugs prescribed by May, Hiland said. May is accused in the indictment of using a smartphone app to electronically sign "batch after batch of prefilled prescriptions," often in mere minutes.

"The assembly line alleged in this case of fraudulent prescriptions fueled by kickbacks was especially concerning because it attacked Tricare, our military's health insurer," Hiland said. "Equally troubling are the allegations of a widespread campaign to throw investigators off the trail by lying to the authorities, falsifying medical records, tampering with evidence and attempting to hide material from the grand jury. While such tactics may prolong an investigation, today's indictment shows that they ultimately succeed only in bringing ever more serious charges upon the accused." [Source: Baxter Bulletin | January 13, 2020 ++]

Military Malpractice Claims

How to File One

A new Pentagon committee is developing the process for service members or their survivors to file medical malpractice claims against the Defense Department, but in the meantime, those who believe they have a legitimate case can submit a claim to jump start the process. Army Sgt. First Class Richard Stayskal filed the first claim 1 JAN under a new law that allows active duty personnel to seek compensation for harm caused by a military health provider in a Defense Department hospital setting. Skayskal's \$5 million claim is for negligence by Army physicians who failed to recognize a growing lung mass as cancer and instead diagnosed the former Marine and Green Beret with pneumonia. A civilian doctor diagnosed Stayskal's lung cancer in June 2017. He now has stage 4 terminal lung cancer.

The National Defense Authorization Act signed 20 DEC included provisions from a bill introduced earlier this year, the **SFC Richard Stayskal Medical Accountability Act**. It allows troops or their surviving family members to file

claims for personal injury or death caused by negligence or wrongful acts by a Department of Defense employed health care provider in a military hospital or clinic. The law requires the Pentagon to establish a system for personnel to file malpractice claims and provide an update to Congress on the regulations required for implementation.

Pentagon spokeswoman Lisa Lawrence said this week that the department is ready to receive claims for processing when the procedures for reviewing the claims are established. . Military personnel should follow their individual services' policies for filing a claim. According to Lawrence, the addresses for filing are:

- **Army:** Claims should be presented to the nearest Office of the Staff Judge Advocate, to the Center Judge Advocate of the Medical Center in question, or with U.S. Army Claims Service, 4411 Llewellyn Avenue, Fort Meade, Maryland 20755, ATTN: Tort Claims Division.
- **Navy and Marine Corps:** Information, directions and forms for filing a claim may be found at <https://www.jag.navy.mil/>. Claims should be mailed to the Office of the Judge Advocate General, Tort Claims Unit, 9620 Maryland Avenue, Suite 205, Norfolk, Virginia 23511-2949.
- **Air Force:** Claims should be presented either at the Office of the Staff Judge Advocate at the nearest Air Force Base, or sent by mail to AFLOA/JACC, 1500 W. Perimeter Road, Suite 1700, Joint Base Andrews, MD 20762. POC: Medical Law Branch, AFLOA/JACC 240-612-4620 or DSN 612-4620.

Troops are barred from suing the U.S. government for injury or death resulting from their military duties. Since 1950, this has included all claims of malpractice under a U.S. Supreme Court ruling dubbed the Feres doctrine. Stayskal and his attorney, Natalie Khawam of Whistleblower Law Firm in Tampa, Fla., spent the past year pressing Congress to overturn Feres. The resulting legislation still does not permit troops to file civil suits against DoD, but it does provide a means for them or their families to seek compensation.

Khawam said that since Stayskal filed his claim, her firm has filed five more and is reviewing about 30 of what she now refers to as "Stayskal cases." "We have dozens of calls coming in. What's really interesting is that until now, we had no idea where the malpractice was occurring. These cases are really going to bring awareness to the issues at military hospitals," Khawam said 6 JAN. The new law designates \$400 million to the Pentagon to investigate claims and award compensation. It gives victims two years after the malpractice incident to file a claim, with the exception of this year. Those filing a claim in 2020 can seek redress for incidents dating to 2017. [Source: MilitaryTimes | Patricia Kime | January 10, 2020 ++]

POW/MIA Recoveries & Burials

Reported 01 thru 15 JAN 2020 | Seven

"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

-- **Marine Corps Gunnery Sgt. Arthur B. Summers, 27**, was a member of Company I, 3rd Battalion, 6th Marine Regiment, 2nd 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 an attempt to secure the island. Over several days of intense fighting at Tarawa, approximately 1,000 Marines and Sailors were killed and more than 2,000 were wounded, while the Japanese were virtually annihilated. Summers was killed on the fourth day of the battle, Nov. 23, 1943. His remains were reportedly buried in Cemetery 33. Interment services are pending. [Read about Summers.](#)

-- **Navy Seaman 2nd Class Lloyd R. Timm, 19**, of Kellogg, Minnesota, was assigned to the battleship 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 sustained multiple torpedo hits, which caused it to quickly capsize. The attack on the ship resulted in the deaths of 429 crewmen, including Timm. From December 1941 to June 1944, Navy personnel recovered the remains of the deceased crew, which were subsequently interred in the Halawa and Nu'uaniu Cemeteries. Timm will be buried May 25, 2020, in Wabasha, Minnesota. [Read about Timm.](#)

-- **Army Air Forces 2nd Lt. William J. McGowan, 23**, of Benson, Minnesota, was a pilot, serving with the 391st Fighter Squadron, 366th Fighter Group, 9th U.S. Air Force. On June 6, 1944, he was killed when his P-47 Thunderbolt aircraft crashed while on a mission near the city of Saint-Lô, France. McGowan will be buried June 26, 2020, at the Normandy American Cemetery in France. [Read about McGowan.](#)

-- **Marine Corps Reserve 1st Lt. Justin G. Mills, 25**, of Galveston, Texas, was a member of Company C, 1st Battalion, 2nd 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. Over several days of intense fighting at Tarawa, approximately 1,000 Marines and sailors were killed, including Mills on the first day of battle, Nov. 20, 1943. Mills will be buried April 29, 2020, at Arlington National Cemetery in Arlington, Virginia. [Read about Mills.](#)

-- **Army Pfc. John A. Shelemba, 19**, of Hamtramck, Michigan, was a member of Company L, 3rd Battalion, 34th Infantry Regiment, 24th Infantry Division. Shelemba was reported missing in action while defending Taejon, South Korea on July 20, 1950. Shelemba will be buried at Arlington National Cemetery in Arlington, Virginia. The date has yet to be determined. [Read about Shelemba.](#)

-- **Army 1st Lt. Robert C. Styslinger, 28**, of Pittsburgh, served with Battery B, 57th Field Artillery Battalion, 7th

Infantry Division. He was reported to have been killed in action Nov. 29, 1950, while fighting enemy forces near Hagaru-ri, Chosin Reservoir, North Korea. His remains could not be recovered. Styslinger will be buried at Arlington National Cemetery in Arlington, Virginia. The date has yet to be determined. [Read about Styslinger.](#)

-- **Army Sgt. Maximiano T. Lacsamana, 37**, of the Philippines, a veteran of the Philippine Scouts during World War II, was a member of Company I, 3rd Battalion, 31st Regimental Combat Team, 7th Infantry Division. During the Korean War, his unit was engaged in intense fighting with the Chinese People's Volunteer Forces near Hagaru-ri, North Korea. He was reported missing in action Dec. 3, 1950. Following the war, his remains could not be recovered. Lacsamana will be buried in the spring of 2020 in the Philippines. The exact date and location have yet to be determined. [Read about Lacsamana.](#)

[Source: <http://www.dpaa.mil> | January 15, 2020 ++]

* VA *



VA Blue Water Claims

Update 81: VA Began Deciding Claims 1 JAN 2020

The U.S. Department of Veterans Affairs (VA) began deciding claims for the Blue Water Navy Vietnam Veterans Act of 2019 at 12:01 a.m., Philippine Standard Time, Jan. 1, 2020. The Philippines is the farthest east VA regional benefits office. The Act extends 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. Signed into law 25 JUN 1919, the law specifically affects Blue Water Navy (BWN) Veterans who served no more than 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 now 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. Veterans do not need to prove that they were exposed to herbicides. The specific conditions can be found by searching the term “Agent Orange” on www.va.gov. “For six months, VA worked diligently to gather and digitize records from the National Archives and Records Administration to support faster claims decisions,” said VA Secretary Robert Wilkie. “These efforts will positively impact the claims process for Veterans filing for these benefits.”

To be eligible a Veteran must have served in the identified locations during the specified time period and currently have a [condition\(s\)](#) associated with herbicide exposures, such as Agent Orange. Blue Water Navy claims are being processed under current prioritization criteria; however, special priority is being given to Veterans who are over the age of 85 or have a terminal condition. Qualifying recipients include affected Veterans who are still living and 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 14 presumptive conditions associated with herbicides such as 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 Act includes provisions impacting the VA Home Loan Program. Veterans have more access 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. VA’s website describes the eligibility

of certain Purple Heart recipients who do not have to pay a funding fee as well as [other benefits](#). Veterans who want to file an initial claim for an herbicide-related disability can use VA [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. Visit Blue Water Navy Veterans [benefits](#) for more information or call 1-800-749-8387 for special issues. [Source: Office of Public and Intergovernmental Affairs | News Release | December 31, 2019 ++]

VA Blue Water Claims

Update 82: Interactive Map Helps Vets Locate their Ship Positions



www.hillandponton.com/blue-water-navy-vietnam-map

A new [interactive map](#) could help ill Vietnam veterans who served on U.S. ships during the war determine whether they could be eligible for Agent Orange-related benefits. A retired Navy chief radioman has teamed with a Florida-based law firm to make the map available to “blue water” Vietnam veterans, their widows and anyone interested in seeing where Navy and Coast Guard vessels served offshore during the decade-long conflict. The information, said Ed Ball, director of research for Military Veterans Advocacy Inc., could be useful for determining whether a ship served in the waters designated by the Blue Water Navy Vietnam Veterans Act of 2019.

The law, signed 25 JUN 2019 by President Donald Trump, allows former service members who served on a ship that operated within 12 nautical miles of a line of demarcation established by law and have an illness presumed related to herbicide exposure apply for health benefits and disability compensation. Ball told Military Times he has worked on the map for four years, poring over Navy ship logs and plotting the vessels’ coordinates along with the dates the ships sailed within the designated zone. By clicking through the map, for example, veterans can learn that the aircraft carrier America served within the limits in December 1972 near Da Nang. The Coast Guard high endurance cutter Bering Strait crossed into the designated waters once in 1968 and three times in 1970. “Over 1,700 deck logs have been plotted to date, and we continue to add new information from the Blue Water Navy Vietnam Veterans Association master list of deck logs,” Ball said.

The map is hosted by the disability law firm Hill & Ponton. Numerous law firms vie to assist veterans in drafting and filing disability claims with the Department of Veterans Affairs; many veterans service organizations provide similar assistance free of charge. Matthew Hill, managing partner at the firm said Hill & Ponton decided to support

Ball's efforts to assist veterans. "Improving transparency and simplifying access to this data is essential as we support the Vietnam veterans ... now suffering the effects" of Agent Orange exposure, Hill said in a release.

As part of filing disability claims, veterans must show they served on a U.S. vessel when it traversed the congressionally drawn zone. Data from the map is derived from the National Archives and ships logs as well as the Blue Water Navy law, according to Ball. Hill said as veterans and family members send in additional data they have collected, the map will be updated. Ball said service members who were on ships that aren't yet mapped or those who served outside the zone, such as in the Gulf of Tonkin, should contact Military Veterans Advocacy and the Blue Water Navy Association if they have one of 14 diseases listed by the VA as linked to Agent Orange. "We have other instances of exposure and they may still be able to file a claim," he said.

Meanwhile, the Department of Veterans Affairs has started approving claims from the nearly 90,000 veterans who may be eligible for disability compensation. According to Ball and other members of the Blue Water Navy Association, some veterans and widows have been notified of their claims approvals while others are simply finding deposits from VA in their bank accounts. Jim Caldwell, a Navy veteran who lives in Mission Valley California and has type 2 diabetes, checked his balance and found a deposit for \$6027.05. "Glorious and happy day," Caldwell wrote in a message on Facebook. "Please ... let the rest of the blue water navy know that it IS coming and on the way!" [Source: MilitaryTimes | Patricia Kime | January 8, 2020 ++]

Depression

Update 07: VA Spravato Nasal Spray Treatment Results

The Department of Veterans Affairs faced criticism last summer when it fast-tracked approval for a drug used to help veterans with depression that some said hadn't been fully tested. More than six months later, few veterans are using the drug. VA spokesman Mike Richman told Connecting Vets 15 veterans have received the treatment at seven VA hospitals or clinics as of 10 DEC. Spravato, the brand name for the drug esketamine, a derivative of ketamine, has been used as a recreational drug and also to treat depression in some instances. Spravato is produced by a subsidiary of Johnson and Johnson. It is meant for adults with severe depression and suicidality that has not been responsive to other treatments. It's said to be so fast-acting the results can be felt in fewer than 24 hours.

Reports last summer cited critics who said President Donald Trump and others may have influenced the VA to fast-track incomplete clinical trials of the pricey medication, including meeting with VA Secretary Robert Wilkie, offering to help make a deal to get the drug. House Veterans Affairs Committee Chairman Rep. Mark Takano (D-CA) said last summer he was "incredibly alarmed" by the reports that Spravato was being "rushed through critical reviews and may be prescribed to veterans before fully vetting the potential risks and benefits." He called the fast-tracking "suspicious." Takano said at the time, "Questions remain about the ultimate impact on the health and safety of veterans, who should not be made into a 'test case' while the clinical community continues to gather data about this treatment. We demand that VA provide documents and information about its review and contracting process to adequately address critical questions — including whether VA officials were pressured by the White House or the Mar-a-Lago 'three' to prescribe this drug to veterans."

An FDA joint advisory committee voted 14-2 last year to approve the drug for public release, defending the drug in The New England Journal of Medicine as a "novel treatment for a severe and life-threatening condition." But the drug has had controversial reactions from academics and health care professionals, who say its effects are not fully understood and side effects -- including suicidal ideation -- have been ignored. VA is already calling use of the drug 'successful.' "The rollout of the drug has been successful due to VA's implementation plan," Richman said, which included monitoring veterans on the drug for safety and launching the medication at sites that had previous experience using ketamine treatment for mental health concerns

VA also rolled out a detailed study of the drug, criteria for its use, guidance, informed consent and formulary status to its facilities nationwide. Hospitals and clinics using the drug are subject to site visits and VA continues to circulate more and more information on the drug and its uses, Richman said. So far, doctors and patients "indicated that the treatment is being well-tolerated," Richman said. Reported side effects or other negative events associated with the drug so far include: dissociation, transient elevation in blood pressure and heart rate, headache, nausea, vomiting and sedation, he said. But none of the side effects have been enough to convince veterans or their doctors to stop treatment, Richman said. "None of the side effects reported to date have been intolerable enough to cause the veteran or treatment team to decide to stop the esketamine treatments," he said.

Patients who are prescribed Spravato must be monitored by medical staff, adding to the already expensive drug, which can cost thousands per course of treatment. Spravato comes in two- and three-dose packages. For the VA, based on its contract with Johnson and Johnson, the cost per dose is about \$218.68, or \$437.34 for the two-dose package and \$656.03 for the three-dose package, VA spokesperson Ndidi Mojay told Connecting Vets last year.

One of the most common and significant concerns with many antidepressant medications is the potential to increase suicidal thoughts. Of the 15 veterans receiving esketamine treatment at VA so far, there has been one report of a veteran who experienced "brief, transient increase in suicidal ideation" a few minutes after he or she administered the drug "while under close monitoring" according to federal requirements, Richman said. The veteran did not have an "active plan or intent" to hurt themselves, "but out of an abundance of caution, the veteran was admitted to the inpatient psychiatric unit for overnight observation," Richman said.

The veteran remained stable and "with improved overall mood symptoms and no return of suicidal ideation," he or she was discharged home with family the next day, he said, and continued as scheduled with the next dose of the drug two days later "which was well-tolerated and without adverse events." All later treatments for that veteran also went well and "they are benefiting from the treatment with an overall reduction in suicidal ideation and improved mood and functioning." [Source: ConnectingVets.com | Abbie Bennett | January 02, 2020 ++]

VA Mental Health Care

Update 40: 7 Stress Resources Vets Can Use Right Now



As a Veteran, you might experience difficult life events or challenges after leaving the military. VA is here to help no matter how big or small the problem may be. VA's resources address the unique stressors and experiences that Veterans face — and they are just a click, call, text, or chat away. Following are seven mental health resources Veterans can use right now:

1. Just show up to any VA Medical Center. Did you know that VA offers same day services in Primary Care and Mental Health at 172 VA Medical Centers across the country? VA Secretary Robert Wilkie has made SameDay [24/7 access](#) to emergency mental health care the top clinical priority for VA staff. "It's important that all Veterans, their family and friends know that help is easily available." Now, all [172](#) VA Medical Centers (VAMCs) provide Same-

Day Mental Health Care services. If a Veteran is in crisis or has need for immediate mental health care, he or she will receive immediate attention from a health care professional. To find VA locations near you, explore the facility locator tool.

2. [Make the Connection](#) is an online resource designed to connect Veterans, their family members, friends and other supporters with information and solutions to issues affecting their lives. On the website, visitors can watch hundreds of Veterans share their stories of strength and recovery, read about a variety of life events and mental health topics, and locate nearby resources.

3. The [Veterans Crisis Line](#) connects Veterans in crisis and their families and friends with qualified, caring VA responders through a confidential toll-free hotline, online chat, and text messaging service. Veterans and their loved ones can call 1-800-273-8255 and Press 1, chat online, or send a text message to 838255 to receive confidential support 24 hours a day, 7 days a week, 365 days a year.

4. [Vet Centers](#) provide community-based counseling for a wide range of social and psychological services, including confidential readjustment counseling, outreach and referral to eligible Veterans, active duty service members, including National Guard and Reserve components and their families. It offers individual, group, marriage and family counseling. And you can get a referral and connection to other VA or community benefits and services at no cost. Vet Center counselors and outreach staff, many of whom are Veterans themselves, are experienced and prepared to discuss the tragedies of war, loss, grief and transition after trauma.

5. [Coaching Into Care](#) provides guidance to Veterans' family members and friends on encouraging a Veteran they care about to reach out for mental health support. Free, confidential assistance is available by calling 1-888-823-7458, 8 a.m. – 8 p.m. ET, Monday through Friday, or by emailing CoachingIntoCare@va.gov.

6. The [Veteran Training](#) online self-help portal provides tools for overcoming everyday challenges. The portal has tools to help Veterans work on problem-solving skills, manage anger, develop parenting skills, and more. All tools are free. Its use is entirely anonymous, and they are based on mental health practices that have proven successful with Veterans and their families.

7. [AboutFace](#) features stories of Veterans who have experienced PTSD, their family members, and VA clinicians. There, you can learn about PTSD, explore treatment options, and get advice from others who have been there.

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For more information about VA's mental health resources and behavioral health services, visit VA's Mental Health Services website at MentalHealth.va.gov, or the Vet Center website (for combat Veterans) at www.vetcenter.va.gov. For a more detailed view of VA mental health service offerings, explore the VA Office of Mental Health and Suicide Prevention [Guidebook](#). To find VA locations near you, explore the [facility locator tool](#). [Source: Vantage Point | January 8, 2020 ++]

VA Home Loan

Update 69: Your Next One Will be Easier

On Jan. 1, 2020, it became easier for you to use your VA home loan benefit to purchase, refinance, or construct a home with no down payment, regardless of the cost of the home. The VA home county loan limits were eliminated as part of the Blue Water Navy Vietnam Veterans Act of 2019 for Veterans and service members with full entitlement. As of 1 JAN 2020, first-time homebuyers, or homebuyers who have sold their home and have full benefit entitlement available, will no longer have to worry about loan limits or down payment requirements when purchasing, refinancing, or constructing a new home.

Historically, VA only guaranteed home loans up to the county conforming loan limits (CLL) as determined by the Federal Housing Finance Agency. These loan limits reflect the changes in average U.S. home prices at the county level. If you chose to purchase, refinance, or construct a home above the CLL, the lender would likely require a down payment from you before they would choose to close on the loan. In counties such as San Diego, Calif., or Arlington, Va., the limit is much higher to reflect the average cost of a home. This meant that when using your VA benefit, the lender—not VA—would require you to pay up to a 25% down payment on any amount above the county limit.

Conforming loan limits will impact those who want to purchase a second (or subsequent) home using a VA home loan. For those that currently have a VA home loan and plan to keep it and purchase a new home using a VA-backed loan that is more than \$144,000, the rules are different.

- You must be able to afford all the loans at the time of closing.
- The next home you purchase must be your primary residence.
- VA may be able to back the next loan, but it will depend on your remaining entitlement and the conforming loan limit (CLL) for your county.

Your basic VA home loan entitlement starts at \$36,000 and goes up to 25% of the loan amount. The amount remaining on your entitlement after purchasing your first home will impact how much of a down payment will be required for your next purchase. For example:

- If the county CLL is \$500,000 and your last loan was for \$500,000, then you have no entitlement remaining.
- If your first loan was for \$200,000 and the second is for \$400,000, the CLL for your next home would need to be at least \$600,000 if you want the no-down payment option, otherwise you'll have to pay a down payment on the amount above the CLL. Note that the county that will determine your loan limit is the county in which your next home is located.

More examples of how this would work in practice, which can be seen [here](#). As each case is different, your first step should be to request your [certificate of eligibility](#), which will show your remaining VA home loan entitlement. If you need assistance determining what this means for you, reach out to your lender or a VA loan specialist. As with any home loan decision, you should speak with your lender(s) or a loan specialist at your VA Regional Loan Center to go over your options when purchasing your next home.

Only you can determine what is best for your personal and financial needs. Whatever the case, speaking to a loan professional about your options and shopping around for the best situation for you is key. Remember, the VA Home Loan Program staff are available to assist you. Go to www.benefits.va.gov/homeloans for more information on VA home loans. [Source: Vantage Point | January 7, 2020 ++]

VA Telehealth Program

Update 18: Country's First Remote Chemotherapy Clinic



The Department of Veterans Affairs has made significant strides in telehealth and mHealth adoption over the past few years, in everything from mHealth apps to virtual visits and telehealth stations in remote and retail locations. Now the VA is gaining praise for a new telehealth service: the country’s first remote chemotherapy clinic. The program is based in Pennsylvania, and links the James E. Van Zandt VA Medical Center in Altoona with the VA Pittsburgh Medical Center, some 100 miles away. Using telemedicine technology, oncologists at the Pittsburgh hospital have been delivering cancer care and chemotherapy treatment to veterans at the clinic for about a year.

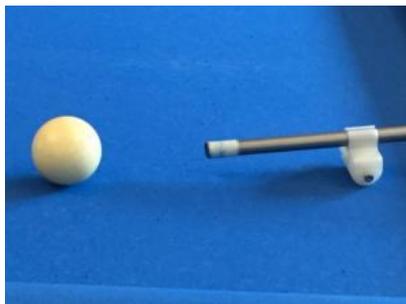
“Patients and caregivers tell me, ‘We love this technology because it saves us so much travel, time, and money,’” Vida Passero, MD, an oncologist and head of the VA Pittsburgh Health System’s Hematology and Oncology Division, said in the news story provided by the VA. With some 40,000 new cancer cases among veterans being reported each year – and percentages rising as veterans from Afghanistan and Iraq enter the mix – cancer care management is rising to the top of an increasingly more complex list of services offered by the nation’s VA health system. Up until recently, that care was almost exclusively delivered in person.

But with many of the nation’s 2.6 million veterans living in remote locations, dealing with mobility or transportation issues or simply hesitant to travel to the nearest hospital, the nation’s largest health system has been moving to embrace connected health. The number of veterans accessing healthcare through telehealth jumped 17 percent from 2018 to 2019, while virtual visits made through the VA’s Video Connect App jumped 235 percent. More recently, the VA has begun placing telehealth kiosks in remote VFW and American Legion posts, and is now pushing that platform into select Walmarts. The idea is to expand the care platform out to the veteran, rather than forcing the veteran to travel long distances to seek care.

Passero and her colleagues launched virtual care consults in 2011, but the technology was raw and interest in the program was minimal. Now, armed with the latest in audio-video technology, they’re ready to see patients. Now the Altoona clinic coordinates care online with Pittsburgh, handling testing, lab work and radiology services and then handing the patient off to Passero and her team for virtual visits. Passero says the program, which she calls “the next frontier” in cancer care, has drawn the attention of other care providers and VA clinics, and she expects to push that model of care to other locations. “We were able to get this project, which was thought to be impossible, off the ground,” she said. “Since then, people in the private sector have been asking, ‘How did you do this?’ It just shows how VA can be innovative.” [Source: <https://mhealthintelligence.com/news> | Eric Wicklund | January 3, 2020 ++]

Disabled Vet Equipage

Billiard Rolling Bridge



Rehabilitation experts at the Department of Veterans Affairs have invented a rolling bridge for billiards so more disabled people can play—a U.S. patent application was made public last week. In contrast to a traditional bridge that is attached to a second cue, the VA’s rolling bridge slips over and grips the player’s primary cue, providing a steady rest

for one-handed shooting. The small, 3D-printed device, which has gone through three prototyping cycles, was invented by Seth Hills, a rehabilitation engineer at Hunter Holmes McGuire VA Medical Center, and Nicole Shuman, an adaptive sports recreational therapist.

Both veterans and non-veterans participate in recreational therapy and adaptive sports among which pool is popular, but the physical requirements for holding a pool cue and shooting preclude some from playing. “Nicole came up with the concept by putting a toy train on the pool stick to see if it would work, and it did,” said Hills. “She asked us to further develop the idea.” The VA’s patent application [U.S. Patent Application 16/443,504 "Rolling Pool Bridge"](#) was made public on Dec. 26, 2019, which marks the invention’s availability for commercialization via a license agreement. In coordination with the VA’s Technology Transfer Program, TechLink is seeking entrepreneurs and companies to license, manufacture, and sell the rolling pool bridge.

Gary Bloomer, senior technology manager at TechLink, has been in recent communication with the VA tech transfer team and is helping prospective companies identify and review the potential for manufacturing the rolling bridge. As the VA’s partnership intermediary, TechLink’s services and consultations are provided to businesses and entrepreneurs at no cost. “The rolling pool bridge is simple but practical and problem-solving,” Bloomer said. “Other products available have some drawbacks that make this attractive for disabled player. Companies interested in learning more about the VA’s extensive patent portfolio can contact Gary Bloomer at gary.bloomer@montana.edu or 406-994-7786. [Source: <https://techlinkcenter.org> | Troy Carter | January 2, 2020 ++]

VA Records

Update 04: Online Patient Portal Launched | Digital Access

Users can access their statements through AccessVA (<https://www.access.va.gov/accessva>), the department’s platform for accessing VA’s online services, using their secure information for DS Logon, ID.me or MyHealthVet Premium. The online statements will include a summary of services Veterans receive at any VA medical facility. By using the Veteran Patient Statement selection on the AccessVA homepage, veterans receiving VA care for non-service connected conditions can view, download and print their patient statements, which are available on AccessVA for up to six months. The VA also noted the department would continue to mail Veterans paper statements.

"VA is committed to leveraging technology to help Veterans access their patient information quickly and conveniently," said VA Secretary Robert Wilkie said in a statement. "We believe these advancements will help Veterans manage their healthcare in more efficient ways." The announcement follows a series of key changes the VA has made to increase transparency and ensure Veterans have the best information regarding the performance of VA health care facilities. These include links to comparative tools relating to wait times, quality of medical care and patient experience ratings, which are available via the website home page for each VA hospital.

The VA has embarked on a number of wide-ranging digitalization projects this year, including the launch of VA’s Electronic Health Record Modernization (EHRM), an initiative to migrate Veteran health data to a new system that will link in with the Department of Defense’s patient records. Another major project was the creation of the National Artificial Intelligence Institute, which will use AI research and development for real-world impact and health care outcomes for Veterans. The department has also made a major push in the area of telemedicine, expanding telehealth services to the 40 percent of Veterans living in rural areas.

The VA recently opened its latest telehealth pilot site, part of the department's Accessing Telehealth through Local Area Stations, or ATLAS, initiative, which will provide clinical services including primary care, mental health and social work. Looking ahead to 2020, the VA, Board of Veterans’ Appeals and Office of Information and Technology are working towards nationwide availability of virtual hearings for Veterans next year, allowing access using their mobile phone or laptop through the VA Video Connect app. [Source: HealthcareIT NewsNathan Eddy | December 26, 2019 ++]

VA Presumptive AO Diseases

Update 29: Addition's Study Results Not Expected till Late 2020

The day President Donald Trump signed a funding bill including a provision ordering VA to announce its plans to add four conditions to the list of Agent Orange-linked diseases within 30 days, VA Secretary Robert Wilkie said the decision wasn't likely to come until at least "late 2020." In a letter to Sen. Jon Tester, D-Mont., dated 20 DEC and obtained by Military Times, Wilkie said he would not make a decision until the results of two long-awaited studies are submitted to or published in scientific journals.

In March 2019, VA officials told members of Congress that the decision would be announced within 90 days. Then Wilkie said he was just awaiting the results of the studies — the Vietnam Era Health Retrospective Observational Study, or VE-HEROES, and the Vietnam Era Mortality Study — expected in 2019. But the requirement that the results be analyzed, peer-reviewed and in the publication pipeline could add months to the process. VE-HEROES results are currently "being analyzed," while data from the mortality study is "expected to be available for peer review and publication in late 2020," Wilkie wrote in the letter.

It's unclear whether VA plans to comply with the new law that requires it to announce its plans on a decision within the 30-day requirement. For the 83,000 veterans with one of three conditions under consideration, including bladder cancer, Parkinson's-like symptoms or hypothyroidism, as well as an unknown number of Vietnam veterans with high blood pressure, the wait continues. Just how many Vietnam veterans have one or more of the four proposed presumptive conditions is unknown; VA did not have the data readily available by press time. What is known is that some veterans will die waiting. While the 10-year survival rate for bladder cancer is high — 77 percent — the mortality rate for in the U.S. bladder cancer is 4.2 deaths per 100,000 people, according to the National Cancer Institute.

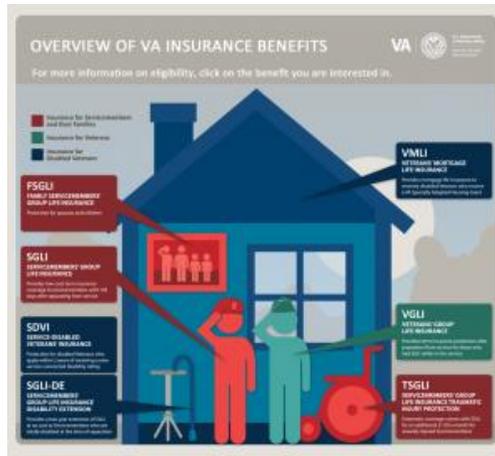
Senate Democrats stepped up pressure on the Trump administration to issue a decision after documents surfaced that showed Office of Management and Budget Director and Acting White House Chief of Staff Mick Mulvaney was personally involved in blocking an announcement of the decision on three of the diseases planned in 2017 by former Veterans Affairs Secretary David Shulkin. Mulvaney and other OMB officials said VA must provide more "compelling evidence" to prove the link between the proposed diseases and exposure.

Lawmakers, including Senate Minority Leader Chuck Schumer of New York, and Rep. Josh Harder, a California Democrat who previously introduced a House resolution urging President Donald Trump to add the diseases to the presumptive medical conditions list, have said "VA needs to get its act together." "We have the science. We have the backing of our veterans. We even have bipartisan agreement in Congress. It's time for the VA to catch up," Harder said. [Source: MilitaryTimes | Patricia Kime | January 6, 2020 ++]

VA Life Insurance

Update 04: Which Program is Best for You?

VA offers life insurance programs that provide financial security and peace of mind for service members, Veterans, and their families. These insurance programs have specific eligibility criteria, insurance terms, and application processes. But how do you know if you're eligible, and how do you apply? The image below provides a simple explanation for each of VA's insurance programs. There's an interactive version of it [here](#). Using these interactive graphics, it's now easier than ever to find out if you're eligible for a VA insurance program. So, which program is right for you?



[Servicemembers' Group Life Insurance](#)

SGLI provides low-cost term life insurance coverage to eligible service members. Coverage is automatic for most active duty service members, Ready Reserve and National Guard members scheduled to perform at least 12 periods of inactive training per year; Commissioned members of the National Oceanic and Atmospheric Administration and the Public Health Service; cadets and midshipmen of the U.S. military academies, and Reserve Officers Training Corps (ROTC) members.

Servicemembers' Group Life Insurance [Disability Extension](#)

SGLI-DE is for service members who are totally disabled at separation. These service members may be eligible to extend their SGLI coverage for up to two years from separation from service—for free.

[Veterans' Group Life Insurance](#)

VGLI allows Veterans to convert SGLI coverage after separation from service. If you apply within 240 days after discharge, then you don't need to submit evidence of good health. You can retain VGLI coverage for as long as you pay the premiums. Also, you may enroll for a maximum amount of coverage that is equal to the amount of SGLI coverage you had when you separated from service. Under certain conditions, the option to convert to a commercial insurance policy is extended to Veterans insured under the VGLI program.

[Family Servicemembers' Group Life Insurance](#)

FSGLI provides term life insurance coverage to the spouses and dependent children of service members insured under SGLI. If you are covered under full-time SGLI, then you are eligible to insure your spouse, regardless of whether your spouse is on active duty, retired, or is a civilian. The service member pays the premium for spousal coverage. Dependent children are insured at no cost. Under certain conditions, spouses who are insured under the Family SGLI program have the option to convert Spousal Coverage to an individual policy of insurance within 120 days from certain events.

Servicemembers' Group Life Insurance [Traumatic Injury Protection](#)

TSGLI provides short-term financial assistance to severely injured service members intended to assist them during their recovery from traumatic injuries. Coverage is automatic for service members covered under full-time SGLI. TSGLI is not only for combat injuries, but provides coverage for injuries incurred on or off duty.

[Service-Disabled Veterans Insurance](#)

S-DVI is life insurance for Veterans who have service-connected disabilities but who are otherwise in good health. S-DVI is available in a variety of permanent plans as well as term insurance.

[Veterans' Mortgage Life Insurance](#)

VMLI is mortgage protection insurance that can help families of severely disabled service members or Veterans by paying off the home mortgage in the event of the service member or Veteran's death. VMLI is only available to service members and Veterans with severe service-connected disabilities who receive a Specially Adapted Housing grant.

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[Financial Counseling](#) is available to beneficiaries of SGLI, VGLI, FSGLI, or TSGLI coverage. Once the claim is paid, you or your beneficiary can get advice from a financial expert at FinancialPoint® to create a plan to address your specific financial needs and guidance for will preparation. As you can see, VA offers a number of life insurance programs, and each accommodates a different group of Veterans and service members, as well as their families. [Source: Vantage Point | January 9, 2020 ++]

VAMC Dallas TX

Update 01: Security Officers Fatally Shoot Knife-Wielding Man

Security officers fatally shot a knife-wielding man who was seeking psychiatric help at a Dallas Veterans Affairs hospital, police said. The man went to the Dallas Veterans Affairs Medical Center late 8 JAN seeking help for "psychiatric issues," the Dallas Police Department said. The man was holding a knife when he encountered VA hospital police officers, Dallas police said. The VA officers followed the man as he started to walk away and tried to take away the knife. When they were unable to do so, the officers opened fire on the man, Dallas police said. The man, whose name has not been released, was taken to an area hospital, where he died from his injuries, according to Dallas police. The shooting did not involve Dallas Police Department officers but that agency is leading the investigation, police said in a press release. [Source: Associated Press | January 9, 2020 ++]

VA Fraud, Waste, & Abuse

Reported 01 thru 15 JAN 2020

Caldwell University, NJ -- The University in Essex County has agreed to pay the United States more than \$4.8 million to resolve its role in a scheme to defraud a federal education benefit program for veterans, U.S. Attorney Craig Carpenito announced 3 JAN. "Caldwell University tried to hoodwink the Department of Veterans Affairs and, worse, veterans themselves, by claiming to offer online classes developed and provided by Caldwell that were in fact marked-up offerings by an online correspondence school," Carpenito said in a statement. "Our veterans should never be treated this way, and we will continue to work to ensure that they receive all of the benefits that they deserve as a result of their service to the country."

Under a deal marketed by Ed4Mil, a Pennsylvania-based company, veterans could use their Post-9/11 GI Bill tuition benefits to enroll in online courses offered by Caldwell, authorities said. The bill was designed specifically to help veterans who served in the armed forces following the terrorist attacks on Sept. 11, 2001. The online classes were not offered by Caldwell University or taught by the university's staff, according to court documents. Instead, they were low-cost correspondence courses that were not eligible for the GI Bill. But Caldwell University submitted false claims for payment for the courses to the U.S. Department of Veterans Affairs from Jan. 1, 2011 through Aug. 8, 2013, Carpenito said. The agency administers the Post 9/11 GI Bill.

Three people previously pleaded guilty to charges of conspiracy to commit wire fraud related to the scheme, federal prosecutors said. **Lisa DiBisceglie**, the former associate dean of the office of external partnerships at Caldwell, and **Helen Sechrist**, a former employee of Ed4Mil, pleaded guilty in 2017 in federal court in Newark to one count of

conspiracy to commit wire fraud. The women's guilty pleas followed the indictment of **David Alvey**, 40, of Harrisburg, Pennsylvania, the founder and president of Ed4Mil, one year earlier. Alvey was sentenced on June 4, 2018, to five years in prison and DiBisceglie and Sechrist were each sentenced on June 5, 2018, to three years of probation, according to the statement. The trio were also ordered to pay \$24 million in restitution.

Ed4Mil falsely claimed on government applications that the classes offered to the veterans were approved Caldwell classes and not correspondence courses taught by an online company, according to court documents. The government was charged between \$4,500 and \$26,000 per course, instead of the \$600 to \$1,000 per course the correspondence company charged for the same classes, federal prosecutors said. The \$24 million in tuition benefits collected through the GI Bill was allegedly paid to Caldwell University, which then turned over between 85 percent and 90 percent of the money to Ed4Mil, according to court documents. [Source: www.nj.com/news | Chris Sheldon | January 3, 2020 ++]

* Vets *



Vet Health Care

Update 09: Top Concern for U.S. Vets

After discharge, military veterans are most concerned about their physical and mental health, a new study finds. Although most vets are satisfied with their work and social relationships, they are less happy with their health care. Most are coping with chronic physical or mental health conditions, researchers found. "What remains to be seen is whether those veterans with health conditions -- which were more commonly experienced by deployed veterans -- continue to maintain high levels of well-being in other life domains over time," said lead author Dawne Vogt, a research psychologist at the U.S. Department of Veterans Affairs Boston Healthcare System. "Given that it is well-established that health problems can erode functioning in other life domains, it may be that these individuals experience declines in their broader well-being over time," she added in a VA news release.

For the study, Vogt's team surveyed nearly 10,000 vets discharged in the fall of 2016. They were surveyed about three months after their separation and again six months later. Their biggest concern at both points was health. Fifty-three percent of vets said they had chronic physical conditions, and 33% said they had chronic mental health conditions. The most common conditions were chronic pain, sleep problems, anxiety and depression.

- More than half said satisfaction with their health declined within months of leaving the service.
- More than three-quarters of vets said they were in an intimate relationship. Almost two-thirds said they had regular contact with friends and extended family and were involved in their communities.
- More than half said they had found work within three months of discharge. But within a year, their functioning on the job had declined -- possibly due to health concerns, the study found.
- And vets who had enlisted in the service were in poorer health and had lower job and social satisfaction than officers. Veterans who had been in war zones had more health concerns than others.

Given these findings, Vogt said it's important to deal with readjustment challenges quickly before they get worse and affect vets' well-being. "Given that most transition support is targeted to veterans with the most acute or chronic

concerns, this recommendation may require rethinking how veteran programs prioritize their efforts," she said. "While it makes sense to target resources to those with the greatest need, it is better to support individuals before their concerns become chronic when we can." The report was published 2 JAN in the American Journal of Preventive Medicine. Can be read at [https://www.ajpmonline.org/article/S0749-3797\(19\)30481-7/fulltext](https://www.ajpmonline.org/article/S0749-3797(19)30481-7/fulltext). [Source: U.S. News & World Report | Steven Reinberg | January 3, 2020 ++]

Vet Suicide

Update 44: "Together We Can" Information Sheets Released

These sheets provide Veterans, their families, and caregivers with resources and steps to take as they cope with a suicide death or attempt.

The U.S. Department of Veterans Affairs (VA) has added two new information summaries to its Together We Can series: "Coping With a Suicide Loss" and "Talking to Children About a Suicide or Suicide Attempt of Someone They Know." In the wake of a suicide, family members, friends, caregivers and co-workers may process grief differently. Talking about what happened, expressing emotions, and seeking the support of a mental health professional are important to facilitate recovery.

- "[Coping With a Suicide Loss](#)" focuses on what Veterans, their families, and caregivers can do in the aftermath of a suicide death. For instance, bereaving Veterans, family members, and caregivers can contact a Suicide Prevention Coordinator at a local VA medical center, seek out a mental health provider or local support group. You may also want to consider participating in the VA Family Interview Program. VA's Family Interview Program seeks to better understand why Veterans die by suicide to inform suicide prevention efforts and enhance care for all Veterans. To participate more about VA's Family Interview Program and get more information, contact a Family Interview Coordinator at 585-393-7662.
- "[Talking to Children](#) Who Have Been Affected By Suicide or Attempted Suicide of Someone They Know" provides important information on how to talk to children of different ages about a suicide death or attempt. Children experience the same emotions as adults but may be unable to adequately process, verbalize or understand them. Talking to children and allowing them to ask questions and guide the conversation may help alleviate their concerns.

The "Together We Can: Suicide Prevention Information for Veterans, Their Families, and Caregivers" series is backed by scientific findings and explores some of the common suicide risk and protective factors that affect Veterans. The series offers resources and practical steps families and caregivers can take to Be There for a Veteran in their lives. View the "Together We Can" series at www.mentalhealth.va.gov/suicide_prevention/resources.asp. Check back every month for new additions to the series.

The health and well-being of our nation's Veterans and former service members is VA's highest priority. Guided by data and research, VA is working with partners, Veterans' family members and friends, and the community to ensure that Veterans and former service members get the right care whenever they need it. To learn about the resources available for Veterans and how you can Be There as a VA employee, family member, friend, community partner, or clinician, visit www.mentalhealth.va.gov/suicide_prevention/resources.asp. 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, 7 days a week, 365 days a year. Call 1-800-273-8255 and Press 1, text to 838255, or chat online at VeteransCrisisLine.net/Chat. [Source: VA Office of Mental Health & Suicide Prevention | January 7, 2020 ++]

Braille & Talking Book Program

Free for Vets with Visual Impairments

Whether escaping into a great novel or staying current with popular magazines, the freedom and independence of reading are only a few steps away. This program, from the National Library Service (NLS) and the Library of Congress, provides talking books, audio magazines, and digital talking-book players free of charge.

Any honorably discharged Veteran who is blind, has low vision, or a disability preventing the reading of traditional materials is eligible. Participants choose whether their selected reading materials are delivered by mail, downloaded from the web-based service BARD (Braille and Audio Reading Download) or through the BARD mobile app for smartphones and tablets. NLS maintains a vast catalog of titles and publications from the latest best-sellers to timeless classics. Plus, Veterans have preferential status in the lending of materials and equipment.

The Braille and Talking Books Program is accomplished through a nationwide network of libraries to serve citizens and Veterans living inside the U.S. or abroad. Applying for this service is easy. Call the National Library Service at 1-888-NLS-READ (1-888-657-7323) or visit them on the web at www.loc.gov/ThatAllMayRead. [Source: Vantage Point | Steven Clipp | June 3, 2019 ++]

WW2 Vets 215

Donald Lobaugh | Effort Allowed Platoon to Survive

A lot of men who earned the Medal of Honor did so knowing they were about to lose their lives, but they pressed on with what they were doing anyway. Army Pvt. Donald Lobaugh was one of them, giving his life for his comrades in the jungles of the South Pacific during World War II. Lobaugh was born on Feb. 7, 1925, in Freeport, Pennsylvania, and was a bit of a troublemaker growing up. According to reports, he was sent to a reform school at 16 after stealing a car. He fought the schooling tooth and nail, but with the help of the school's superintendent, he turned his life around. He tried to join the Navy shortly after the Pearl Harbor attack, but he was quickly discharged because, ironically, he lacked school credits. Two months later, in May 1942, he successfully joined the Army.

When Lobaugh was fully trained, he was sent to the Pacific. By July 1944, he found himself in the jungles of western New Guinea with the 127th Infantry Regiment, 32nd Infantry Division, trying to push out Japanese forces that had a grip on the island and were threatening to invade south toward Australia, an Allied partner. On July 21, 1944, Lobaugh's company was trying to pull out of an area called Afua when they were attacked. His platoon of about 40 men was cut off from the rest, so they were forced to regroup and defend their position throughout the night. By the next day, the enemy had begun to close in. Lobaugh's platoon was about ready to escape through the only route available when the Japanese pinned them, laying a machine gun and other weapons along the route to block them.

Lobaugh knew the key to the platoon's escape was knocking out that machine gun, so he volunteered to try to destroy it — despite knowing he would have to work his way through about 30 yards of open field totally exposed. The private crawled halfway across that open space, then stood up and threw a grenade when he got close enough. He was immediately wounded by enemy fire, but he kept going, firing his gun as he rushed forward. The Japanese were forced to focus all their fire on him. "Lobaugh was hit and wounded several times, but he kept on blasting at those Japanese," said 1st Lt. Leonard Lowry, who was with the platoon that day. "He made it so darned hot for them that they got the hell out."

"His action forced the other Japanese to withdraw the gun, and as they attempted this, the rest of our unit went ahead and broke through," explained Lobaugh's platoon leader, Army Lt. John Kerlizyn, in a newspaper interview. "At least 10 more enemy were killed and others wounded, and the platoon did not lose a man — except Lobaugh." "What guts

that kid had," Lowry said. Lobaugh died where he fell, but his heroism and selflessness inspired his fellow soldiers and earned the 19-year-old soldier the Medal of Honor. It was presented to his mother in Pittsburgh on May 9, 1945.



Lobaugh was initially buried overseas, but his body was repatriated and reinterred in 1949 at Rimersburg Cemetery in Pennsylvania. Over the many decades, his sacrifice has been remembered. A bridge across the Allegheny River near his hometown was named in his honor in 1965. In 2004, he was inducted into the Hall of Valor at the Soldiers and Sailors National Military Museum and Memorial in Pittsburgh. Lobaugh's Medal of Honor was donated by his family and is currently on display at the Freeport Library in his hometown. [Source: U.S. Dept. of Defense | Katie Lange | July 22, 2019 ++]

WWII Vets 216

Leonard Funk | Decorated Paratrooper

Army 1st Sgt. Leonard Funk served in some of the most pivotal campaigns in the European theater of World War II, making him one of the war's most decorated paratroopers. After jumping into Normandy on D-Day with the 82nd Airborne Division, he earned the Distinguished Service Cross during Operation Market Garden. His Medal of Honor was earned toward the end of the war when he led the capture of a German garrison during the Battle of the Bulge.



Funk was born Aug. 27, 1916, and grew up east of Pittsburgh. He enlisted in the Army as a 21-year-old in June 1941, months before the U.S. entered World War II. He volunteered to be a paratrooper and was assigned to Company C of the 82nd's 508th Parachute Infantry Regiment. Funk was stationed in England for much of the war, although he didn't see action until June 6, 1944 — D-Day, the largest land, air and sea invasion in history. On that day, the small unit he commanded landed nearly 40 miles inland. They fought for several days before breaking through enemy lines

to rejoin their regiments closer to the coast. Everyone in Funk's unit survived that mission, and he earned a Silver Star Medal. But that's a story for another time. Today we're focused on his heroics during the Battle of the Bulge.

On Jan. 29, 1945, Funk found himself in waist-deep snowdrifts with other American forces who had been fighting a massive contingent of German troops since mid-December. His unit had managed to advance 15 miles in a driving snowstorm so they could attack the German-held town of Holzheim, Belgium. When the company's executive officer went down, Funk stepped up to take his place. He realized they didn't have enough infantrymen to take out the German garrison, so he gathered a platoon full of clerks — soldiers with noncombat jobs — and turned them into a fighting force. Despite facing direct artillery shelling and gunfire, Funk's men moved in. They attacked and cleared 15 houses without suffering any injuries. With the help of another American unit, they quickly overran the town, taking about 80 German prisoners who were placed under a four-man guard. The rest of the dilapidated American forces, including Funk, scanned the town to mop up any isolated points of resistance.

A few hours later, an enemy patrol managed to trick the Americans acting as guards, freeing the German prisoners. They had begun to get into place to attack Company C from the rear when Funk returned to check on the prisoners. He walked right into the enemy patrol. A German officer, poking a pistol into Funk's stomach, ordered him to surrender. The first sergeant pretended to comply with the order, slowly unslinging his submachine gun from his shoulder. But instead of giving it up, he quickly fired, emptying a full magazine into the German officer and his counterparts, all the while shouting to his American comrades to seize the enemy's weapons. Within minutes, 21 Germans were killed, many more were wounded and the rest were captured.

Despite being outnumbered and facing certain death, Funk's actions were directly responsible for the recapture of a force that was much larger than his own. His actions also allowed the other units of Company C to continue their attack plans unfettered. Funk received the Medal of Honor for his actions on Sept. 5, 1945, at a ceremony at the White House. He's one of the most decorated paratroopers of World War II, having also earned the Bronze Star and Purple Heart with two oak leaf clusters.

Funk left the Army after the war and went on to work for the Veterans Administration in the Pittsburgh area. He and his wife, Gertrude, have two daughters. Funk retired from the VA in 1972 and lived in McKeesport, Pennsylvania, until his death on Nov. 20, 1992. The 76-year-old is buried at Arlington National Cemetery. His legacy lives on. In 1995, a section of road where he lived was renamed the Leonard A. Funk Jr. Highway. In May 2018, he was inducted into the 82nd Airborne Division's Hall of Fame. [Source: U.S. Dept. of Defense | Sgt. Leonard Funk | Katie Lange | January 6, 2020 ++]

Final Salute: The Last Mile

CVMA & VA Partnership to Honor Unclaimed Vets



It was a chance meeting between a Tampa VA Medical Center employee and a funeral director that led to a program that now honors deceased Veterans who have no one else to honor them as they transition to their final resting place. Final Salute: The Last Mile provides a motorcycle escort to the Florida National Cemetery for Veterans who pass at Tampa and Bay Pines VA Medical Centers and who have no family to claim their remains.

David Allen, a Tampa VA biomedical information systems specialist and member of the Combat Veterans Motorcycle Association, was looking for a little fresh air when he stepped out onto the hospital loading dock earlier this year. When he saw a hearse parked there with a flag-draped coffin clearly visible inside, his curiosity got the better of him. "I was thinking this has got to be somebody important, so instead of going where I was going to go, I climbed down and went to talk to who I thought was the driver." That person turned out to be the owner of Veterans Funeral Care. "We got to talking and he said, No, this is an unclaimed Vet, and that struck a chord with me. He explained that the Veteran had passed away and either had no family who would claim him or no family to claim him."

Allen found out that Veterans pass away without family to claim them several times a year at both Tampa and Bay Pines VA. When that happens, the hospital contracts Veterans Funeral Care to transport the Veteran's remains to Florida National Cemetery in Bushnell, Florida, more than 45 miles away, for a direct internment with no military honors. Those honors normally have to be requested by the family. Allen, an Army Desert Shield/Desert Storm Veteran, has ridden with the Combat Veterans Motorcycle Association (CVMA) for several years. He felt they could do something to honor these Veterans. So he spoke with the association's executive board and the funeral home officials. "We were fortunate enough to be able to sit down with both directors, and they absolutely loved the idea," Allen said. "It was, why didn't we know this was happening? It really boils down to nobody knew."

Official policies are now in place at both Tampa and Bay Pines VA recognizing Final Salute: The Last Mile as an official partnership between the hospitals and the CVMA. The first escort at Tampa took place in February 2019, and there have been eight more escort missions at Tampa and four at Bay Pines since then. Now, whenever a Veteran passes away at the hospital with no family to claim the remains, either Allen or the Veteran Experience officer is notified. Allen starts the coordination process with his fellow CVMA members, decedent affairs and the funeral home. The funeral home now requests military honors for each Veteran as well.

The program has been such a success that Allen recently received a challenge coin from Dr. Richard A. Stone, VHA's executive in charge, thanking him for creating the program. While both Tampa and Bay Pines VA signed on for The Final Salute: The Last Mile, Allen is now working with the Miami VA Medical Center to implement a similar program. There has been talk of possibly rolling it out nationally as well. "I would love to hear that there would never be a Veteran who passed away at a VA where they did not get an escort, that didn't have somebody to go and take them and be with them in that final moment," Allen said. "Even if there's not a CVMA, there's a VFW Riders or American Legion Riders."

The mission doesn't end at the cemetery for the CVMA, either. The organization adds the name of each Veteran escorted to their rolls and toasts them at each membership meeting. For Allen, the emotions involved in escorting these Veterans is worth the effort. "There's a sense of pride from saying, Hey, we stepped up and claimed this guy, we claimed him as a brother," Allen said. "We did the right thing so that he didn't go alone. [Source: Vantage Point | Ed Drohan | December 18, 2019 ++]

SNAP

Update 09: Proposed Food Stamp Changes Did Not Take Vets into Account

Proposed changes to the federal food stamp program could harm veterans, and the federal government didn't take them into account when it came up with the changes, officials told Congress 9 JAN. In a House Veterans Affairs Committee

hearing, members heard from the U.S. Department of Agriculture, Department of Veterans Affairs and nonprofits that help address veteran food insecurity. One of those nonprofits was Mazon: A Jewish Response to Hunger. Josh Protas, vice president of public policy for Mazon, told Congress the story of Tim Keefe.

Keefe, a Navy veteran living in Maine, was injured at work, but even after going through the worker's compensation process, Keefe was unable to return to work and "fell on hard times," Protas said. He was denied food stamps because of recent policy changes in Maine, leaving him scrambling for more help and repeatedly asking, "What do I eat between now and then?" No one had answers for Keefe, Protas said, and he eventually became homeless. He endured harsh weather in rural Maine, lived in a tent until he was forced to move "again and again." "He resorted to scrounging for food and even catching squirrels to get by," Protas said. "There were many times, more than I'd like to try and count, when I would go two or even three days without food," Keefe previously told the Maine state legislature. "I had to add seven holes to the only belt I've owned for this year to keep my pants on."

Keefe eventually got help through emergency housing and a food bank, but those resources still are limited, leaving him with two meals a day for 10 days and one meal a day for the remainder of the month. His meals are mostly made up of rice and beans or canned vegetables. When he turned 50, he was again eligible for food stamps and "is in a much better place now," Protas said. But he's still advocating to help other veterans like him forced to go hungry.

USDA Administrator Pam Miller says 1.3 million veterans reported receiving food stamps at some point in 2017 - the most recently available data -- and about 7 percent of all living veterans received food stamps that year. Veterans make up about 3 percent of SNAP program participants. About 36 million Americans receive food stamps each month, Miller said. Food insecurity is particularly common among veterans also dealing with homelessness, and veterans of Iraq and Afghanistan "disproportionately report experiencing food insecurity," according to Thomas O'Toole, senior medical advisor of the Providence VA Medical Center. Veterans of the wars in those countries are nearly twice as likely to be food insecure than the general population.

Unemployment among post-9/11 veterans is 3.8 percent, but about 27 percent of them report food insecurity. Studies show of the veterans eligible, about one in three use food stamps. Households with a disabled veteran are nearly twice as likely to be food insecure as households without someone with a disability, Congress members said. 'No one steps up to serve' more than Native Americans, yet they are poorest, least insured vets Proposed changes to the food stamp program include narrowing who could be eligible, based on income and assets such as savings, which members of Congress have said could make it more difficult for veterans to qualify for the assistance. The proposed change could mean as many as 3.1 million people -- including veterans -- would lose access to food stamps and more than 500,000 children could lose access to free school meals.

But veteran status is not a condition of food stamp eligibility, and few use it, compared to other Americans, Miller told Congress, so USDA does not have good data on veterans and food stamp use and the agency did not consider the potential effects on veterans specifically. "So veterans have no significance or additional importance to you, given their service to the nation?" Rep. Mike Levin (D-CA) asked USDA. "You never contacted VA?" Miller said USDA did not contact VA about how the proposed changes could affect veterans, and that the food stamp program serves all low-income Americans, without special consideration for veterans, though she said USDA and VA have worked together on veteran hunger previously.

"Food security for veterans, as well as all Americans, is an essential component for a stable life," Rep. Gus Bilirakis, (R-FL) said. "We know food insecurity is detrimental to mental health. With such low unemployment, we need to find out why so many SNAP participants living on these benefits are not working and ways Congress can help lift these people out of poverty and help them prosper. No veteran should go hungry." Bilirakis and Levin agreed that they wanted to work together to allow USDA to track veterans who use food stamps to better understand the need. "We should all be humiliated that we are talking about taking food away from anyone ... who wore the uniform of this country," Rep. Kathleen Rice (D-NY) said.

Not having enough food to eat is "too real" for many Americans and veterans, O'Toole said, leading to "a litany" of physical and mental health conditions, "not the least of which" are depression and suicide. Both food and housing insecurity are "strong indicators: of veteran suicide risk, he said. O'Toole said VA is focused on outreach to hungry veterans, with food pantries at VA facilities, including mobile units, and helping veterans sign up for food stamps. Vice Hall, CEO of Feeding San Diego, told the story of a deployed sailor's wife and her four children, who line up regularly with other service members, veterans and their families, at his organization's food banks. "We see too many kids standing in food lines while their parents are serving on the front lines," he said. [Source: ConnectingVets.com | Abbie Bennett | January 9, 2020 ++]

Military Retirees & Veterans Events Schedule

As of 14 JAN 2020

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/veterans 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 | January 14, 2020 ++]

Vet Hiring Fairs

Scheduled As of 15 JAN 2020



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 | January 15, 2020 ++]

State Veteran's Benefits

South Carolina 2020

The state of South Carolina provides several benefits to veterans. To obtain information on these refer to the attachment to this Bulletin titled, “**Vet State Benefits– SC**” for an overview of the ones listed below. Benefits are available to veterans who are residents of the state. For a more detailed explanation of each of the below refer to <http://va.sc.gov>.

- Veteran Housing Programs
- Financial Assistance
- Employment
- Education
- Recreation
- Other

[Source: <http://www.military.com/benefits/content/veteran-state-benefits/south-carolina-state-veterans-benefits.html> | January 2020 ++]

*** 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.

VAMC Clarksburg WV

Update 05: S.3147 | Improving Safety & Security for Veterans Act of 2019

U.S. Senators Joe Manchin (D-WV) and Shelley Moore Capito's (R-WV) legislation, The **Improving Safety and Security for Veterans Act of 2019**, passed the Senate right before Christmas. This bipartisan legislation would require the U.S. Department of Veterans Affairs (VA) to submit detailed reports on patient safety and quality of care at VA Medical Centers in light of the recent deaths of Veterans at the Clarksburg VA Medical Center. The legislation ensures that Congress, Veterans, and their families are fully informed on the policies and procedures in place across the VA nationally. Additionally, this bill requires the VA, once the criminal investigations are completed, to submit a detailed report and timeline of events surrounding the deaths at the Clarksburg VA.

The bill has been referred to the House Committee on Veterans Affairs. Upon passing the Senate Senator Manchin said, "I'm proud that my Senate colleagues joined Senator Capito and I in voting to pass this important legislation. This bipartisan bill that will increase transparency at the VA and set the groundwork for greater accountability. Due to the lack of information being made available to the public, Veterans across our state are having a crisis of confidence in the safety, security, and quality of their VA healthcare. This legislation will help our Veterans and their families gain insight into the policies and procedures that could have led to these homicides. Ultimately our goal is to help restore public confidence in the VA across West Virginia and the nation. 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. I want to make sure this never happens to another Veteran at any VA facility ever again."

Senator Capito said, "Our veterans should always feel safe and cared for at our VA hospitals. No questions asked. It's for this reason that I've stayed on top of this issue since day one when the news first broke. Since that day, I have remained in close contact with those involved in this investigation, such as VA Secretary Wilkie, U.S. Attorney Bill Powell, Clarksburg VA Director Glenn Snider, and VA Inspector General Michael Missal, as well as checking in with staff on the progress of the investigation. It's important that we get more information for the families, the veterans, and the community. We need to discuss how these tragedies happened and how to prevent similar occurrences in West Virginia and VA hospitals nationwide. Passage of this legislation is welcome news, as it will help us find answers to these questions and help make sure that tragedies like this never happen again."

Responding to the senators' announcement, the Louis A. Johnson VA Medical Center in Clarksburg issued a statement noting that all ongoing investigation into the deaths at the center are being handled by the VA department's Office of the Inspector General. "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 ... 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." [Source: <https://www.wvnews.com/news> | January 6, 2020 ++]

VA Medical Facilities

Update 03: S.3089 | BUILD for Veterans Act

A bipartisan pair of senators is looking to make it easier for the Veterans Affairs Department to lease new medical facilities, introducing a bill the lawmakers say would cut red tape in the process. The **Build, Utilize, Invest, Lease**

and Deliver (BUILD) for Veterans Act (S. 3089) would also require VA to place at least one employee at each medical center whose sole job would surround overseeing construction and leasing projects in the area. While VA has long enjoyed growing budgets and authorizations for new facilities, it has consistently faced backlash for cost overruns and delays as it attempts to build or lease them. The department opened a highly touted new medical center in Colorado in 2018, for example, five years late and \$1 billion over budget.

“Too often, veterans—and the dedicated VA employees and medical providers who serve them—find VA facilities outdated or cramped for space,” said Sen. Jon Tester (D-MT) who serves as the top Democrat on the Senate Veterans’ Affairs Committee and introduced the measure. “And unfortunately, the process for updating or replacing that space is inundated with red tape.” The measure would make it easier for VA to move forward with leases on major medical centers by eliminating the requirement they must first be authorized in law. Instead, the House and Senate VA committees would need only to pass a resolution approving the lease. It also would expand “enhanced-use” leases, which allow the department to rent out underutilized property to the private sector. To date, the department has used that capacity primarily to provide housing for homeless veterans, but the BUILD for Veterans Act would broaden that to include community resource centers, non-profit service providers and other centers to assist veterans.

“Gridlock in Congress has too often delayed the VA from securing the facilities it needs to provide critical services to our veterans,” said Sen. Josh Hawley (R-MO) who co-sponsored the bill, adding it would streamline leasing approval so veterans “can get the care they need, when they need it.”

The expansion of VA facilities has been a sticking point in Congress—particularly among Democrats—since the passage of a 2014 law that gave veterans access to private sector health care on the government’s dime. President Trump signed a law in 2018 to expand that access, causing many lawmakers and some stakeholders to express concern the reforms would steal resources from VA’s own facilities. The 2018 law also required VA to assess underutilized facilities it could sell off.

Pat Murray, deputy director of the Veterans of Foreign Wars’ National Legislative Service, praised the bill, saying it would provide additional resources for veterans. “VA’s infrastructure backlog and unused building lists keep growing by the day,” Murray said. Sens. Tester and Hawley’s BUILD for Veterans Act would begin to eliminate these expanding lists and make real changes that would benefit veterans and VA.” The measure would also require VA to solicit input from veterans on the need for new infrastructure. It would call on the department to assess all of its facilities for climate change resilience, as well as their physical capacities to house systems related to forthcoming electronic health records. [Source: www.govexec.com | Eric Katz | January 9, 2020 ++]

SSA COLA

Update 06: H.R.860 | Social Security 2100 Act

Senator Mitt Romney (R-UT) recently led a bipartisan Senate group in introducing on 29 OCT 2019 the Time to Rescue United States’ Trusts (TRUST) Act S. 2733 aimed at fixing Social Security and Medicare’s funding shortfalls. If nothing changes, the programs’ trust funds are expected to become insolvent in 15 years. If that should occur, benefits would be reduced by about 22 percent in order to match the amount of payroll taxes coming in.

Romney’s bill would not tackle changes to the programs directly but would require Congress to set up “rescue” committees. The committees would be tasked with evaluating proposals and writing legislation to extend the solvency of the Trust Funds— which include the Social Security retirement, survivors, and disability trust funds and Medicare hospital insurance. At least two members of each party would be required to work on the legislation, and any qualifying bills that are written, would get expedited consideration in both the House and the Senate.

While TSCL strongly agrees that the time has come for Congress to take action on Social Security and Medicare, we question whether rescue committees would work as desired. Over the past 25 years there have been numerous

committees and commissions that developed (often) contentious plans to change Social Security and Medicare. None have been successful in getting their plans adopted as major legislation. Rescue committees may not even be needed for Social Security. The House is working on The Social Security 2100 Act (H.R. 860) introduced by Representative John Larson (CT-1), and has the support of 208 co-sponsors. The bill would provide;

- A modest boost in benefits,
- A more generous cost-of-living adjustment (COLA) by calculating the annual boost using the Consumer Price Index for the Elderly (CPI-E),
- And would reduce the tax on Social Security benefits for older taxpayers with incomes below \$50,000, (single filers) and \$100,000 (filing jointly).

To do this, Larson’s bill would increase the payroll tax rate gradually over 24 years through annual 0.1% increases, and it would also apply payroll taxes to all earnings instead of just the first \$137,700. [Source: The Senior Citizen League | Shannon Benton | January 2, 2020 ++]

*** Military ***



Military Scams

Survey Reveals which Members are Scammed Most

Bank and lender scams bilk troops and veterans out of the most money -- an estimated \$112 million since 2012 -- but job scams and identity theft are the most commonly reported, according to a new survey. Compiled by technology consumer review website Comparitech, the report also found that a little over half of the 1 million service members, veterans and military family members who have been scammed in the last seven years were affiliated with the Army. Researchers used media reports and data from the Better Business Bureau and the Federal Trade Commission to break down who in the military was getting scammed -- to the tune of a combined \$405 million during the survey period -- and what the most common scams were.

Last year saw the highest number of reported scams: 389,308 in total. Nearly 70% of those reports were related to phony recruiting websites directing prospective enlistees to for-profit schools instead of the military. A \$92 million scandal involving the lending company Rome Finance, which affected 17,000 service members, contributed to 2014 becoming the most expensive scam year, and put bank and lender scams at the top of the list in terms of cost to troops and veterans. The second most expensive scam category is impersonation, as when fraudsters pretend to be a romantic partner or an official from the Defense Department. The DoD warned about this type of scam earlier this month, reminding Tricare beneficiaries that the military insurance branch will not ask for their birth date, Social Security number or banking information.

The most reported scams are employment and identity theft, researchers found. At 275,114 cases since 2012, employment scams target new veterans seeking a job after leaving the service. Perpetrators often ask them to buy

equipment for an alleged new job that never gets reimbursed. The number and cost of scams perpetrated since 2012 corresponded to the size of each service:

- Army: 566,738 victims, \$142,442,380 lost
- Navy: 143,718 victims, \$62,542,897 lost
- Air Force: 110,448 victims, \$44,257,654 lost
- Marine Corps: 57,204 victims, \$24,976,528 lost
- Coast Guard: 10,817 victims, \$4,772,422 lost

In cases where the data was incomplete, researchers excluded that data when creating charts breaking down the number of military members affected by status and the state where the scam occurred. Overall totals were calculated using data that listed the service with which the victim was affiliated, meaning these numbers are higher than the sum of the figures broken down by status: family member, veteran, active-duty or Guard and Reserve. Despite some missing specifics, the report found that veterans were targeted more often than active-duty service members: 428,000 versus 153,000 victims. Veterans were had more than 55% of the total amount lost. Meanwhile, when reported in the data, researchers also found spouses were four times more likely to be fleeced than a “dependent child/other,” losing \$30,342,720 compared to \$6,759,379.

The DoD recommends victims of fraud or identity theft contact their respective financial institution and the FTC online or via 1-877-FTC-HELP. Tricare and Defense Health Agency fraud and abuse can be reported directly by filling out this form. [Source: Military.com | Dorothy Mills-Gregg | December 27, 2019 ++]

Military Scams

Update 01: Service members & Vets lost \$405M to Scammers Since 2012

In the past eight years military service members, their families and veterans lost more than \$405 million to scammers. Comparitech, a consumer-information organization, analyzed years of information from the Better Business Bureau and the Federal Trade Commission’s Consumer Sentinel Network Data Book to find out how service members and veterans are losing money to criminals. The study found nearly a million veterans and service members lost money to scammers since 2012. Veterans made up the largest chunk of that population, making up about 60% of the victims, and 55% of the total money lost. About 428,000 veterans were taken for \$218.4 million. About 152,600 active-duty military were affected by scammers since 2012, making up more than \$124 million in losses.

The worst year for scams perpetrated against service members and veterans ended up being 2018. In that year nearly 400,000 people were affected and lost almost \$90 million. “About 275,000 of these reports stemmed from several phony websites that were set up to ‘help’ kids who wanted to get into the military,” the authors of the report wrote. “Instead of providing unbiased information, these sites profited from recommendations to for-profit schools that then targeted them to try and get them to enroll.” The year with the biggest losses for service members and veterans was 2014, when they lost about \$125 million. Comparitech attributes that to the Rome Finance scam, which cost troops and veterans \$92 million.

“Rome Finance’s business model was built on fleecing service members,” said Richard Cordray in 2014, who was then the director of the Consumer Financial Protection Bureau. “Rome Finance lured service members in with the promise of instant financing on expensive electronics, then masked the finance charges with inflated prices in marketing materials and later withheld key information on monthly bills.” The CFPB eventually obtained \$92 million in debt relief from Rome Finance for the aggrieved service members. The report serves as a warning to service members and veterans about how vulnerable their assets can be to scams. The Defense Department is well aware of the issue. Last July, it sent out a warning to service members about social media scams. The warning named romance scams, sextortion and impersonation as top ways service members can be duped by scammers online.

Employment scams hit veterans especially hard. “Scammers will contact veterans looking for jobs to offer them employment, often in a work-from-home environment. Scammers cite the victim’s military career as one of the reasons they were selected,” the report states. “They may even conduct interviews over Skype or Google Hangouts. The scammers often claim to have seen their resume on a legitimate job site like Indeed or ZipRecruiter.” Scammers then ask for money for equipment and steal personal information. DoD recommends limiting the amount of personal information on social media, searching yourself online to see if anyone is using your identity, and looking closely at messages or requests on social media to avoid being scammed. [Source: Federal News Network | Scott Maucione | January 2, 2020 ++]

USS Harry S. Truman (CVN-75)

Update 02: Pentagon Memo Reveals 2nd Decommission Attempt



Despite causing a political firestorm earlier this year and forcing President Donald Trump to publicly reverse his administration’s position on the matter, the U.S. military again tried to push a plan that would lead to the aircraft carrier Harry S. Truman retiring 25 years early and would defund a carrier air wing, according to a White House memo obtained by Defense News. The plan, which was killed sometime in November during a back-and-forth between the Pentagon and the White House’s Office of Management and Budget, was recycled from the 2020 budget submission. At the time, the move was framed as a way to pay for investments in unmanned technologies and long-range hypersonic missiles.

The now-reversed decision to defund the Truman’s refueling lends further insight into the pressures the Navy faces in this budget cycle. The Truman plan was just one of a series of drastic cuts to both shipbuilding and current force structure outlined in the Dec. 16 memo. In total, proposed cuts would shrink the fleet from the current 293 ships to 287, backing away from earlier plans to grow the fleet to 355 ships. The plan from the 2020 budget cycle, and advanced again during negotiations for 2021, was to cancel the Truman’s midlife refueling and complex overhaul. Each carrier at around its 25-year mark is sent into dry dock and given enough nuclear fuel to operate its reactor for another 25 years. By not refueling Truman, it would mean the Navy would have to decommission it with half its 50-year hull life remaining.

The proposal in the 2020 budget, which was shot down in a wave of bipartisan blowback, was expected to save the Navy \$4 billion. In a note to the Department of Defense, OMB directed the Navy to submit a carrier refueling plan with Truman’s refueling restored. “The Navy’s [budget submission] does not refuel the USS Harry S. Truman (CVN-75) or maintain its associated air wing,” the Office of Management and Budget memo read. “DOD should provide to OMB no later than Wednesday, November 27, 2019, the latest carrier refueling plan for the next 30 years that includes the USS Harry S. Truman.” A follow-up message from the DoD said the Navy restored funding for the carrier and associated air wing. “With respect to the TRUMAN, the Navy provided the carrier refueling plan on time,” the DoD

responded in the memo. “A recent DoD Program Budget Decision directs Navy to restore the funding for USS Harry S Truman (CVN 75), the refueling of the carrier, and restoring the associated carrier air wing.”

OMB responded that it agreed restoring the carrier was the right move. “OMB concurs with the recent Program Budget Decision (PBD) that directs the Navy to restore the funding for USS Harry S Truman (CVN 75), the refueling of the carrier, and restoring the associated carrier air wing,” the memo read. In a statement, Navy spokesman Lt. Timothy Pietrack said the Navy would not comment on pending budget decisions, calling the budget request “pre-decisional.” “We will not comment on future shipbuilding or maintenance decisions until the budget request is submitted to Congress next year,” Pietrack said.

When the Navy tried to float a plan to cancel Truman’s refueling earlier this year, it was met by overwhelming skepticism on Capitol Hill. Even staunch allies of the president on Capitol Hill refused to line up behind it. Senate Armed Services Committee Chairman Jim Inhofe (R-OK) said he was “disturbed” by the plan. Sen. Tim Kaine (D-VA) said it was “mind-boggling.” The chairman of the House Seapower and Project Forces Subcommittee, Rep. Joe Courtney (D-CT) told Defense News that there was “zero chance” his panel would take up the proposal. It was clear within days that the proposal was going nowhere, prompting a tweet from Trump that essentially reversed his own policy. *“I am overriding the Decommission Order of the magnificent aircraft carrier Harry S. Truman, built in 1998 (fairly new), and considered one of the largest and finest in the world,”* Trump wrote on Twitter. “It will be updated at a fraction of the cost of a new one (which also are being built)!”

The reversal and subsequent victory lap by Trump were immediately followed by the resignation of the director of the Cost Assessment and Program Evaluation office, which was instrumental in pushing the idea on the Navy. Inhofe told Defense News at the time that the White House had clearly seen the writing on the wall. “I think they looked at the reaction that they got and how stupid it was to take something out of commission that has half of its life left,” Inhofe said. “It falls into the category of: It’s the right thing to do.” [Source: DefenseNews | David B. Larter | December 31, 2019 ++]

USMC Gender Integration Coming to CA & SC Recruit Depots



Staff Sgt. Hollie Mulvihill, 26, a Parris Island drill instructor, barks disciplinary consequences at recruit Melissa Rodriguez Flores, 18.

Gender integration is now coming to both Marine Corps Recruit Depot Parris Island, South Carolina, and the training depot in San Diego. And though the Corps will still be allowed to have separate-gender squad bays — where recruits sleep and shower — with the passage of the 2020 National Defense Authorization Act the rest of training must be fully integrated down to the platoon level, according to lawmakers. Maj. Joshua Benson, a Marine Corps spokesman, told

Marine Corps Times in an email Dec. 20, 2019, that, "Once (the law) is signed, we will immediately begin preparing to meet the requirements laid out in the NDAA."

Parris Island, South Carolina, will have five years to comply with the new law, while the depot in San Diego — which has not trained female Marines — will have eight years before it is required to take female recruits. The Marine Corps said it could not provide any more details on how it plans to comply. Rep. Jackie Speier (D-CA) attached a provision to the newest National Defense Authorization Act, signed by President Donald Trump on Dec. 20, 2019, that requires gender-integration at both recruit depots. The Marine Corps is the only U.S. military service branch that does not have coed boot camp. In 2019, however, Parris Island — which is home to the 4th Recruit Training Battalion, the only recruit battalion dedicated to training female Marines — saw at least three gender-integrated recruit companies.

Those companies were comprised of five all-male platoons and one all-female platoon. Since most of recruit training is done at the platoon level, those recruits would still spend most of their time at training segregated by gender. But, for morning physical training, obstacle course attempts or entire company classroom study, men and women would be training side-by-side. "That's not actually gender integration," a member of Speier's staff told Marine Corps Times, adding that the new law will require the Marine Corps to go even further when it comes to gender integration.

On Dec. 3, 2019, before the law was passed, Speier and another California Democrat lawmaker, Rep. Julia Brownley, sent a letter to Marine Corps recruit training leadership asking ten questions concerning the rights of recruits, what really goes on in recruit depot squad bays and what are the Corps' perceived barriers to gender integration at boot camp. Though the law does not require the Marine Corps to integrate squad bays, the lawmakers did ask why the use of squad bays posed a barrier to gender integration. "What activities currently occur in squad bays (please be as inclusive as possible)?" they asked. Staff members from Speier's office said the question came from talks with the Marine Corps where they were told about the lengths the Corps went to ensure that female drill instructors and officers could walk onto male squad bays at any time without an issue. The staffers said they were never given a satisfying answer about what had to change to allow female Marines to come into all-male squad bays and what actually goes on behind the closed doors of the squad bay.

The lawmakers also zeroed in on a study recently commissioned by the Marine Corps on the cost of gender integration at boot camp, questioning several assumptions made in the study, including the assumption that integration would not happen at the platoon level (as the 2020 NDAA now requires) and an assumption that the Marine Corps will not increase the number of women going to recruit training annually. The lawmakers also expressed concern that the study was tasked to investigate what the "legacy costs" would be to the Marine Corps if women and men trained together at boot camp. "Why would the study not evaluate the potential benefits of integration to the USMC's service legacy?" the letter asked. The lawmakers gave the Marine Corps a Dec. 11, 2019, deadline to answer their questions, but as of 20 DEC were still waiting for a response from the Corps. The Marine Corps Office of Legislative Affairs expected to "have it completed in the next two weeks," Marine Corps spokesman 1st Lt. Sam Stephenson told Marine Corps Times in a 20 DEC email.

The letter was sent to Marine Maj. Gen. William F. Mullen, commander of the Corps' training and education command. The letter acknowledges Marine Corps efforts to reduce hazing incidents at recruit training since the 2016 death of Raheel Siddiqui at Parris Island, South Carolina, but brought up issues the lawmakers still found troubling. "These concerns stem from the significant power disparity between DIs and recruits and the imperative of ensuring recruits know their rights," the letter says. "If recruits do not know their rights, or where lines should be drawn, abuse by DIs or denial of services, such as health care, becomes easier."

An investigation into his 2016 death found that Siddiqui died after he threw himself from the barracks stairwell, falling 40 feet. Immediately prior to his jump, he had tried to tell his drill instructors he had a sore throat and needed medical attention, the investigation found. His drill instructor, Gunnery Sgt. Joseph Felix, who was convicted in 2017 of abusing recruits, was found to have screamed Siddiqui for failing to give the proper greeting of the day, forcing the recruit to from one end of the squad bay to the other. At some point Siddiqui passed out and was then slapped by Felix,

who claimed he was trying to revive him. Siddiqui then got up and ran away from the drill instructor, jumping to his death, the investigation found.

The Corps was also asked what recruits are taught about their medical and personal rights at boot camp and how drill instructors ensure recruits can take advantage of those rights without fear of being “ostracized.” In addition the Corps was pressed for hard data on drill instructor misconduct in the past two years, asking what percentage of misconduct reports come from recruits, what percentage come from other drill instructors and how often drill instructors are punished for misconduct. [Source: MarineCorpsTimes | Philip Athey | December 30, 2019 ++]

USS Carl Vinson

Update 01: CVN-70 Will Return to San Diego this Summer

The aircraft carrier Carl Vinson will switch its home port back to San Diego this summer after more than a year and a half undergoing maintenance in Bremerton, Washington, a Navy spokesperson said 8 JAN. The move was first announced by Rep. Scott Peters (D-San Diego) on Twitter. About 3,000 sailors are attached to the Vinson. “Exciting news — beginning Aug. 1, the USS CARL VINSON will be changing its home port to San Diego!” the congressman wrote on Twitter. “Thrilled to welcome CVN 70 and all her sailors and their families back to our city!” Vinson’s previous home port was San Diego. It left in January 2019 to undergo scheduled maintenance in Bremerton. The move will bring the number of aircraft carriers in San Diego to three. Vinson joins the Theodore Roosevelt and the Abraham Lincoln, which will arrive in San Diego later in January. [Source: The San Diego Tribune | Andrew Dyer | January 8, 2020 ++]

Military Household Goods

Update 02: Damages, Losses and Late Arrivals Plague Shipments



Nearly half of military household goods shipments arrive late and one in five are damaged in transit or lost, an audit by the Defense Department Inspector General has found. Some Defense Department personnel, meanwhile, may be venting their frustration with what they say are poor moving services by filing wildly inflated damage estimates, the audit suggested. One person filed a claim of \$1 million for a busted trash can and another tried to claim \$1 trillion for unspecified damages, the IG report said. Both claims were denied. The IG has made numerous recommendations on how the military can improve moving services, which have vexed service members for years.

The IG reviewed 9,852 shipments handled by four joint shipping offices in 2018 to determine the extent of problems with household goods shipments and whether proper actions were taken when goods were damaged, lost or arrived late during a move. More than 4,000 of those shipments, or 41%, didn’t arrive by the agreed-upon delivery date, the audit found. The delays were caused by problems with scheduling and equipment at the moving companies, the IG said. Those late deliveries alone cost the military \$33.1 million, the IG said.

“Additionally, moving companies did not provide an explanation for delivering some of the shipments after the delivery date,” the IG said. That meant DOD personnel and their families had the hassle of filing claims for lodging, food, rental and other costs, the IG reported. At least one claim was filed in 21% of all domestic household goods shipments, the IG said. A review of 311 of those shipments found that the moving companies resolved 94 % of the claims for around \$8.4 million. Forty claims remained unresolved because they weren’t filed through the proper channels, the IG said.

The Defense Department is the largest customer in the personal property shipping industry, representing about 15% of all domestic and international moves, the IG said. U.S. Transportation Command is in charge of administering the military’s household moves. The IG suggested issuing warnings or letters of suspension to moving companies within 14 days of a missed delivery date. Warning letters would impact moving company ratings, which determine what future shipments will be offered, it said. The IG also urged TRANSCOM to contact personnel who failed to complete a customer satisfaction survey within one month of receiving their shipment of household goods, and help members file inconvenience claims with moving companies within 14 days of a missed delivery date. In addition, TRANSCOM should review all household goods claims that are more than 60 days old and contact claimants to review shipment status, the IG recommended.

The audit was prompted by an online petition, which had been signed by 107,000 people as of October, calling for moving companies to be held accountable for losses and damages incurred during the military move process, the report said. [Source: Stars & Stripes | John Vandiver | January 9, 2020 ++]

Military Proposed Weaponry

Update 05: Ekranoplane



Unlike a couple of the other crazy superweapons of the Cold War that made this list, the Ekranoplane was actually built by the Soviet Union. Faster than any ship and bigger than any plane, the Flying Boat could carry anything from troops to cargo to nuclear weapons, all at a crazy speed. And just 13 feet off the ground. Its engines were some of the most advanced of the time, each producing thrust equal to the F-35’s engines. It could carry some two million pounds, flying low over water to evade detection, moving small, portable D-Day invasions across the globe. Luckily only one was ever built, and the Soviets lost the Cold War anyway. [Source: We Are the Mighty | Blake Stilwell | October 3, 2019 ++]

Navy Uniform Changes

Update 07: New SWO Leather Jacket

The Navy's surface warfare officers will soon be able to add a service-approved leather jacket to their sea bag. It'll be similar to the aviator bomber and is intended to build pride and symbolize the community's tactical experience, according to an administrative message issued 9 JAN. "The Surface Warfare community has a long-standing history of excellence, and a uniquely identifiable item is one way to signify the outstanding achievement and professionalism of our Surface Warfare Officers," Vice Adm. Richard Brown, commander of Naval Surface Forces, said in a statement. "Those who wear the jacket will be easily identified as a part of a long lineage of professional ship drivers and maritime warfighters."

The fully-lined black leather jacket is expected to be available in June. It will feature a center zipper and knitted cuffs and waistband. While the jacket is meant for wear at sea, it also can be paired ashore with a service uniform. Officers who earn their surface warfare qualification will be authorized to take the jacket with them if they transfer, according to the message. Lt. Cmdr. Adam Cole, a spokesperson for Navy Personnel Command, said the announcement affects 6,447 active duty personnel, plus 1,565 reservists and 356 full-time support sailors. Thursday's uniform update aimed at SWOs follows an announcement in early December that showed the sea service was moving to add flexibility and choices to cold weather apparel. [Source: NavyTimes | Courtney Mabeus | January 10, 2020 ++]

Navy Terminology, Jargon & Slang

'Fish' thru 'FOD'

Fish – (1) Torpedo. (2) The expendable portion of the XBT (q.v.), a streamlined weight and sensor fitted with a wire dispenser. (3) The sound-generating towed body of a NIXIE (q.v.) installation.

Fisheyes – Tapioca pudding.

Fish Head - (RN) WAFU term for the rest of the RN surface crowd.

Fist – (RN) To make a 'good' fist of something is to do it well. To make a 'real' fist of something is to do it badly.

Five S's – The tradition steps to prepare for a formation or liberty: Shit, Shower, Shave, and Shine Shoes.

Flag – An admiral, aka "Flag Officer" because such officers are entitled to fly a flag denoting their rank.

Flaming Datum - A burning ship, or a missile breaking water. See also DATUM.

Flashing – A navigational light (whether buoy or lighthouse) which is off longer than it is on. See also OCCULTING.

Flat Top – Aircraft carrier.

Fleet Up – To promote from within.

Flemish – To coil a line on deck so that it can run freely while maintaining a seamanlike appearance. Generally used for lines of small diameter. The line is laid in a flat, close-coiled spiral on the deck.

Flinders Bar – Bar with spherical correcting magnets. Found on a binnacle.

Float Test - Testing the buoyant qualities of unwanted material while at sea. Whether it passes the test or not, it is outta here.

Floor – In naval architecture, a horizontal structural surface which does not extend the full length of the ship. Think of it as a deck which does not run the full length of the ship.

Flotsam – Floating wreckage released from a sunken ship. See also JETSAM.

Flying Bravo – When a woman is menstruating, she is said to be ‘flying Bravo.’ The Bravo alphabet flag is all red.

FM – See PFM.

FNG – Various, Fucking New Guy, Fucking No Good, Fucking National Guard.

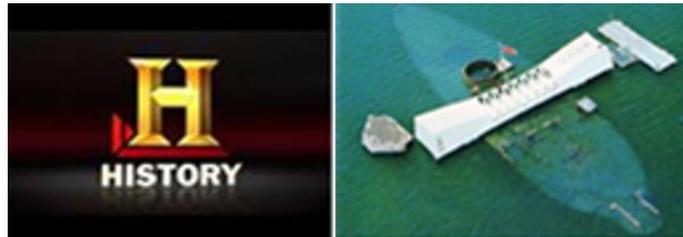
Foc’sle – The phonetic spelling for ‘forecastle’, the forward-most part of the ship.

FOD - Foreign Object Damage. Can be used as a noun ("Look at the piece of FOD I picked up.") or a verb ("Dave ded his engine last night.") Any object, including people, which might be sucked into, and thereby damage, a jet engine.

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> | January 15, 2020 ++]

*** Military History ***



Benedict Arnold Court Martial

Embitterment over Reprimand Led to Further Misdeeds

The court-martial of Benedict Arnold convened on 1 June 1779 in Philadelphia, Pennsylvania. After a relatively clean record in the early days of the American Revolution, Arnold was charged with 13 counts of misbehavior, including misusing government wagons and illegally buying and selling goods. Although his notorious betrayal was still many months away, Arnold’s resentment over this order and the perceived mistreatment by the American Army would fuel his traitorous decision. Abruptly interrupted at its outset by a British attack north of New York City, the court-martial did not get underway again until 23 DEC in Morristown, New Jersey. Although Arnold was cleared of most charges, General George Washington issued a reprimand against him, and Arnold became increasingly angered.

While on a trip to the important West Point base to make sure that it could withstand a British attack, Arnold stewed over his slight by Washington and the Americans. He thought that he had never been properly rewarded or acknowledged for his military success on their behalf. He began corresponding with British spies about the possibility of changing sides. Arnold negotiated his defection to the British and the subversion of West Point over several months. The British already held control of New York City and believed that by taking West Point they could effectively cut off the American’s New England forces from the rest of the fledgling nation.

In August 1780, Sir Henry Clinton offered Arnold £20,000 for delivering West Point and 3,000 troops. Arnold told General Washington that West Point was adequately prepared for an attack even though he was busy making sure that that it really wasn’t. He even tried to set up General Washington’s capture as a bonus. His plan might have been successful but his message was delivered too late and Washington escaped. The West Point surrender was also foiled when an American colonel ignored Arnold’s order not to fire on an approaching British ship. Arnold’s defection was revealed to the Americans when British officer John André, acting as a messenger, was robbed by AWOL Americans

working as pirates in the woods north of New York City. The notes revealing Arnold's traitorous agreement were stashed in his boots. Arnold and his wife Peggy, who fooled American officers into believing she had no involvement in the betrayal, escaped to New York City.

At the British surrender at Yorktown, Benedict Arnold was burned in effigy and his name has since become synonymous with traitor. The British didn't treat him very well after the war either. After prevailing in a libel action, he was awarded only a nominal amount because his reputation was already so tarnished. He died in 1801 and was buried in England without military honors. [Source: <https://www.history.com> | December 23, 2019 ++]

Battle of Ft. Sumter

The Opening Hostility of the American Civil War



On December 20, 1860, South Carolina officially seceded from the Union and demanded that all United States forces evacuate Charleston Harbor. At that time the small number of US forces at Charleston were under the command of Major Robert Anderson Rather than surrender his command, Major Anderson took action on the evening of 26 DEC. He gathered his entire command (roughly eighty-five men then stationed on the mainland at Fort Moultrie), and secretly moved them all, under cover of darkness, to the island stronghold of Fort Sumter. Despite being in a very defensible position, Anderson needed more men and supplies to be able to hold his ground against a determined attack. He sent word to Washington asking for assistance, and help was soon on the way.

That help came in the form of the Star of the West, a merchant ship loaded with supplies and 200 men to bolster Anderson's defense, but the South Carolinian defenders did not intend to allow Anderson to be relieved. On January 9, 1861, the Star of the West sailed into Charleston Harbor, but before she could reach Fort Sumter she came under heavy fire and was forced to turn back. Therefore, Major Anderson was left alone, undermanned and under-supplied, to face the unrest that was brewing in Charleston. After Anderson had consolidated his forces at Fort Sumter, the South Carolina militia forces had seized all other US property in Charleston, including the local army. So, while Anderson was isolated, the South Carolina forces were quickly arming and readying themselves to attack.

In March, things got even more interesting.....the new Confederate Government took over the direction of the siege, and the forces in Charleston were placed under the command of General P. G. T. Beauregard. It is interesting to note that Anderson had been Beauregard's artillery instructor at West Point, and the two were said to be close friends. Beauregard determined to end the siege by cutting off all sources of supply for Fort Sumter (up to then, Anderson's men had been allowed to purchase food from Charleston), and force the fort to be evacuated for lack of supplies. This move increased the likelihood that there would be a Battle of Fort Sumter.

In early April, Abraham Lincoln informed the Confederate leadership that he intended to resupply Fort Sumter, and sent a small fleet to carry this out. The Confederate high command decided that they could not allow Anderson to be resupplied, and on 11 APR, Beauregard sent his aides to Fort Sumter with a demand for surrender.

Anderson refused the demand and sent this message back:

“I have the honor to acknowledge the receipt of your communication, demanding the evacuation of this fort, and to say in reply thereto, that it is a demand with which I regret that my sense of honor and of my obligation to my Government prevent my compliance.”

At 3:20 on the morning of April 12, 1861, General Beauregard informed Major Anderson that he would begin bombarding him in one hour. The Battle of Fort Sumter was about to begin... General Beauregard had 43 guns positioned around the harbor and ordered them to fire counterclockwise, in sequence, at two-minute intervals. He issued this command in an effort to conserve his ammunition, which he feared would only last for about 48 hours.

The gun chosen to fire the first shot and signal the opening of the Battle of Fort Sumter (right), was positioned in Fort Johnson. The first shot of the war was fired by Captain George S. James... ..and one of the Charleston papers described what came next:

“...at twenty-five minutes past four o'clock, A. M., the circle of batteries with which the grim fortress of Fort Sumter is beleaguered opened fire. The outline of this great volcanic crater was illuminated with a line of twinkling lights; the clustering shells illuminated the sky above it; the balls clattered thick as hail upon its sides...”

Despite having 60 guns at his disposal, Anderson was only able to use a handful of those because of his small force and inadequate supply of ammunition. He held his fire until daybreak, but then his men began to return fire: The relief fleet began to arrive throughout the first day of the bombardment, but due to the furious artillery fire, they were unable to land any supplies. Another attempt was made, under cover of darkness, to carry supplies to the fort aboard small boats; but they turned back due to heavy seas. On the second day of the Battle of Fort Sumter, the bombardment continued as, “The batteries continued at regular intervals to belch iron vengeance...” The US Navy ships took no part in the fighting and made no attempt to aid the garrison at Fort Sumter, despite the fact that they were in obvious distress.

On several occasions, small fires had started in the fort, but the garrison had been able to put them all out. Finally, by mid-day, most of the wooden structures in the fort were burning and there was no hope of putting them out. One of Anderson’s officers described the conditions: “*One-fifth of the fort was on fire, and the wind drove the smoke in dense masses into the angle where we had all taken refuge. It seemed impossible to escape suffocation.*” That afternoon, Anderson felt that he and his men had done enough to defend their honor, and he agreed to the following terms of surrender:

- “That is – First affording all proper facilities for removing him and his command, together with company arms and property and all private property.
- Secondly – That the Federal flag he had so long and so bravely defended should be saluted by the vanquished on taking it down.
- Thirdly – That Anderson should be allowed to fix the time of surrender; to take place, however, some time during the ensuing day (Sunday.) “

Amazingly, no lives were lost on either side during the Battle of Fort Sumter. Unfortunately, such good fortune could not be expected to last for long... On the afternoon of 14 APR, as Anderson was officially surrendering the fort, the Union forces began firing a 100 gun salute to the flag (left) as it was lowered. During the salute, some spare cartridges exploded, killing two Union soldiers and wounding four more. The salute was stopped after 50 guns, and Anderson and his men evacuated the fort. Thus the Battle of Fort Sumter came to an end, but it was just the spark that lit the mighty fire of war. Sadly, many lives would be lost over the next four years, before the “mighty scourge” came to an end. In February 1865, Union forces under General William T. Sherman took Charleston and recaptured Fort Sumter. On April 14, 1865, the same flag that had been taken down four years before, was raised over the fort during a celebration of its recapture. [Source: <https://www.learning-history.com> | December 26, 2019 ++]

Navy Hospital Ships

Update 01: USS Red Rover was the First



The USS Red Rover, the first hospital ship of the U. S. Navy, was commissioned on December 26th, 1862, after a year of service in the Confederate Army during the Civil War. A side-wheel steamer of 786 tons, the Red Rover was built at Cape Girardeau, Missouri in 1859. Purchased by the Confederacy in November of 1861, she was converted into a barracks ship to provide quarters for the crew of the floating battery New Orleans. Her Confederate service was short-lived, however, for she was captured by the Union gunboat Mound City some five months later when Island Number 10 on the Mississippi River fell into Union hands.

Her brief but successful U.S. Navy career, during which she also served a variety of capacities for the Union forces during the War far beyond the demands of an ordinary hospital ship, ended in 1865. To those familiar with modern standards of naval medical care, it may be difficult to visualize the days when treatment of the shipboard sick and wounded was limited to the surgeon working in a makeshift sickbay—with no hope of better facilities until the ship reached a port which might have a hospital, days or even weeks into the future. It was a situation that existed in the U. S. Navy, however, until the chaos of the Civil War produced the Navy’s first hospital ship.

“No one but those who have witnessed it,” wrote Flag Officer Charles H. Davis of the Western Gunboat Flotilla, “can comprehend the sufferings to which our sick have been exposed by the absence of proper accommodations on board the gunboats and by the necessity for frequent and sometimes hasty change of place . . . When the ship was cleared for action . . . it was necessary to take down their cots and hammocks more than quickly into out of way and uncomfortable places. This must have been attended with pain and distress, if not positive injury. The arrival of the Red Rover will put a stop to all this . . .”

Although the Red Rover was the first hospital ship provided for support of the naval forces, she was by no means the first ship used as a floating hospital during the Civil War. The Army and the Sanitary Commission had begun to use transports and chartered steamers as makeshift hospitals early in the war; however, none of these could even remotely compare with the Red Rover, which has been described as a veritable floating palace.

The Red Rover’s conversion into a hospital ship began shortly after her capture, with the work being supervised by Army Quartermaster Captain George Wise, since naval forces on the Western Rivers operated at that time under control of the War Department. Within two months the basic work had been completed. “I wish that you could see our hospital boat, the Red Rover, with all her comforts for the sick and disabled seamen,” Captain Wise wrote to Flag Officer Andrew H. Foote. “She has decided to be the most complete thing of the kind that has ever floated,” he continued, “and is in every way a . . . success.”

With the advice and assistance of the Western Sanitary Commission, which had contributed \$3,200 toward outfitting the hospital ship, Captain Wise had provided well for the sick and wounded of the naval forces. The Red Rover had “bathrooms, laundry, elevator for the sick from the lower to the upper deck, amputating rooms, nine different water closets, gauze blinds to the windows to keep the cinders and smoke from annoying the sick, two separate kitchens for the sick and well, and two water closets on every deck.” Although the “regular corps of nurses” on board the Red Rover consisted of males, Sister Angela of the Sisters of the Holy Cross offered the assistance of that order in providing nurses

when needed. The offer was gratefully accepted, and various Sisters served on board in a temporary capacity from time to time in 1862.

The Red Rover's capabilities for care of the sick were further enhanced by an icebox that held 300 tons of ice in storage, while her holds carried enough general stores for her crew for three months, along with medical supplies sufficient for two hundred men for the same period. In short, as Commander Pennock reported when she left the Naval Depot at Cairo, Illinois, on her first cruise, "The boat is supplied with everything . . . for the restoration to health of sick and disabled seamen."

The facilities of the hospital ship were soon in great demand, and it was necessary to issue a general order specifying the limitations on patients that might be transferred to her. "All sick persons in the fleet are not to be sent on board the hospital boat indiscriminately," it read. "It will be understood, on the contrary, that only those patients are to be sent to the hospital boat who . . . [are] expected to be sick for some time and whose cases may require more quiet and better attention and accommodation than can be provided on board the vessels to which they belong. Slight disorders and accidents will be treated by the surgeon under whose care they happen to fall."

During this period, the Red Rover, along with the other ships of the Western Gunboat Flotilla, technically "belonged" to the Army, although they were commanded by naval officers and manned primarily by naval personnel. It was a strange situation. "At first, the naval forces on the Western Rivers were put under the direction of the War Department," Admiral Porter later wrote, "as it was supposed the armed vessels would be a mere appendage of the land forces; and there does not seem to have been a man in the cabinet at that time who knew the difference between a gunboat and a transport."

Others apparently shared Porter's view, and control of the naval forces on Western waters was the subject of considerable difference of opinion. The matter was finally resolved, however, by an Act of Congress directing transfer of the "Western Gunboat Fleet" to the Navy Department. The U. S. Navy officially took possession of the ships 1 October 1862; although the Red Rover was not formally commissioned until nearly three months later on 26 December. It was in the same month of December that the first female nurses were officially assigned to a hospital ship of the U. S. Navy, when Sister M. Veronica, Sister M. Adela, and Sister M. Callista were transferred to the Red Rover from the Army hospital at Mound City, Illinois. The first two of these remained with the hospital ship for the duration of the war, being assisted from time to time by additional Sisters of the Holy Cross, as well as other female nurses.

When first commissioned, the Red Rover mustered a crew of 12 officers and 35 men, plus various medical department personnel numbering about 30, although the latter varied from a high of 40 to as few as eight at times during her career. During her seven months of Union Service in 1862, this force could boast a total admission list to Red Rover's sick wards of some 374 patients, 332 of whom had been discharged, 37 had died and five had deserted. It was an auspicious beginning for the Navy's first hospital ship, particularly since the Red Rover's service was by no means restricted to that of providing medical care. In that day when the status of hospital ships was not so clearly defined as to make them noncombatants, the Red Rover was armed with a 32-pounder and considered to be available for any naval duties that occasion might demand.

She began 1863, for example, as guardship at the mouth of the White River while the gunboats of the Mississippi squadron stood up the river. Later that same month, the Red Rover was fired on by the Confederates, two large shots entering the hospital. With her large capacity for general stores, medical supplies, and ice, she also served as a storeship for the fleet, particularly in the matter of furnishing fresh provisions. Her primary duty, however, remained that of a floating hospital for the naval forces, where sickness often reached epidemic proportions. "Of the one hundred and thirty men of the mortar fleet, one hundred are sick and off duty," Flag Officer Davis wrote. "The crews of the gunboats are, many of them, reduced to one half their number . . . the Department would be surprised to see how the most healthy men wilt and break down under the ceaseless and exhausting heat of the pernicious climate. Men who are apparently in health at the close of the day's work, sink away and die suddenly at night, under the combined effects of heat and malarial poison. . . ."

Operating from Cairo to New Orleans during 1863 and most of 1864, the Red Rover supported the Mississippi squadron along the entire Mississippi River and played a major role in evacuating the wounded from such notable operations as the Fort Hindman expedition, the Yazoo River operations, the Siege of Vicksburg, the Fort Pillow attack, and the Red River expedition. Then, in December 1864, as the war on the Western waters waned, the Red Rover was assigned to her final station at Mound City, Illinois. There she remained, continuing to provide care for the sick and wounded until her last 11 patients were transferred off on 17 November 1865. When the Red Rover was mustered out of naval service and sold at public auction later in November, her log showed that the Navy's first hospital ship had provided treatment for 2,947 patients during her career. [Source: U.S. Naval Institute Blog | December 26, 2019 ++]

Operation Valkyrie

1944 Attempt to Assassinate Hitler



Claus von Stauffenberg (above) was a German army officer and one of the leading members of the failed 20 July plot of 1944 to assassinate Adolf Hitler and remove the Nazi Party from power. Along with Henning von Tresckow and Hans Oster, he was one of the central figures of the German Resistance movement within the Wehrmacht. As early as SEP 1942 Stauffenberg was considering Hans Georg Schmidt von Altenstadt, author of *Unser Weg zum Meer*, as a replacement for Hitler. From the beginning of SEP 1943 until 20 July 1944, Stauffenberg was the driving force behind the plot to assassinate Hitler and take control of Germany. His resolve, organizational abilities, and radical approach put an end to inactivity caused by doubts and long discussions on whether military virtues had been made obsolete by Hitler's behavior. With the help of his friend Henning von Tresckow, he united the conspirators and drove them into action.

Stauffenberg was aware that, under German law, he was committing high treason. He openly told young conspirator Axel von dem Bussche in late 1943, "I am committing high treason with all means at my disposal..."). He justified himself to Bussche by referring to the right under natural law to defend millions of people's lives from the criminal aggressions of Hitler.

Only after the conspirator General Helmuth Stieff on 7 July 1944 had declared himself unable to assassinate Hitler on a uniforms display at Klessheim castle near Salzburg, Stauffenberg decided to personally kill Hitler and to run the plot in Berlin. By then, Stauffenberg had great doubts about the possibility of success. Tresckow convinced him to go on with it even if it had no chance of success at all, "The assassination must be attempted. Even if it fails, we must take action in Berlin", as this was the only way to prove to the world that the Hitler regime and Germany were not one and the same and that not all Germans supported the regime.

Stauffenberg's part in the original plan required him to stay at the Bendlerstraße offices in Berlin, so he could phone regular army units all over Europe in an attempt to convince them to arrest leaders of Nazi political organizations such as the Sicherheitsdienst and the Gestapo. Unfortunately, when General Helmuth Stieff, Chief of Operation at Army High Command, who had regular access to Hitler, backtracked from his earlier commitment to assassinate Hitler, Stauffenberg was forced to take on two critical roles: kill Hitler far from Berlin and trigger the military machine in

Berlin during office hours of the very same day. Besides Stieff, he was the only conspirator who had regular access to Hitler (during his briefings) by mid-1944, as well as being the only officer among the conspirators thought to have the resolve and persuasiveness to convince German military leaders to throw in with the coup once Hitler was dead. This requirement greatly reduced the chance of a successful coup.

After several unsuccessful tries by Stauffenberg to meet Hitler, Goring and Himmler when they were together, he went ahead with the attempt at Wolfsschanze on 20 July 1944. Stauffenberg entered the briefing room carrying a briefcase containing two small bombs. The location had unexpectedly been changed from the subterranean Führerbunker to Albert Speer's wooden hut due to it being a hot summer's day. He left the room to arm the first bomb with specially adapted pliers, a task made difficult because he had lost his right hand and had only three fingers on his left. A guard knocked and opened the door, urging him to hurry as the meeting was about to begin. As a result, Stauffenberg was able to arm only one of the bombs. He left the second bomb with his aide-de-camp, Werner von Haeften, and returned to the briefing room, where he placed the briefcase under the conference table, as close as he could to Hitler. Some minutes later, he excused himself and left the room. After his exit, the briefcase was moved by Colonel Heinz Brandt.

When the explosion tore through the hut, Stauffenberg was convinced that no one in the room could have survived. Although four people were killed and almost all survivors were injured, Hitler himself was shielded from the blast by the heavy, solid-oak conference table leg, which Colonel Brandt had placed the briefcase bomb behind, and was only slightly wounded. Stauffenberg and Haeften quickly left and drove to the nearby airfield. After his return to Berlin, Stauffenberg immediately began to motivate his friends to initiate the second phase: the military coup against the Nazi leaders. When Joseph Goebbels announced by radio that Hitler had survived and later, after Hitler spoke on the state radio, the conspirators realized that the coup had failed. They were tracked to their Bendlerstrasse offices and overpowered after a brief shoot-out, during which Stauffenberg was wounded in the shoulder.

In an attempt to save his own life, co-conspirator General Friedrich Fromm, Commander-in-Chief of the Replacement Army present in the Bendlerblock (Headquarters of the Army), charged other conspirators in an impromptu court martial and condemned the ringleaders of the conspiracy to death. Stauffenberg, his aide 1st Lieutenant Werner von Haeften, General Friedrich Olbricht, and Colonel Albrecht Mertz von Quirnheim were executed before 1:00 in the morning after the attempted assassination by a makeshift firing squad in the courtyard of the Bendlerblock, which was lit by the headlights of a truck. Stauffenberg was third in line to be executed, with Lieutenant von Haeften after. However, when it was Stauffenberg's turn, Lieutenant von Haeften placed himself between the firing squad and Stauffenberg, and received the bullets meant for Stauffenberg.

When his turn came, Stauffenberg spoke his last words, 'Long live our sacred Germany', or, possibly, 'Long live the secret Germany', in reference to Stefan George and the anti-Nazi circle. Fromm ordered that the executed officers (his former co-conspirators) receive an immediate burial with military honors in the Alter St.-Matthäus-Kirchhof in Berlin's Schöneberg district. The next day, however, Stauffenberg's body was exhumed by the SS, stripped of his medals and insignia, and cremated.

Another central figure in the plot was Stauffenberg's eldest brother, Berthold Schenk Graf von Stauffenberg. On 10 August 1944, Berthold was tried in the special "People's Court". This court was established by Hitler for political offences. Berthold was one of eight conspirators executed by slow strangulation in Plötzensee Prison, Berlin, later that day. Before he was killed, Berthold was strangled and then revived multiple times. The entire execution and multiple resuscitations were filmed for Hitler to view at his leisure. More than 200 were condemned in show trials and executed. Hitler used the 20 JUL Plot as an excuse to destroy anyone he feared would oppose him. The traditional military salute was replaced with the Nazi salute. Eventually, over 20,000 Germans were killed or sent to concentration camps in the purge. [Source: Wikipedia | December 10, 2019 ++]

USMC Naval Affiliation

Why Marines Are Part of the Navy

Did you ever wonder why the Marine Corps is part of the Department of the Navy? Historically, marines serve as a navy's ground troops. In fact, the word "marine" is the French word for sea, which may be why the French military historically called English troops — who all had to arrive by sea — "marines." Back in the day, there wasn't much difference between a sailor and a soldier on a ship. After all, most sea battles ended with the ships tangled together and the crews fighting each other hand to hand. So, if you were on a ship, you had to be able to fight. But you also had to be able to fight once your ship got where it was going.



Italy was the first country to use specially trained sailors as naval infantry. Back in the 1200s, the chief magistrate of Venice put 10 companies of specialized troops on a bunch of ships and sent them off to conquer Byzantium in present-day Greece. That went well for the Italians, so they decided that having marines was a good idea and kept them around, later calling them "sea infantry." The idea of marines eventually caught on with other naval powers. The Spanish marine corps was founded in 1537 and is the oldest still-active marine corps in the world, while the Netherlands marine corps, founded in 1665, is the second-oldest. But, even today, marines in most countries are specially trained sailors who are part of the navy.

The British Royal Marines, which is what the U.S. Marine Corps was modeled on, were probably the first naval infantry to not actually be sailors. During the 1600-1700s, marine regiments would be formed by taking soldiers from the British Army, and disbanded when they weren't needed. This practice continued until 1755, when England's parliament made the Corps of Royal Marines permanent. When the Continental Marines were founded in 1775, the Continental Congress recognized the importance "that particular care be taken, that no persons be appointed to office, or enlisted into said Battalions, but such as are good seamen, or so acquainted with maritime affairs as to be able to serve to advantage by sea when required."

So, maritime knowledge has always been a critical part of being a marine, but the U.S. Marine Corps hasn't always been part of the U.S. Navy. Until 1834, the Marines were an independent service. President Andrew Jackson wanted to make the Corps part of the Army. However, the Marine Corps commandant at the time, Archibald Henderson, had proven that Marines were important in landing party operations, not just ship-to-ship battles, so Congress decided to put the Navy and Marine Corps into one department, forever linking these two "sister services." [Source: <https://www.defense.gov> | Claudette Roulo February 21, 2019 ++]

Battle of Raate Road

Winter War between the Soviet Union and Finland

The Battle of Raate Road was a battle fought during the Winter War between the Soviet Union and Finland in January 1940, as a part of the Battle of Suomussalmi. On December 7, 1939, the Soviet 163rd Rifle Division captured Suomussalmi but found itself trapped deep inside Finnish territory, and the Soviet 44th Rifle Division was sent to aid

the 163rd. Over the next week, Finland's Colonel Hjalmar Siilasvuo's outnumbered 9th Division stopped and decisively defeated the Soviet forces on the Raate-Suomussalmi road.

At the start of the battle, Siilasvuo's 9th Division had already destroyed the Soviet 163rd Division. After that, it received orders to destroy the Soviet 44th Division, which was stopped on the road near Haukila, 12 kilometers from Suomussalmi. The Finnish 9th Division was split in four squadrons, each named after their commanders. The decisive battle was ordered to begin on January 5, 1940, 08:30.

The battles focused on Haukila, where most of the Soviet troops were located and where squadrons "Mandelin" and "Mäkinie" attacked. Squadron "Mäkinie" had started moving towards Haukila a few days before the official attack. At the same time, the fresh 3rd NKVD Border Guard Regiment was just arriving to assist the Soviet 44th Division. By the following morning, the Finnish troops held strong blocking positions reinforced with mines at several points in the midst of the Soviet column. During 6 JAN heavy fighting occurred all along the Raate Road as the Finns continued to break up the enemy forces into smaller pieces. The Soviets attempted to overrun Finnish roadblocks with armor, losing numerous tanks in frontal attacks, but were unsuccessful. Finally, at 21:30, Alexei Vinogradov belatedly ordered his division to retreat back to the Soviet border.

The despairing Soviet troops began to escape north over Lake Kiantajärvi. Many soldiers froze to death without proper clothing or supplies. Remnants of Soviet units had already tried to escape to the east, but were blocked by squadron "Kari". Further in the east, squadron "Fagernäs" could not keep a strategic bridge under Finnish control. On 7 JAN, squadron "Fagernäs" recaptured the bridge and before noon all Soviet resistance was suppressed. The mopping-up went on for two days, during which the Finns rounded up hundreds of starving, freezing Soviet soldiers. Other remnants of the 44th Division were forced to withdraw from the area, fleeing through the northern forests pursued by the Finns, finally reaching the border in several small groups. The Finnish army captured a tremendous amount of materiel in this battle. Thereafter, the area saw only a few minor skirmishes.

For many years, Finnish historians estimated the Soviet losses to be around 17,000 men. The estimation was based on the interrogation of the prisoners of war captured in early January. Officers of the Soviet 27th Infantry Regiment had given their casualties at 70 percent and the Finns assumed that the strength of the 44th Division was over 20,000 men. Western historians conformed their figures to Finnish estimations. The Soviets challenged the number of casualties published in the Western world immediately in January and claimed to have lost no more than 900 men, mostly from frostbite, while inflicting an estimated 2,000 Finn fatalities. Later Finnish historians conducted further efforts to ascertain the number of Soviet casualties in the battle. The Finns captured over 5,000 rifles, and furthermore, the North Finland Group replaced 1,200 old rifles with the newer Soviet models. Most recent Finnish studies indicate that the Soviets lost at least 7,000–9,000 men.



Fragment of the destroyed Soviet column on the road (left) and the Monument of the Winter War

The Finns quickly buried the Soviet dead as the weather warmed during the early spring to reduce the risk of epidemics. Mass graves were marked on maps and were mounted with a cross or a pole. Later, the maps disappeared. Around Easter, the Soviets made a request that they would like to gather the dead and bring them back home. The Finns did not allow Soviet Army officials to cross the border but delivered 300 bodies from near the village of Raate to Soviet

officials. After the Continuation War, a conflict fought by Finland and Nazi Germany as co-belligerents, against the Soviet Union (USSR) from 1941 to 1944, the Soviets were not interested in their deceased. The Red Army occupied the Raate Road shortly and gathered wartime debris but left the bodies alone. The fate of the Soviet 44th Division remained unmentioned in Soviet historiography for decades.

The Soviet commander, Vinogradov, and two of his chief officers, Volkov and Pahomov, retreated in the middle of crucial battles. According to the Stavka report, this act had a fatal influence on morale. As they reached the Soviet lines four days later they were court-martialed, found guilty and sentenced to death; the executions were carried out immediately. The Stavka itself had made the crucial decisions to keep the 44th Division on the Raate Road after the 163rd had lost Suomussalmi village. A Ukrainian veteran of the Raate Road, Sergeant Pyotr Andrevich Morozov, was interviewed in 1991 by the Finnish non-fiction writer Leo Karttimo. According to Morozov the Finns returned prisoners of war, but none of them managed to get back to their homes as the Soviet secret service NKVD executed them all in summer 1940

Today, the former battlefield is the site of the [Monument of the Winter War](#) dedicated to all who died in the war on both sides. The memorial includes a field of thousands of stones as symbolic gravestones of the Soviet soldiers who fell in the battle. The Russian monument was installed in September 1994, and the Ukrainians installed their own monument in the spring of 1998. [Source: https://en.wikipedia.org/wiki/Battle_of_Raate_Road | January 7, 2020 ++]

Military History Anniversaries

16 thru 31 JAN

Significant events in U.S. Military History over the next 15 days are listed in the attachment to this Bulletin titled, “**Military History Anniversaries 16 thru 31 JAN**”. [Source: This Day in History www.history.com/this-day-in-history | January 2020 ++]

MOH Awards

Update 17: Can be Earned by Noncombatants

Navy Seaman Lewis Horton served during the Civil War, and his time in the military included being a prisoner of war, a double amputee and a courageous lifesaver. He was one of the first-ever service members to earn the Medal of Honor as a noncombatant. Horton was born May 26, 1842, in Bristol, Massachusetts. He enlisted in the Navy in May 1861 when he was 19. That summer, during the early days of the war, Horton was captured while serving on the USS Massachusetts and taken to a Confederate prison in Richmond, Virginia. He was paroled and discharged in March 1862 and almost immediately reenlisted.

His new duty station was the USS Rhode Island, and that's where he was serving when he earned the Medal of Honor. On Dec. 30, 1862, the Rhode Island was towing the ironclad warship USS Monitor as a terrible storm began, causing the Monitor to spring a leak and start to sink. According to the Gettysburg Compiler, a publication by students and staff of the Civil War Institute of Gettysburg College, Horton and six other seamen volunteered to take a rowboat out on a rescue mission to save the Monitor's men. The rescuers made two successful trips before returning for a third to discover that the Monitor had completely sunk. They were able to save all but 16 men.



When the rescuers turned back, they were about 2 miles from the Rhode Island. But thanks to the rain and fog, they lost sight of the ship. According to the Gettysburg Compiler, "The men chose to row northwest in hopes of coming across another vessel patrolling the coast and continued to row all night long to keep them out of the strong northeast current that threatened to send them deep into the Atlantic Ocean." The men had no food or water and very little to keep themselves warm in the cold, wet winter weather. After 18 hours, they were finally rescued about 50 miles from where the Monitor sank. All seven men survived and were able to rejoin the Rhode Island's crew by mid-January. Horton and the six other men -- Luke Griswold, John Jones, Hugh Logan, George Moore, Charles H. Smith and Maurice Wagg -- were the first noncombatants to receive the Medal of Honor.

Less than a year after the Monitor's sinking, on Nov. 3, 1863, Horton had both of his arms blown off at the elbow in a gun-loading accident, according to the Compiler. What remained of his arms had to be amputated immediately. Horton wasn't expected to survive the accident, but he did, and he went on to live a pretty full life. He got married, raised a family and even learned to race a yacht again, despite the loss of his arms. According to the Compiler, Horton was working at a Boston customs house for official government duties in 1893 when he learned he had earned the Medal -- even though the citation was issued in 1865.

"After being told by his local newspaperman that a Washington dispatch had been published looking for a Lewis Horton to accept his Medal of Honor, Horton seems to have replied in genuine shock," wrote Compiler researcher Sarah Johnson. "Encouraged by the newspaperman to write to Washington and inquire, Horton replied that if the government wanted to send him a medal he figured they would find him. He received the medal shortly after and commented that he was glad to have it after so long a time period." Horton lived for another two decades. He died when he was 74 on June 8, 1916. What a remarkable life! [Source: DOD News | Katie Lange December 30, 2019 ++]

WWII Bomber Nose Art

[46] Versatile Lady



Battle of the Bulge

Update 02: The Losing Side is Often the Most Dangerous Just Before its Collapse

Seventy-five years ago, at the Battle of the Bulge (fought from Dec. 16, 1944, to Jan. 25, 1945), the United States suffered more casualties than in any other battle in its history. Some 19,000 Americans were killed, 47,500 wounded and 23,000 reported missing. The American and British armies were completely surprised by a last-gasp German offensive, given that Allied forces were near the Rhine River and ready to cross into Germany to finish off a crippled Third Reich.

The Americans had been exhausted by a rapid 300-mile summer advance to free much of France and Belgium. In their complacency, they oddly did not worry much about their thinning lines, often green replacement troops or the still-formidable Germany army. After all, Nazi Germany was being battered on all sides by Americans, British, Canadians and Russians. Its cities were in ruins from heavy bombers. Yet the losing side is often the most dangerous just before its collapse. In retreat, the Germans were shortening their interior lines. They had the element of surprise, given confident allies who assumed the war would soon be over. The cold December weather would ground the overwhelming number of Allied fighters and bombers. The Germans aimed their assault through the snowy roads of the Ardennes Mountains to bowl over inexperienced or exhausted U.S. divisions.

The result was that Hitler's last gamble in the West was as tactically brilliant as it was strategically imbecilic. If Hitler's offensive failed, it would drain the last formidable reserves from the German homeland and leave it a hollow shell. After all, Germany had neither the manpower nor the supplies to reach the English Channel and cut off the British from the Americans, much less stop either the Russian offensives in the East or around-the-clock Allied bombing. Yet, during last two weeks of December, crack German veterans tore huge holes in the Allied lines and pushed them back almost 50 miles in some spots. On such a narrow front, German forces outnumbered the Americans, and their tanks and artillery were superior.

Gen. Dwight D. Eisenhower, commander of Allied Forces in Western Europe, never expected that a tottering Germany could muster 400,000 attackers with roughly 600 tanks and massive artillery support -- all secretly massed just a few miles beyond Allied lines. Yet by the second week in January, the month-long offensive had largely failed. The Germans were in retreat. They had lost almost as many men and machines as the Americans but lacked a commensurate ability to replace them.



Members of the 117th Infantry Regiment, 30th Infantry Division, move past a destroyed American M5 "Stuart" tank on their march to capture the town of St. Vith at the close of the Battle of the Bulge.

What can we learn from our bloodiest battle on the 75th anniversary of it? The deadliest periods of a war are often near its end. The losing side puts up a desperate resistance that is often unexpected by the overconfident, winning opponents. One of the most lethal American battles in the Pacific Theater was fought at Okinawa, costing 50,000

casualties and ending just weeks before Japan surrendered. American strategists failed to grasp that even though Germany was likely to lose the war sometime in 1945, it could still kill thousands of Americans before it surrendered.

Before the Battle of the Bulge, Eisenhower, Omar Bradley, Bernard Montgomery and Courtney Hodges thought fellow general George S. Patton was a talented, eccentric, flamboyant and sometimes buffoonish throwback to 19th century glory hounds. Yet it was Patton alone who in America's darkest hour of 1944 most clearly grasped both the dangers of, and the solutions to, the disaster. To no avail, Patton had warned his superiors that a gambler like Hitler would likely try something desperate in December. Even before the generals met, Patton had preplanned a risky rescue operation. In a blizzard, he turned a large part of his army 90 degrees on a 100-mile trek to save the collapsing American lines to the north at Bastogne, Belgium.

Had the American command followed the rambunctious Patton's recommendation to cut off the overexposed German bulge at its base, rather than conservatively try to push it back at the nose, the campaign would have ended even sooner, with far fewer lost American lives. The face of war changes with new technology. But its essence remains the same, because human nature stays constant. A long-ago American victory can remind us that when such calamities strike, the status quo is not always equipped to rise to the challenge. Instead, our future saviors are often right in our midst, characteristically loud and underappreciated, but savvy and vital to our survival. The Battle of the Bulge reminds us that when deadly enemies prove unpredictable, it is sometimes wise to have an even more unpredictable leader on our side. [Source: Victor Davis Hanson | December 24, 2019 ++]

Medal of Honor Citations

Dennis Conlon | Civil War



*The President of the United States takes pride in presenting the
MEDAL OF HONOR*

To

Dennis Conlon

Rank and organization: Seaman, U.S. Navy

Place and date: 1st Battle of Fort Fisher, 23 DEC 1864

Entered service: Unknown

Born: December 29, 1838, New York, NY

Citation

Conlon served on board the U.S.S. Agawam, as one of a volunteer crew of a powder boat which was exploded near Fort Fisher, 23 December 1864. The powder boat, towed in by the Wilderness to prevent detection by the enemy, cast off and slowly steamed to within 300 yards of the beach. After fuses and fires had been lit and a second anchor with short scope let go to assure the boat's tailing inshore, the crew again boarded the Wilderness and proceeded a distance

of 12 miles from shore. Less than 2 hours later the explosion took place, and the following day fires were observed still burning at the forts.



Three men stand beside a large cannon on a beach. Behind it is a pile of sandbags.

Those who perform valiant actions don't always succeed in their missions, but that doesn't mean their efforts aren't worthy of commendation. Navy Seaman Dennis Conlan was one of several men who received the Medal of Honor for actions during the Civil War that didn't bring success for their side — but they were courageous nonetheless. Conlan was about 26 years old when his actions earned him the Medal of Honor on Dec. 23, 1864, during the First Battle of Fort Fisher, North Carolina.

For most of the Civil War, Fort Fisher saw very little combat, but that changed in late 1864 when the Union wanted to capture the last port the Confederacy held on the Atlantic Ocean. The first part of the Union plan involved Conlan, who was serving aboard the USS *Agawam*, and several other sailors who volunteered to pack an old steam ship, the USS *Louisiana*, with tons of explosives. Union naval leaders planned to blow up the ship, a move that would level part of the fort or at least dislodge its guns. To prevent detection by the enemy, the *Louisiana* was towed late at night into shallow waters by another vessel, the USS *Wilderness*. It steamed to within about 300 yards of the northeast bastion of Fort Fisher.

Once it was in place, Conlan and the crew lit an elaborate fuse-and-clockwork system and then built fires in the propeller shaft, according to Fort Fisher's historical website. The commander threw down an anchor with a short scope to make sure the boat got as close to the beach as possible. The men then abandoned the *Louisiana* and were pulled in a smaller boat to the *Wilderness*, which sailed about 12 miles from shore, where the rest of the fleet was located. Unfortunately, an undertow and offshore breeze had pulled the *Louisiana* off course, according to the history website. So when the ship exploded less than two hours after it was abandoned, it caused no damage to the fort. Fires could still be seen burning there the next day, but the fort's walls were still standing. The only thing the explosion did was alert the Confederate service members of an imminent attack.

While the mission proved to be a complete failure, the 10 men who volunteered for it, including Conlan, were awarded the Medal of Honor for their bravery. Conlan only had a few years to cherish it, though. He died on Dec. 2, 1870. Meanwhile, Fort Fischer eventually fell, although not over Christmas. A second Battle of Fort Fisher in mid-January 1865 was won by the Union, effectively cutting the Confederacy off from all global trade and supplies. The Civil War ended three months later.

[Source: <http://www.cmohs.org/recipient-detail/282/conlan-dennis.php> | December 2019 ++]



Medicare Premiums | 2019

Update 01: Millions of Retirees Spent \$5,000 on Just Premiums

An estimated 10 million Medicare beneficiaries who are covered by a Medigap policy and Part D plan, spent \$5,000 in 2019 — \$416 per month — just for Medicare premiums according to findings from TSCL’s 2019 Senior Survey. That’s a significant percentage of a retiree’s household budget when the average Social Security benefit in 2019 was just \$1,460 per month.

Retirees should not try to rely on the annual cost-of-living adjustment (COLA) to cover Medicare Part B and Medigap premium increases even though the COLA is intended to provide protection from rising costs. Medicare premiums are among the fastest growing costs in retirement, yet the COLA is adjusted using an index that does not include any Medicare premium data. Consequently, the annual COLA increase significantly lags behind the growth in Medicare premiums.

According to TSCL’s research on typical retiree costs, Medicare Part B premiums grew 198 percent from 2000 through 2019, and the average Medigap premium grew by 135 percent over the same period. But since 2000, COLAs have raised Social Security benefits just 50 percent. This disparity means that today’s retirees are forced to rely more heavily on other sources of income in retirement, such as savings and pensions if they have those resources. Millions do not. The U.S. Government Accountability Office recently estimated that 48 percent of U.S. households age 55 and over have no retirement savings.

The Senior Citizens League supports legislation that would strengthen Social Security COLAs by using the more generous Consumer Price Index for the Elderly, CPI-E to calculate the annual adjustment. Had that index been used since 2015, benefits would be about 2 percentage points higher today and an average benefit of \$1,215 in 2015 would be about \$26 per month higher today. [Source: The Senior Citizen League | January 2, 2020 ++]

Drug Cost Increases

Update 17: Below 10% for 200 on 1 JAN 2020

Drugmakers including Pfizer Inc, GlaxoSmithKline PLC and Sanofi are planning to hike U.S. list prices on more than 200 drugs in the United States on Wednesday, according to drugmakers and data analyzed by healthcare research firm 3 Axis Advisors. Nearly all of the price increases will be below 10%, and around half of them are in the range of 4 to 6%, said 3 Axis co-founder Eric Pachman. The median price increase is around 5%, he said. More price increases are expected to be announced later this week, which could affect the median and range.

Soaring US prescription drug prices are expected to again be a central issue in the presidential election. President Donald Trump, who made bringing them down a core pledge of his 2016 campaign, is running for re-election in 2020. Many branded drugmakers have pledged to keep their US list price increases below 10% a year, under pressure from politicians and patients. Drugmakers often negotiate rebates on their list prices in exchange for favorable treatment from healthcare payers. As a result, health insurers and patients rarely pay the full list price of a drug.

- **Pfizer** will hike prices on more than 50 drugs, including its cancer treatment Ibrance, which is on track to bring in nearly \$5 billion in revenue this year, and rheumatoid arthritis drug Xeljanz. Pfizer spokeswoman Amy Rose confirmed the company's planned price increases. She said the company plans to increase the list prices on around 27% of its portfolio in the United States by an average of 5.6%. Of the medicines with increases, she said 43% of them are sterile injectibles, and many of those increases are less than \$1 per product.
- **GlaxoSmithKline** said it will raise prices on more than 30 drugs. The company will raise prices on the blockbuster respiratory treatments it delivers through its Ellipta inhaler, its recently acquired cancer drug Zejula and on several products in its HIV-focused ViiV joint venture, according to 3 Axis Advisors. Price increases ranged between 1% and 5%.
- **Sanofi** said it will raise prices on around 10 of its drugs, with hikes ranging between 1% and 5%. The drugmaker noted the increases are in line with its commitment to not raise prices above medical inflation.
- **Teva Pharmaceutical Industries Ltd** raised prices on more than 15 drugs, in some cases by more than 6%, according to 3 Axis Advisors. A Teva spokesperson said the company regularly reviews prices in the context of market conditions, availability and cost of production. 3 Axis advises pharmacy industry groups on identifying inefficiencies in the U.S. drug supply chain and has provided consulting work to hedge fund billionaire John Arnold, a prominent critic of high drug prices.

Ian Spatz, a senior adviser at consulting firm Manatt Health, said that drugmakers could be holding to relatively low price hikes in an attempt to stay out of politicians' crosshairs. Trump, for instance, targeted Pfizer after a proposed round of price increases in 2018, saying in a tweet that the drugmaker "should be ashamed." "I'm sure many manufacturers are interested in making sure they are not called out on a large list price increase," Spatz said. The United States, which leaves drug pricing to market competition, has higher prices than in other countries where governments directly or indirectly control the costs, making it the world's most lucrative market for manufacturers.

Trump has struggled to deliver on a pledge to lower drug prices before the November 2020 election. His administration recently proposed a rule to allow states to import prescription drugs from Canada. The administration had previously scrapped an ambitious policy that would have required health insurers to pass billions of dollars in rebates they receive from drugmakers to Medicare patients. The House of Representatives passed a bill earlier in December that would cap prices for the country's most expensive drugs based on international prices and penalize drugmakers that do not negotiate with the Medicare insurance program for seniors. Trump has threatened to veto the bill, saying it would undermine access to lifesaving medicines. [Source: Reuters | Michael Erman & Carl O'Donnell | December 31, 2019 ++]

Prescription Drug Costs

Update 41: Medicare's Influence

In a new television ad that began airing in December in Iowa, a presidential candidate asks these questions: "Why do prescription drugs cost more in the U.S. than in Canada?" and "How come it's against the law for Medicare to negotiate for lower prices?" High drug costs are a regular topic in presidential campaigns and this ad is no exception. But do the claims in her questions check out?

For its sourcing, the campaign provided a study published in the [March 2018 edition](#) of the Journal of the American Medical Association. Researchers from Harvard University, the Harvard Global Health Institute and the London School of Economics used data compiled by international economic organizations — including the Organization for Economic Co-operation and Development — and compared health care spending in the United States to spending in 10 of the world's highest-income countries. The campaign noted specific findings in the study that showed the United States

spent about twice as much on medical care as Canada, yet utilization rates in the United States were similar to those in Canada and other nations.

The study found that among the 11 countries studied, the United States was the highest pharmaceutical spender in 2016 at \$1,443 per person. That same year, Canada’s total spending reached \$613 per person. Other research shows the U.S. spending on prescription drugs outpaces other high-income countries as well. A 2017 publication by the Commonwealth Fund, a private U.S. foundation focused on health care, compared 2015 prescription drug prices in the United States to prices in Canada and eight other high-income countries. In 2015, U.S. spending on pharmaceuticals exceeded \$1,000 per person, according to the Commonwealth Fund. While researchers said the spending in the United States was at least 30 percent more, they did not specify the costs per person for the other countries.

The study cited by the campaign further stated that for several common brand-name pharmaceuticals, the United States had “substantially higher prices than other countries, often double the next highest price.” For example, Lantus, a popular name-brand insulin, cost \$186 per month in the United States. In Canada, it cost \$67 a month. On the other hand, the study also said investment has been viewed as critical to innovation, and found the United States “accounted for 57 percent of total global production of new chemical entities” in 2016. Even among insured populations, Americans pay more for prescriptions than those in other countries, according to a 2015 analysis by Bloomberg News. After discounts to the list price were given to insurers, Bloomberg News found, seven top-selling name brand drugs cost more in the United States than in other high-income nations studied.

According to Bloomberg News, that’s because drug companies set their own prices. It’s also because one of the largest buyers of medicine in the United States — **Medicare — is “prohibited from negotiating prices directly with drug companies.”** This leads to the second claim that it is against the law for Medicare to negotiate for lower drug prices. The campaign pointed to an opinion article published Aug. 10, 2018, by Forbes, “Why Medicare Can’t Get The Lowest Drug Prices.” The opinion article, written by Forbes contributor John F. Wasik, makes the case that a law passed by Congress in 2003 prevented Medicare from having the power to negotiate ideal prescription drug prices in creating Pharmacy Benefit Managers, or the corporations that serve as middlemen between pharmaceutical companies and pharmacies.

About 59 million Americans received Medicare benefits in 2018, according to the Kaiser Family Foundation, a nonprofit that analyzes health care. According to Kaiser, the Medicare Modernization Act — which established Medicare Part D, the prescription drug benefit — includes a “non-interference” clause. The clause stipulates the Secretary of the U.S. Department of Health and Human Services, which oversees Medicare, “may not interfere with the negotiations between drug manufacturers and pharmacies and Medicare Prescription Drug Plan sponsors.” “In effect, this provision means that the government can have no direct role in negotiating or setting drug prices in Medicare Part D,” the Kaiser Family Foundation stated.

Conclusion The claims framed in the campaign’s questions check out. Research in recent years has shown the United States pays more for prescription drugs than Canada and other high-income earning countries. While the campaign does not specifically name a direct cause for those costs, the ad does allude to the fact that Medicare — one of the nation’s biggest buyers of medicine — is barred from negotiating prices with drug companies. Other sources of information support this statement also. The Gazette newspaper’s Fact Checker gives these claims an A. [Source: The Gazette | Michaela Ramm | December 23, 2019 ++]

Prescription Drug Costs

Update 42: VA Users Less Likely to Go Without Needed Medications

The rising price of prescription drugs has led to a slew of proposals to lower costs and expand access to medications. However, a new study from researchers at Harvard Medical School and the City University of New York at Hunter

College suggests that an effective reform model already exists: the pharmacy benefit of the Veterans Health Administration, commonly known as the VA. Researchers found that VA patients are significantly less likely than other insured Americans to go without needed medications, skip doses, or delay filling prescriptions because they are unable to afford them. The study found that VA coverage also reduced racial and economic disparities in prescription drug access.

The VA buys drugs at relatively low cost by using a combination of regulations, bargaining with drug companies to reduce wholesale prices, and utilizing a national formulary. The VA can then afford to provide drugs to veterans with low -- or no -- patient copays. The investigators assessed whether this benefit design lowered "cost-related medication non-adherence" by analyzing national health surveys conducted from 2014 to 2017. Although VA enrollees were older, sicker, and poorer than other insured Americans, fewer (6.1% of enrollees) reported that costs caused them to go without any medication in the course of a year -- compared to 10.9% of non-VA patients. The differences were even larger among patients with serious conditions like heart disease (6.1% vs. 14.4%) and chronic lung disease (6.4% vs. 19.9%).

"We face a crisis in drug affordability," noted senior author Dr. Danny McCormick, associate professor of medicine at Harvard Medical School and a primary care physician. "High copays and deductibles are forcing patients to skip their medications -- even for serious illnesses like heart disease or lung disease -- putting their health, and even their life at risk. The VA shows that there is a better way."

Previous studies suggest that drug costs would be lower for Medicare if it were allowed to negotiate prices directly with drug companies and use a national formulary, as does the VA. Currently, Medicare's drug benefits are only available through private plans, which often impose copays, deductibles, and co-insurance for drugs that can add up to thousands of dollars annually. VA enrollees instead pay at most \$11 per prescription, and often less. The researchers found that while the VA prevented patients overall from skipping medications due to costs, it was especially beneficial for minority veterans and those with lower incomes.

"Our findings have important implications for the debate about the affordability of health reform," noted Dr. Steffie Woolhandler, distinguished professor at the City University of New York's Hunter College and lecturer (formerly professor) in Medicine at Harvard Medical School. "Both the House and Senate Medicare-for-All bills would borrow tools from the VA to cut drug costs, including price negotiations and a formulary. These steps could allow all Americans to afford their medications without burdensome copayments or deductibles," she added.

Dr. Adam Gaffney, a pulmonary and critical care physician at Harvard Medical School, noted that while a VA-like drug benefit model could save money, it could also improve patients' health. "Today, we have better drugs -- more ways to help our patients -- than ever before. But these drugs offer no help to patients who can't afford to take them. By reforming how we pay for prescription medications, we can improve health outcomes, while bringing our drug spending in line with that of other rich nations." [Source: EurickAlert News Release | January 6, 2020 ++]

Counterfeit Medicine

Update 01: How to Safely Buy Medicine Online

Avoid Counterfeit Drugs

Shopping at legal online pharmacies may make sense for some consumers. To help you stay safe only use legitimate websites when purchasing your medicine online. If you are buying your medication online, use these tips to protect yourself from counterfeits.

- Verify the online pharmacy
- If you are buying your medication online, check out this website— www.safe.pharmacy —to verify whether a site is safe or not recommended.

Check the website

Legal online pharmacies have websites that clearly list:

- A physical business address with a street and city in the U.S.
- Contact information including a phone number
- State license information

Legitimate pharmacies will always require you to submit a prescription from a health care provider before they sell any medicine that requires a prescription.

Know the red flags

To stay safe, avoid websites that:

- Allow consumers to buy prescription medications by simply completing an online question-naire
- Offer drastically discounted prices
- Offer drugs that make exaggerated claims of providing a cure for chronic or life-threatening illnesses
- Offer to ship prescriptions from other countries to the United St

It's unlikely to be a legitimate online pharmacy, if it does not:

- Require a valid prescrip-tion to place an order
- Have a licensed pharmacist available for consultation
- Offer contact information, including a physical street address

For more information: The Food and Drug Administration (FDA) is the U.S. agency that regulates the sale of medicine. It offers additional resources on how to avoid purchasing counterfeit medication [here](#).

[Source: Fraud!Org | January 2, 2020 ++]

Cancer

2017 Biggest U.S. One-Year Death Rate Drop Ever

The cancer death rate in the United States fell 2.2 percent in 2017 - the biggest single-year drop ever reported - propelled by gains against lung cancer, the American Cancer Society said 8 JAN. Declines in the mortality rate for lung cancer have accelerated in recent years in response to new treatments and falling smoking rates, said Rebecca Siegel, lead author of Cancer Statistics 2020, the latest edition of the organization's annual report on cancer trends. The improvement in 2017, the most recent year for which data is available, is part of a long-term drop in cancer mortality that reflects, to a large extent, the smoking downturn. Since peaking in 1991, the cancer death rate has fallen 29 percent, which translates into 2.9 million fewer deaths.

Norman "Ned" Sharpless, director of the National Cancer Institute, which was not involved in the report, said the data reinforces that "we are making steady progress" on cancer. For lung cancer, he pointed to new immunotherapy treatments and so-called targeted therapies that stop the action of molecules key to cancer growth. He predicted that the mortality rate would continue to fall "as we get better at using these therapies." Multiple clinical trials are exploring how to combine the new approaches with older ones, such as chemotherapy. Sharpless expressed concern, however, that progress against cancer would be undermined by increased obesity, which is a risk factor for several malignancies.

The cancer society report projected 1.8 million new cases of cancer in the United States this year and more than 606,000 deaths. Nationally, cancer is the second-leading cause of death after heart disease in both men and women. It is the No. 1 cause in many states, and among Hispanic and Asian Americans and people younger than 80, the report said. The cancer death rate is defined as deaths per 100,000 people. The cancer society has been reporting the rate since 1930. Because lung cancer is the leading cause of cancer deaths, accounting for 1 in 4, any change in the mortality rate has a large effect on the overall cancer death rate, Siegel noted. She described the gains against lung cancer, and against

another often deadly cancer, melanoma, as "exciting." But, she added, "the news this year is mixed" because of slower progress against colorectal, breast and prostate cancers. Those cancers often can be detected early by screening, she said.

The report said substantial racial and geographic disparities remain for highly preventable cancers, such as cervical cancer, and called for "the equitable application" of cancer control measures. The five-year survival rate for all cancers diagnosed from 2009 through 2015 was 67 percent overall - 68 percent for whites and 62 percent for African Americans. In recent years, melanoma has showed the biggest mortality-rate drop of any cancer. That's largely a result of breakthrough treatments such as immunotherapy, which unleashes the patient's own immune system to fight the cancer and was approved for advanced melanoma in 2011. The one-year survival rate for patients with advanced melanoma rose from 42 percent in the 2008-2010 period to 55 percent between 2013 and 2015, according to the report. Also striking, Siegel said: Among those 65 and older, the melanoma death rate has been dropping 5 percent to 6 percent annually in recent years after decades of increases.

Meanwhile, lung cancer death rates have dropped by 51 percent since 1990 in men, and by 26 percent since 2002 in women, with the most rapid progress in recent years. For men, the decline in the death rate sped up from 3 percent per year during the 2008-2013 period to 5 percent annually for the following five-year period. For women, the decrease accelerated from 2 to almost 4 percent. Siegel noted that most lung cancer cases are diagnosed at an advanced stage - which is what the new therapies are designed to treat.

The percentage of adults in the United States who smoke has been dropping for decades, according to the Centers for Disease Control and Prevention. Between 2005 and 2018, for example, the proportion fell from almost 21 percent to 13.7 percent. The report said a slight rise in breast cancer incidence rates since 2004 - about 0.3 percent per year - is partly the result of fertility rate declines and increased obesity. Those factors also may be contributing to an increase in uterine cancer. The cancer society also said survival has improved since the mid-1970s for all of the most common cancers except cervical and uterine cancers. In those cases, treatment breakthroughs for advanced disease have not materialized. [Source: The Washington Post | Laurie McGinley | January 10, 2020 ++]

Cervical Cancer

Update 04: Screening Can Help Prevent It

January is Cervical Cancer Awareness Month. VA encourages female veterans to talk to their primary care provider about cervical cancer testing because early detection can help save your life. Cervical cancer was once the number one cause of cancer-related death in women. Due to increased screening, the number of cervical cancer deaths in the United States has dropped by more than 50% since the 1970s, according to the American Cancer Society. Cervical cancer is one of the most treatable cancers if found early. A Pap (Papanicolaou) test, also known as a Pap smear, looks for cancer and pre-cancerous cervical cells.

This test and screening for the human papillomavirus (HPV) testing, which is the cause of most cervical cancers, often leads to early detection. In addition to screening, there is a vaccination to prevent HPV. It is most effective if administered during childhood or adolescence, but adults can benefit from it, too. These are some of the most helpful questions to ask during your next primary care visit:

- How often do I need a Pap or HPV test, or both?
- If my test is abnormal, how will I be contacted?
- Should I receive the HPV vaccine?

Depending on your age and current cervical health, you can be screened in three or five-year increments. VA and the United States Preventive Services Task Force (USPSTF) released new screening guidelines in 2018. You can

connect with your primary care provider to better understand the new scheduled recommendations. For women Veterans between the ages of 21 and 29, VA recommends a Pap test every three years. For women Veterans between the ages of 30 and 65, VA recommends one of three options:

- A Pap test every three years.
- Both the Pap and HPV tests every five years.
- An HPV test every five years.

Speak to your VA provider about how to schedule a cervical cancer screening, your Pap and/or HPV test at your local VA facility. To contact the Women Veteran Call Center, call 1-855-VA-WOMEN (1-855-829-6636). Staff there can connect you with a program manager at a local VA facility for more information. Additionally, you can chat online via real-time messaging or visit www.womenshealth.va.gov. [Source: Vantage Point | 9 January 2020 ++]

Salmonella

How Europe and the U.S. Protect Eggs Against It

The most important part is keeping harmful bacteria at bay. But does that mean you have to refrigerate? Not according to Europeans. In the good ole U.S. of A., practically everything goes into the fridge. But not only do Europeans keep their eggs on the counter, but they also strongly recommend against refrigerating eggs. What gives? Well, there are two different philosophies about preventing the same nasty bug. At the root of the issue is Salmonella, one of the most common causes of bacterial food poisoning. It can run rampant through chicken farms, turning up on the outside of eggs thanks to contamination from dirt and feces; more insidious is when it's inside the shell, thanks to the bacteria infecting a hen's ovaries.

To combat the problem, back in the 1970s, the U.S. perfected egg washing: After laying, the eggs go straight to a machine where they're shampooed with soap and hot water. This steamy shower washes away any potential Salmonella, but it also strips the eggs of a thin coating called a cuticle. Without this protective layer, the eggs can't keep water and oxygen in, or harmful bacteria out. So the eggs are refrigerated to combat infection.

European food safety experts took a different tack: They left the cuticle intact, made it illegal for egg producers to wash eggs, discouraged refrigeration (which can cause mildew growth and bacterial contamination should the eggs sweat as they come back to room temps), and started a program of vaccinating chickens against salmonella. The approach appears to be effective: In 2000, the U.K. had more than 14,000 egg-related cases of food poisoning; in more recent years, after their egg safety measures had been widely adopted, the number had reportedly dropped to 8,000. The U.S. has about 79,000 cases, but with a much larger population, of course.

There are objective and subjective pros and cons to room-temp eggs versus refrigerated ones. Refrigeration means the eggs can absorb odors and flavors from other foods in there; countertop connoisseurs claim the room-temp eggs taste better. But if you keep eggs stored in their carton, and minimize the amount of smelly food in your fridge, off flavors shouldn't be an issue. Some chefs believe room-temperature eggs to be ideal for baking; it's why you'll see recipes recommending you bring eggs to room temp before mixing. If you want to try room-temp eggs, head down to the local farmers' market and talk to the sellers down there. Chances are they haven't washed or refrigerated the eggs, the cuticle is intact, and you could keep the eggs on the counter. Just remember to practice consistency: If an unwashed egg goes in the fridge, it should stay there until you're ready to use it.

Typically, people with salmonella infection have no symptoms. Others develop diarrhea, fever and abdominal cramps within eight to 72 hours. Most healthy people recover within a few days without specific treatment. In some cases, the diarrhea associated with salmonella infection can be so dehydrating as to require prompt medical attention. Life-threatening complications also may develop if the infection spreads beyond your intestines. Your risk of acquiring salmonella infection is higher if you travel to countries with poor sanitation.

Salmonella infection is usually caused by eating raw or undercooked meat, poultry, eggs or egg products. The incubation period ranges from several hours to two days. Most salmonella infections can be classified as stomach flu (gastroenteritis). Possible signs and symptoms include: Nausea, Vomiting, Abdominal cramps, Diarrhea, Fever, Chills, Headache, and/or Blood in the stool. Signs and symptoms of salmonella infection generally last two to seven days. Diarrhea may last up to 10 days, although it may take several months before bowels return to normal. A few varieties of salmonella bacteria result in typhoid fever, a sometimes deadly disease that is more common in developing countries.

Salmonella infection can be detected by testing a sample of your stool. However, most people have recovered from their symptoms by the time the test results return. If your doctor suspects that you have a salmonella infection in your bloodstream, he or she may suggest testing a sample of your blood for the bacteria. Because salmonella infection can be dehydrating, treatment focuses on replacing fluids and electrolytes. Severe cases may require hospitalization and fluids delivered directly into a vein (intravenous). In addition, your doctor may recommend:

- Anti-diarrheals. Medications such as loperamide (Imodium A-D) can help relieve cramping, but they may also prolong the diarrhea associated with salmonella infection.
- Antibiotics. If your doctor suspects that salmonella bacteria have entered your bloodstream, or if you have a severe case or a compromised immune system, he or she may prescribe antibiotics to kill the bacteria. Antibiotics are not of benefit in uncomplicated cases. In fact, antibiotics may prolong the period in which you carry the bacteria and can infect others, and they can increase your risk of relapse.

[Source: <https://www.rd.com/food> | Alexa Erickson | January 6, 2020 ++]

TRICARE Pharmacy Policy

Update 28: Erectile Dysfunction Treatment



Tricare would only cover the generic versions of Viagra and Cialis under a new policy passed by a Defense Health Agency (DHA) panel 8 JAN. The DHA Beneficiary Advisory Panel, which provides advice and recommendations on what Tricare should cover, voted 6 to 2 for a policy that would also require physicians to prescribe new users generic Viagra before trying generic Cialis to treat erectile dysfunction. Viagra, generic name sildenafil, tablets are for short-term use, while Cialis, or tadalafil, is considered "long-acting" and can be used to treat an enlarged prostate.

The panel's discussion was mostly about how physicians choose which drug to prescribe first. "But [physicians] said they need them both," said Charles Hostettler, a panel member representing AMSUS, an organization for military health care professionals, "and yet you're forcing them to use the short-acting first in all cases and which to me just seems to be a little bit strange." The recommendation to change Tricare's coverage came from the Department of Defense Pharmacy & Therapeutics Committee, which voted last year to modify it after determining that generic and brand-name erectile dysfunction drugs have the same efficacy.

If approved, this policy would also move erectile dysfunction drugs Stendra, Staxyn, Levitra and all their generics to Tier 4 status, meaning they won't be covered under Tricare. Under the policy change, men who are more than 40

years old will no longer need prior authorization from their doctor for Tricare to cover generic drugs to treat erectile dysfunction; those younger than 40 or who have enlarged prostates will still need authorization. The recommendation now goes to the DHA's deputy director, who will review and sign off on the new policy on behalf of the DHA director. [Source: Military.com | Dorothy Mills-Gregg | January 10, 2020 ++]

TRICARE Podcast 535

Deductibles & Catastrophic Caps - Cold Weather Safety - Flu Prevention

TRICARE Deductibles & Catastrophic Caps – Did you know your TRICARE deductible and catastrophic cap reset every January 1? As always, TRICARE costs depend on who you are as well as your health plan. Here are a few refreshers on deductibles and catastrophic caps.

- A deductible is a fixed amount you pay out of pocket for covered health care services each calendar year before TRICARE pays anything. Enrollment fees aren't included in your deductible.
- Your deductible varies by health plan. If you have TRICARE Select, your deductible depends on your sponsor's status and rank, and whether they're in Group A or Group B. There's no deductible with TRICARE Prime. But you may have to pay a deductible if you see a provider without a referral. This is the point-of-service option.
- Your deductibles reset to \$0 every January 1.

The catastrophic cap is the most you may pay out of pocket for covered TRICARE services each year. This protects you because it sets a limit for what you'll pay annually for TRICARE covered services. Each year, your TRICARE Prime or TRICARE Select enrollment fees along with all other out-of-pocket expenses count toward your catastrophic cap. This amount resets to \$0 every January 1. Once you reach your catastrophic cap, you don't pay any more of the TRICARE-allowable charge for covered services. However, you'll have to pay for services that don't fall under the catastrophic cap protection. Learn more about your deductible and catastrophic cap in the latest article, "TRICARE Deductibles and Catastrophic Caps Reset Jan. 1," at www.TRICARE.mil/news.

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Cold Weather Safety -- Did you know cold weather can cause extra strain on your heart? Outside of heart strain, cold-weather injuries such as hypothermia, frostbite, and falls can occur if you aren't careful. To help protect your health and safety, follow these tips and know your TRICARE options for getting care in case an injury occurs.

- Cold weather can affect your heart, especially if you have cardiovascular disease. Simply walking through heavy, wet snow can strain some people's heart. The best way to avoid heart strain when doing outdoor winter activities, such as shoveling snow, is to work at a slower pace and take breaks.
- Hypothermia occurs when the body's internal temperature drops due to extremely cold temperatures. The best way to prevent hypothermia is to dress in warm, loose-fitting layers of clothing and wear a water-resistant coat to keep dry.
- Fingers, toes, nose, cheeks, chin, and ears are the areas that are most prone to frostbite. So, it's important to cover these body parts in warm, dry clothing when going outside in winter.
- Walking on ice is dangerous. Many cold-weather injuries result from falls on ice-covered areas. To prevent winter falls, make sure you watch where you're walking and take your time.

For more winter weather safety tips, visit www.Health.mil/wintersafety.

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Flu Prevention -- The best way to keep the flu at bay is prevention. If you haven't been vaccinated yet, now is the time to use your TRICARE benefit and get a flu shot. You can also practice healthy habits to avoid the spread of germs. To help combat the flu, take these three actions:

1. Get your flu shot. TRICARE covers the flu vaccine. The Centers for Disease Control and Prevention recommends a yearly flu vaccine for everyone 6 months of age and older.
2. Take basic health precautions like wash your hands often, cover your mouth and nose with a tissue when coughing or sneezing, and avoid close contact with sick people.
3. If you have the flu, take antiviral drugs prescribed by your doctor.

You and your family can get the flu shot at no cost at a military hospital or clinic, a network pharmacy, or from a TRICARE-authorized provider. Call ahead to make sure the vaccine is available.

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The above is from the TRICARE Beneficiary Bulletin, an update on the latest news to help you make the best use of your TRICARE benefit. [Source: <http://www.tricare.mil/podcast> | January 3, 2020 ++]

TRICARE Podcast 536

New to TRICARE - Disaster Preparedness & Alerts - Preventive Health Care Services

New to TRICARE -- If you're newly enrolled in TRICARE health or dental coverage, you're in good company. You now have access to a global network of military and civilian providers. Let's look at your health care coverage.

- First, you must keep your information updated in the Defense Enrollment Eligibility Reporting System, or DEERS. If you don't, you may miss important information and enrollment deadlines. You can update your information in DEERS online, phone, mail, and fax. Visit www.TRICARE.mil/deers to learn more.
- Your eligibility for certain TRICARE plans depends on factors like your sponsor's status, your relationship to your sponsor, and where you live. Visit the TRICARE Plan Finder to see which plan best meets your needs at www.TRICARE.mil/planfinder. When comparing plans, you should also compare costs at TRICARE.mil/costs.
- Keep in mind that if you or your family are enrolled in a TRICARE Prime or TRICARE Select plan, you may only choose or change plans during TRICARE Open Season and following a Qualifying Life Event. Other TRICARE plans offer continuous open enrollment.
- Explore what's covered prior to getting care at www.TRICARE.mil/coveredservices. For example, TRICARE covers clinical preventive services.
- Learn more about TRICARE. Read the article, "What You Need to Know if You're New to TRICARE," at www.TRICARE.mil/news.

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Disaster Preparedness and Alerts -- Weather events and natural disasters are unpredictable. But being prepared for events like wildfires, floods, and hurricanes can help keep you and your family safe. The Federal Emergency Management Agency, or FEMA, encourages you to plan ahead for a disaster. You can do this by establishing a meeting place and evacuation route with your family. The FEMA website at www.ready.gov lists helpful tips on how to start an emergency plan. Make sure you and your family can access TRICARE in an emergency by following three steps before a disaster strikes:

- TRICARE will let you know of any emergency procedures in effect in a disaster alert. Sign up to receive disaster alerts at TRICARE.mil/subscriptions.

- Keep key medical information safe and easy to find. This includes medical records, prescription information, and your uniformed services ID card.
- Also, get your prescriptions and medical devices ready. For example, if you suspect you may need to evacuate, fill any prescription refills that are due before you leave.

There are currently emergency procedures in place due to earthquakes in Puerto Rico. For details visit www.TRICARE.mil/disaster.

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Preventive Health Care Services -- Did you make a long list of resolutions this January? Consider one in 2020: taking better care of your health. TRICARE covers many preventive health care services with no out-of-pocket costs to you. However, the rules for how and where you get preventive care depends on your sponsor’s status, where you live, and your TRICARE plan. Start off the year by scheduling annual check-ups for you and your family. TRICARE covers preventive health exams for all beneficiaries, with tailored exams for women and for children.

- For women under age 65, TRICARE covers well-woman exams. They include breast exams, pelvic exams, and Pap tests. TRICARE now covers either 2-D or 3-D mammograms annually for eligible women.
- For children from birth through age 5, TRICARE covers well-child exams. There are no out-of-pocket costs when care is provided by a TRICARE network provider.

TRICARE covers age-appropriate vaccines and immunizations as recommended by the Centers for Disease Control and Prevention. You can schedule covered vaccines from any TRICARE-authorized provider at no cost. Some TRICARE retail network pharmacies also provide vaccinations. In addition to routine visits with your health care provider, making a commitment to good nutrition and regular exercise will help you stay healthy in 2020. Learn more about your preventive health care benefits at www.TRICARE.mil/preventive. Also, check out the latest article, “New Year, New You: Stay Healthy With TRICARE in 2020.”

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The above is from the TRICARE Beneficiary Bulletin, an update on the latest news to help you make the best use of your TRICARE benefit. [Source: <http://www.tricare.mil/podcast> | January 13, 2020 ++]

*** Finances ***



Social Security Changes

Adjustments Scheduled for 2020

Social Security recipients likely already know that their benefits get a bump almost every year to counteract the effect of inflation. But that cost-of-living adjustment is just one of several annual tweaks to the Social Security system. These tweaks impact both retirees and workers. Following is a look at what will change for 2020.

1. Benefits will rise a smidge.

Social Security recipients will see their monthly payments rise by a cost-of-living adjustment of 1.6%. That translates to an extra \$24 a month, based on the average Social Security retirement payment. Many retirees won’t see that much

extra Social Security income in 2020, however. It will be offset in part by higher Medicare premiums and deductibles. For some folks, the extra income may also be offset by higher taxes.

2. The earnings limit for working retirees will edge up.

If you claim Social Security retirement benefits before reaching your full retirement age (FRA) and also continue working, the Social Security Administration will withhold some of your benefits if your income exceeds what's known as the earnings limit. (There is no penalty for earnings made while working after you reach FRA.) This earnings limit increases annually as the national average wage index increases. For 2020, it will rise:

- From \$17,640 to \$18,240 if you will reach full retirement age after 2020
- From \$46,920 to \$48,600 if you will reach full retirement age in 2020

However, the SSA website notes that any benefits withheld for this reason are not “lost.” Once you reach your full retirement age, your monthly benefit is increased permanently to account for months in which benefits were withheld. To learn more about this topic, check out “The [Danger of Working](#) While Collecting Social Security.”

3. The tax cap on workers' income will increase.

Here's another annual adjustment based on the increase in average wages: The maximum amount of a worker's income that is subject to Social Security payroll taxes will rise from \$132,900 this year to \$137,700 next year. So, if you're fortunate enough to earn more than \$137,700 next year, you won't owe Social Security taxes on every dollar you earn. The Social Security payroll tax rate paid by workers (which supports the benefits workers later receive) will remain the same in the new year: 6.2% for employees (employers pay another 6.2%) and 12.4% for the self-employed.

4. The earnings required for one credit will increase.

Not everyone is eligible for retirement benefits. “To receive Social Security retirement benefits, most people need to accumulate at least 40 ‘credits’ during their working lifetime, according to the U.S. Social Security Administration (SSA). Currently, you can earn up to four credits per year if you work and pay Social Security taxes.” The earnings required for you to receive one Social Security credit, also known as one-quarter of coverage, will rise from \$1,360 this year to \$1,410 in the new year.

[Source: MoneyTalksNews | Karla Bowsher | December 31, 2019 ++]

SSA COLA

Update 05: This Really Happened — a 77% Social Security COLA!

Social Security beneficiaries are receiving a cost-of-living adjustment of just 1.6% this year. For many, that won't be enough to keep up with healthcare costs, let alone items like homeowners and auto insurance or rising real estate taxes. That leaves retirees digging deeper into savings — if they have any, or — going deeper into debt. The more you learn about the COLA, however, the more the anemic annual boosts of our past decade raise questions. The very first COLA ever paid was 77%. No, you read that right, this is not a typo. It became payable in 1950 and a full ten years after Ida May Fuller received the nation's very first Social Security benefit check for \$22.54 — the equivalent of \$420.90 today.

From 1950 through 1974, Social Security benefits were increased 11 times through separate pieces of ad hoc legislation at irregular intervals. The increases varied just as they do today but averaged 8% per year over the 24-year period although there were long lapses between COLAs during some periods. COLAs became automatic with the one that became payable on July 1, 1975 and continued to average 8.7% annually from 1975 through 1982. Then the bottom seemed to fall out. From 1983 through 2009 COLAs averaged 3.1%. From 2010 to 2020 COLAs have averaged just 1.4%.

Do you see a pattern here? We may never know the full details, but what we do know is that our government economists at the Bureau of Labor Statistics changed the way they measured price changes. The Consumer Price Index

Handbook of the Bureau of Labor Statistics contains an extensive list of ongoing changes to their methodology in measuring price change. Since the 1980s the BLS has implemented 30 changes, and many of those changes reduce the measured rate of inflation. That in turn means slower growth in Social Security benefits over time. Not only has our government changed the way inflation is measured, and thus reduced Social Security benefits, they accomplished this without a single vote by our elected lawmakers. Congress has ducked their responsibility by leaving the job of tinkering with the math to unelected economists, leaving voters with no opportunity to hold anyone accountable.

Government economists not only changed the math, they changed the underlying concept of the consumer price index (CPI) itself. While the CPI formerly measured price changes of a fixed market basket of items from one period to the next (a concept that has been in use since the early 1700s), today the Bureau of Labor Statistics uses formulas more consistent with a theoretical cost-of-living (COLI) concept. And because it is theoretical, it uses estimates and produces data (in at least one of the indexes) that is subject to two revisions.

The Social Security COLA was intended to protect the buying power of older Americans who for the most part, are no longer in the workforce. The majority of retirees depend on Social Security for at least half of their income, meaning that Social Security benefits tend to be spent immediately on essentials like housing, food and healthcare returning billions of dollars to the U.S. economy every year. Social Security can be changed in two ways — but benefit cuts don't have to be inevitable. Increasing payroll taxes is the other avenue. How can we strengthen Social Security's financing structure? Take TSCL's 2020 Senior Survey at <https://seniorsleague.org/2020-senior-survey> and let them know what you think about some of the leading proposals. [Source: The Senior Citizens League | January 2020 ++]

Homeowners Insurance

Update 15: Things You Probably Didn't Know Were Covered

Most people understand that their homeowners insurance will pay if a tree lands on the roof or the garage goes up in flames. However, many policies cover a number of other losses that you may not expect. Of course, it goes without saying that every insurer is different, and you should check your policy to determine what coverage you have specifically. When you do, you may find you have coverage for the following things.

1. Terrorist attack

As long as the U.S. isn't at war, your insurance company should pay for any damages caused by a terrorist attack. Most insurers specifically exclude acts of war, but an isolated event that results in fire, smoke or other damage to your property should be covered under your policy's standard provisions.

2. Dorm room contents

When your son or daughter moves to college, your home insurance may protect their possessions as well. But that's only if they live in a dorm, as we detail in "3 Types of Insurance Every College Student Needs."

3. Your lawn and landscaping

If someone drives over your yard and tears up the grass, your insurer may pay to fix the damage, says Mike Crowe, founder and CEO of Clearurance, an insurance review and ratings website. That's because trees, plants and shrubs are generally covered by standard homeowner insurance policies. The Insurance Information Institute says plants are generally covered up to \$500 per item as long as they are not diseased and have been properly maintained.

4. Marijuana plants

Surprise. Marijuana plants may also be covered by your insurance policy. Depending on the insurance company and the state law, marijuana plants may be treated the same as shrubs and other plants, Crowe says.

See Also:

5. Stolen goods

Speaking of personal possessions, if you have belongings stolen far from home — anywhere — a standard homeowners policy should cover the loss. “People assume if something is stolen from their car, it’s covered by car insurance,” Crowe says. “It’s not.” Instead, it’s a home insurance policy that will pay.

6. Falling objects

A Michigan couple were surprised to find a Samsung satellite had landed in their yard this past October. While it didn’t cause any damage, if it had hit their house, their insurer likely would have picked up the tab for any repairs. The Insurance Information Institute says falling objects — from satellites to asteroids — are covered under most standard homeowners policies.

7. Drones

Speaking of falling objects, your homeowners policy could come to the rescue if your drone drops from the sky and hits someone. The liability portion of your plan may provide coverage if you injure someone or are sued for inadvertently invading another’s privacy, the Insurance Information Institute says. However, don’t plan on your home insurance paying if you are purposely trying to peep on people.

8. Items in storage

You might assume your home insurance only covers the items in your house. However, standard policies typically cover your personal belongings, including things that are kept offsite, such as in a storage locker or unit. Some companies limit coverage for items in storage to 10% of your personal belongings coverage, according to the Insurance Information Institute.

9. Spoiled food

If your power goes out and all the food in your freezer goes bad, you may be in luck. Insurance companies may replace food that spoils as the result of a covered peril, Allstate notes. That means that if a tree takes out a power line, you may be able to file a claim for rotten food. But if the electricity gets turned off for nonpayment, you won’t see a dime.

10. Unauthorized credit card purchases

Given that many credit cards offer cardholders zero liability for fraud, your homeowners insurance coverage for unauthorized purchases may not be necessary. Still, it’s nice to know your insurer will pay up to \$500 to cover unauthorized credit card charges, according to the Insurance Information Institute.

[Source: MoneyTalksNews | Maryalene LaPonsie | December 23, 2019 ++]

COLA vs. Pay Raise

Why the 2020 Federal Rate Differences

Federal workers this month are getting a 3.1% total pay and federal-postal retirees are getting a 1.6% cost of living adjustment. Both the raise and the COLA are the largest in years, yet why the difference? *Short answer:* Different yardsticks — fed pay raises are a political/financial decision made each year by Congress and the White House. COLAs are based on the rate of inflation as measured by the Consumer Price Index-W. While it’s been that way for decades, many people, many of them retirees, think it’s the wrong measurement. Consider this:

Back in 1999, American taxpayers lost \$125 million when the Mars Climate Orbiter, designed to orbit the climate of Mars, hence the name, missed its target. The reason was, although superbly engineered, one group of designers and builders at an aircraft company in Denver did their calculations in the English units (pound-seconds) while those designing the MCO at the Jet Propulsion Lab in California used the metric system. Oops!

Ken Thomas, president of the National Active and Retired Federal Employees, thinks Uncle Sam is doing the same thing with the lifetime annuities of active and retired civil servants. It’s not working, Thomas says, because the government is using the wrong measuring tool to track inflation. Because of that, he says, cost of living adjustments

for retirees are always off-target, like the Mars Climate Orbiter. Except that retirees collectively lose more because they fall further behind inflation each time they get a COLA. And he says it would be so easy to fix, that two votes in the House and Senate would do the trick.

Most current federal retirees left government under the Civil Service Retirement System which was phased out in the 1980s. The CSRS plan provides a more generous retirement benefit, to which workers contribute, based on salary and length of service than the Federal Employees Retirement System program that replaced it. Most current federal-postal workers will retire under the FERS program. CSRS retirees get a full cost of living adjustment in January to keep pace with inflation. In January 2020, both CSRS and FERS retirees, as well as people who get Social Security, will get a 1.6% COLA. But because of a diet-COLA feature of their system, those under FERS get smaller catch-ups if inflation exceeds 2%. For example this year the COLA for CSRS retirees, people under Social Security and military retirees was 2.9%. But because of diet COLA provision FERS retirees age 62 and older got only 2%. Those under 62 years old got nothing.

When Congress setup the Civil Service Retirement System it eventually provided inflation protection, as in a COLA if necessary each January to keep pace with inflation. And it does, up to a point. But NARFE, and groups and unions representing rank-and-file feds, managers and professionals say that the government is using the wrong measurement. They say it consistently year-after-year underestimates the impact on federal retirees and older people in January. Currently the Bureau of Labor Statistics used the CPI-W. It measures changes in the cost of various products, goods and services used by working age people on a city-by-city, monthly basis. The amount of the January COLA is based on the rise, if any, of the CPI-W from the third quarter of the current year over the third quarter of the previous year. That produced the 2020 COLA.

But opponents of the system say the BLS is using the wrong orbiter to measure inflation's impact on older people here on Planet Earth, which is where all of them live. Seniors often spend less on goods and services they used when working, but lots more on health care related items which are measured by the CPI-E (E for elderly). What's the difference? The next COLA for retirees will be 1.6%. But health insurance premiums, on average, are going up 5.6% in 2020. In many cases the older retirees will be spending more for health-related things and services than younger workers and may feel they need higher-priced health plans to meet their needs.

The fix is simple — sort of. Congress has before it a bill called the **Fair COLA for Senior Act (H.R.1533)**. If enacted future COLAs would be based on the CPI-E rather the CPI-W. Doesn't sound like a big difference. But it's meters versus miles. Ask the Denver company that built its half of the Mars Orbiter using standard measurements while their colleagues at the JPL were using metrics. [Source: Federal News Network | Mike Causey | January 3, 2020 ++]

Post-Holiday Phishing Scam

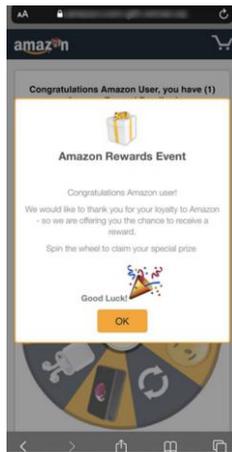
Phony Reward Point Redemptions

The holiday shopping season may be over, but scammers aren't calling it quits yet. Con artists are sending phony emails and texts that look like messages from major retailers instructing you to redeem the reward points accrued during your holiday shopping. Just hit delete on these phishing messages!

How the Scam Works

- You receive an unsolicited email or text message that appears to be from a major retailer. (BBB has seen scammers use the names of Amazon, Kohls and Costco... but any company can be spoofed.) The subject line reads something like "You Have a New Reward to Claim!"
- You open the message, and it looks real. There's the company logo, colors, and a link to claim the reward points or gift from your recent holiday shopping. As curious as you may be, don't fall for it. Scammers hide

malware in these email links or attachments. When you click, they can gain access to your computer and steal your sensitive personal information.



Phony Amazon Rewards

Tips to Spot an Email Phishing Scam:

- Never click on links or download attachments from unknown emails. Out-of-the-blue emails are often an attempt to download malware to your computer and/or steal your personal information.
- Don't take unsolicited emails at face value. Scammers often send out mass emails that contain little or no personal information. If the email doesn't mention you by name or include any personal information, be wary.
- Hover on links to see their destination. Before clicking, place your mouse over links to discover their true destination.
- Go to the source. Whenever possible, use the customer service information that was provided to you when you made your purchase, rather than searching online.

For More Information

Learn more about phishing scams at BBB.org/PhishingScam. If you've gotten a phony email from a retailer, help others avoid the same pitfall by filing a scam report at www.BBB.org/ScamTracker.

[Source: BBB Scam Alert | January 3, 2020 ++]

Jury Duty Scam

Update 01: Preys on Law Enforcement Fears

Some scams just don't quit! Despite running for years, this con still successfully uses threatening calls and intimidating emails to scare people into paying up. Jury duty scams have staying power because they prey on a fear of law enforcement.

How the Scam Works:

- You answer the phone, and it's someone claiming to be from the local law enforcement or judicial agency. The caller tells you that you've missed a jury duty summons and could be arrested. They may even claim that a warrant has already been issued. The caller may appear to be very legitimate -- with caller ID showing a police phone number and an official-sounding voice on the phone.
- The scammer tells you that, fortunately, you can avoid arrest by paying a fine. The scammer asks you to wire money or put cash on a prepaid debit card and share the PIN. Of course, the fine -- and the jury duty summons -- were never real.

- Like most long-running scams, jury duty cons have a few versions, not all of which ask you for money outright. In some cases, the jury duty scam may be used to trick you into providing sensitive, personal information that can be used for identity theft. In another version, scammers use email and allegedly attach your “jury summons” to the message. The file is really malware and downloading it will infect your computer.

Tips to Avoid a Jury Duty Scam:

- Be skeptical of email and unsolicited calls. Courts do not typically summon people via email, text message or phone. Unless you are involved in a case and have opted into receiving other types of communications, courts normally communicate through mail.
- Pick up the phone. If you ever question whether you need to appear in court, call the appropriate judicial agency. Don’t call the number in the email, as that will likely just lead you to the scammer. Look for official websites in your jurisdiction... and be on the lookout for fake websites, too.
- Ignore calls for immediate action. Scammers try to get you to act before you think by creating a sense of urgency. Don’t fall for it.
- Beware of requests to pay via wire transfer or prepaid debit card (such as MoneyPak, iTunes or similar cards). These are almost always a sign of fraud.
- Ask someone for help. BBB’s research shows that asking someone else is an important factor in reducing the chance of being scammed. Ask a family member or friend, “Does this sound right?”

For More Information

Learn more about phishing scams at www.BBB.org/PhishingScam. If you’ve gotten a phony email from a retailer, help others avoid the same pitfall by filing a scam report at www.BBB.org/ScamTracker. BBB’s research on why some people are more susceptible to scams is available at www.BBB.org/ExposedToScams.

[Source: BBB Scam Alerts | January 10, 2020 ++]

State Tax Burden for Washington Retired Vets

As JAN 2020

Many veterans 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 as a VA rated disabled veteran or military retiree if you retire in Washington state.

Sales Taxes

State Sales Tax: 6.5% (food and prescription drugs exempt). The average WA sales tax after local surtaxes is 8.89%. Counties and cities can charge an additional local sales tax of up to 3.1%, for a maximum possible combined sales tax of 9.6%. Washington has 726 special sales tax jurisdictions with local sales taxes in addition to the state sales tax.

Gasoline Tax: 67.8 cents/gallon (Includes all taxes)

Diesel Fuel Tax: 73.8 cents/gallon (Includes all taxes)

Cigarette Tax: \$3.025/pack of 20

Personal Income Taxes

Washington state does not have a personal or corporate income tax. However, people or businesses that engage in business in Washington are subject to business and occupation (B&O) and/or public utility tax. The business’s gross

receipts determine the amount of tax they are required to pay. Businesses that make retail sales or provide retail services may be required to collect and submit retail sales tax. Retirement Income is not taxed.

Property Taxes

State law requires that county assessors appraise all property at 100 percent of its true and fair market value in money, according to the highest and best use of the property. Fair market value or true value is the amount that a willing and unobligated buyer is willing to pay a willing and unobligated seller. The county assessor values real property using one or more of three professional appraisal methods. You may appeal your property's assessment to the county board of equalization in the county where your property is located.

Real property includes land, improvements to land, structures, and certain equipment affixed to structures. Personal property includes furnishings, machinery and equipment, fixtures, supplies, and tools. The primary characteristic of personal property is its mobility. Personal property tax applies to personal property used when conducting business or to other personal property not exempted by law. Most personal property owned by individuals is specifically exempt. However, if these items are used in a business, personal property tax applies. For more information on how your residential property is assessed and valued see [A Homeowner's Guide to Property Taxes](#) (pdf).

Property taxes make up at least 9.4 percent of the state's General Fund, which supports public services for Washington residents. [Revenue at a Glance](#) provides more detail on property taxes and how they help fund these services. The Washington Department of Revenue does not collect property tax. They oversee the administration of property taxes at state and local levels. Property taxes account for about 30% of Washington's total state and local taxes. Properties are appraised at 100% of fair market value. A property tax exemption program is available for persons age 61 or older, or persons unable to work due to a physical disability. The property, which can include up to an acre of land, must be owner/buyer occupied.

The state offers a senior property tax exemption program for those whose household income does not exceed a designated amount. If your annual income for the application year does not exceed the designated amount your home will be exempt from all excess and special levies approved by voters. For senior exemptions and deferrals, refer to <http://dor.wa.gov/Content/FindTaxesAndRates/PropertyTax/IncentivePrograms.aspx>.

The state's tax deferral program works in conjunction with the exemption program. A senior citizen or disabled person may defer property taxes or special assessments on their residence if they meet certain age, disability, ownership, occupancy and income requirements. The state pays the taxes on behalf of the claimant and files a lien on the property to indicate the state has an interest in the property. The deferred taxes must be repaid to the state plus 5% interest when the owner dies, sells or moves from the home, or doesn't have sufficient equity in the property. Qualified people may participate in both or one of these programs. For more information again refer to the website <http://dor.wa.gov/Content/FindTaxesAndRates/PropertyTax/IncentivePrograms.aspx>.

You should pay your property taxes directly to the county treasurer's office where your property is located. Contact data for Washington's 39 counties County assessor and treasurer websites is available at <https://dor.wa.gov/find-taxes-rates/property-tax/county-assessor-and-treasurer-websites>. For more details on property taxes, call 800-647-7706.

Inheritance and Estate Taxes

The estate tax is a tax on the right to transfer property at the time of death. Washington replaced the inheritance tax in 1982 with an estate tax. Effective January 1, 2009 the Washington State filing threshold became different from the federal filing threshold for completing the estate tax return. A Washington decedent or a non-resident decedent who owns property in Washington State may owe estate tax depending on the value of their estate. Estate tax forms, rules and information are specific to the date of death. For 2019 the exclusion level was \$2,193,000. For dates of death of December 31, 2013, and prior, [email](#) or call 360-534-1503, option 2. For deaths after JAN 1, 2014 refer to <https://dor.wa.gov/find-taxes-rates/other-taxes/deaths-or-after-january-1-2014>

Other Tax Rates

For information on other Washington state taxes refer to <https://dor.wa.gov/find-taxes-rates/other-taxes>. 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>.

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Visit the Washington Department of Revenue site <http://dor.wa.gov/Content/Home/Default.aspx> or call 800-647-7706 for further information. [Source: <http://www.retirementliving.com> & <http://www.tax-rates.org/washington/property-tax> | January 2020 ++]

* General Interest *



Notes of Interest

January 01 thru 15, 2020

- **Urgent Care.** At <https://video.foxnews.com/v/6120330432001#sp=show-clips> VA Secretary Robert Wilkie tells 'Fox & Friends' that urgent care is now open to veterans so people don't have to drive upwards of hundreds of miles to go to a VA hospital.
- **Captain Herbert A. Zoehrer.** USS Midway former aviator at <https://youtu.be/8oSvKOqrd4s> tells his story of the shortest flight of his career which was over in “10 or 15 seconds” and his chasing of enemy submarines during the Cuban Missile Crisis.
- **Drug Prices.** Harvard Global Health Institute and the London School of Economics researchers found that among the 11 countries studied, the United States was the highest pharmaceutical spender in 2016 at \$1,443 per person. That same year, Canada’s total spending reached \$613 per person. Other research shows the U.S. spending on prescription drugs outpaces other high-income countries as well. Also, after discounts to the list price were given to insurers, Bloomberg News found, seven top-selling name brand drugs cost more in the United States than in other high-income nations studied.
- **Fireman.** Although firefighters are generally well-respected for their commitment, the profession doesn’t always pay well. The average annual wage for firefighters was \$53,240 as of 2018, the most recent year for which this data is available from the U.S. Bureau of Labor Statistics. To see what they earn in your state go to <https://www.moneytalksnews.com/slideshows/heres-how-much-money-firefighters-make-in-every-state/?all>.
- **Afghan Casualties.** Soldiers accounted for 14 of the 2019 Defense Department’s 17 hostile deaths in Afghanistan, according to Pentagon figures as of 23 DEC. The other three were Marines. Of the more than 180 service members wounded in Afghanistan this year, 173 were soldiers. In 2018, there were 13 hostile deaths in Afghanistan, 12 of whom were soldiers, in 2017, there were 11 hostile deaths, all of whom were soldiers, and in 2016, there were nine hostile deaths, all of whom were again soldiers. In 2015, there were 10 hostile deaths — two were soldiers and the rest were airmen.
- **Army Recruitment.** The Army met its goal in signing up more than 68,000 active-duty soldiers before the end of fiscal year 2019. And it’s on track to make roughly the same number for 2020 as it pushes to grow to a 500,000-strong active-duty force by the end of the next decade.

- **VA Loans.** Limits on VA-backed home loans for qualified buyers were eliminated on Jan. 1, 2020 — due to changes in the Blue Water Navy Vietnam Veterans Act of 2019 passed in June.
- **USMC Base Security.** The Marine Corps has changed concealed carry rules to allow qualified active Marine law enforcement personnel to conceal carry on base while off-duty, according to a new Marine message.
- **ARARTS Program.** Former Reserve pilots are being offered bonuses of up to \$30,000 by the Marine Corps for rejoining the Reserve for three years or up to \$20,000 for signing up for two years of service. The Active Reserve Aviator Return to Service Program is specifically looking for pilots who can fly certain types of fixed-wing, rotary or tiltrotor aircraft, particularly those with experience flying F/A-18 Hornets, MV-22B Ospreys or KC-130 Hercules, among other aircraft.
- **Credit Card Fees.** For 2020, federal law allowed the threshold for the following credit card fees increase: First late payment penalty: \$29 — up from \$28 in 2019. Subsequent late payment penalty: \$40 — up from \$39 in 2019. These changes took effect Jan. 1.
- **Middle East Deployment.** No cellphones, laptops were allowed to go with Army 82nd paratroopers deploying to Middle East. The move was made to ensure operational security was maintained during the emergency deployment, which saw 3,500 paratroopers from 1st Brigade Combat Team begin to fly out of Fort Bragg, North Carolina, to Ali Al Salem Air Base, Kuwait, over the first week of January.
- **SSA Scam Warning.** Scammers expanded their tactics to kick off 2020 and the Social Security Administration continues to be a top target. SSA's inspector general is warning of a new scam where bad actors are not only calling citizens, but sending fake emails and letters on SSA letterhead. The IG said it has received several phone calls detailing this new threat. SSA reminded citizens the agency will never threaten them, require payments in a retail gift card or wire transfer or send official letters with personal information.
- **Border Wall.** Court decisions are clearing the way for the Trump Administration to divert \$3.6 billion in military construction spending for the president's proposed border wall. On Wednesday, the Fifth Circuit Court of Appeals lifted a stay that had been blocking the administration from redirecting DoD funds to build the wall. A day later, a district court judge lifted a separate order that barred construction of a privately-funded section of wall in south Texas. The appeals court ruling lets the administration move ahead with 11 projects in California, Arizona, New Mexico and Texas.
- **Federal Employee Retirement.** December was a quiet month for federal employees filing for retirement. Just 5,200 federal employees retired last month. The Office of Personnel Management was able to drop its backlog of pending retirement claims in December. The backlog sat at its lowest point of 2019, with just under 17,000 pending claims. But it's taking OPM longer to process retirement applications. The average claim took 62 days to handle, the longest since November 2018.
- **Jobs.** The unemployment rate remained at the 50-year low level of 3.5% in December. This is the 22nd consecutive month of the unemployment rate being at or below 4%. Among the major worker groups, the unemployment rates for adult men (3.1 percent), adult women (3.2 percent), teenagers (12.6 percent), Whites (3.2 percent), Blacks (5.9 percent), Asians (2.5 percent), and Hispanics (4.2 percent) showed little or no change in December.
- **Queen Elizabeth II's purse.** Used to send secret messages to her staff. These signals help her get out of conversations at any time she pleases. If the Queen moves her classic handbag from its normal spot on her left arm to her right arm while she's talking with someone, her handlers know that she wants to wrap it up. Putting her bag on the floor is a sign that she needs to be saved from an uncomfortable encounter ASAP. If she's at dinner and places it on the table, that means she wants to end the event in the next five minutes.
- **DoD.** The Defense Department has pulled down public availability of records from discharge review boards which has raised a lot of hackles among veterans. Now The National Veterans Legal Services Program has called the move illegal and has filed a lawsuit. In a 9 minute audio report NVLSP Executive Director Bart Stichman talks about what these records provided and why they should not have been removed from veteran access at <https://www.podcastone.com/episode/Veterans-legal-services-group-sues-over-removal-of-public-troop-records>.

[Source: Various | January 15, 2020 ++]

U.S. Embassy Manila, Philippines

Natural Disaster Alert - Volcano



Location: Vicinity of Taal Volcano Island and high-risk barangays of Agoncillo and Laurel, Batangas, Philippines

Event: In light of intensified eruptive activity, the Philippine Institute of Volcanology and Seismology (PHIVOLCS) raised Taal Volcano's alert status from Alert Level 3 (magmatic unrest) to **ALERT LEVEL 4** (hazardous eruption imminent). This means that hazardous explosive eruption is possible within hours to days.

Actions to Take:

- U.S. citizens in the Philippines should exercise caution if contemplating travel in the vicinity of the Taal Volcano Island and surrounding areas.
- DOST-PHIVOLCS strongly reiterates, "total evacuation of Taal Volcano Island and additional evacuation of areas at high risk to pyroclastic density currents and volcanic tsunami within a 14-kilometer radius from Taal Main Crater."
- Areas in the general north of Taal Volcano are advised to guard against the effects of heavy and prolonged ashfall.
- Be vigilant and, according to PHIVOLCS, "the public is reminded that the entire Volcano Island is a Permanent Danger Zone, and entry into the island as well as high-risk barangays of Agoncillo and Laurel is prohibited."
- Those planning travel to the Taal volcano region are encouraged to monitor current conditions, maintain active awareness of local conditions, and especially refrain from entering the Permanent Danger Zone and high-risk barangays.
- Continue to monitor local media as well as the PHIVOLCS web site for updates on the situation <http://www.phivolcs.dost.gov.ph/>.

Assistance:

- U.S. Embassy in the Philippines +63 (2) 5301-2000
- ACSInfoManila@state.gov
- State Department – Consular Affairs 888-407-4747 or 202-501-4444
- [Philippines Country Information](#)
- Enroll in the [Smart Traveler Enrollment Program](#) (STEP) to receive security updates
- Follow us on [Twitter](#) and [Facebook](#)

[Source: <https://ph.usembassy.gov/natural-disaster-alert> | January 12, 2020 ++]

Gallup Decade in Review

2010 to 2019 Public Opinion Changes

A review of Gallup analyses over the past decade reveals that the years from 2010 to 2019 bore witness to key revolutionary changes in public opinion, along with some persistent trends and concerns, as well as striking moments and lasting effects. Here are the changes, issues and moments in public opinion that Gallup editors think will long be associated with the 2010s:

Revolutionary Changes

Same-Sex Marriage: When the decade began, only a handful of states had legalized gay marriage and most Americans opposed it. But in 2011, Gallup recorded majority support for same-sex marriage for the first time. Americans continued to warm to gay marriage as the decade progressed, with support reaching the 60% mark just before the Supreme Court's 2015 Obergefell v. Hodges decision made gay marriage legal nationwide. In the final years of the decade, support has ranged between 61% and 67%. The wholesale change in public attitudes about gay marriage over such a short time span represents one of Gallup's most compelling public opinion trends.

Marijuana: Much like the issue of same-sex marriage, Americans' views on legalizing marijuana have vastly changed, with the sharpest shift in support for legalization occurring in the past 10 years. In 2010, when no states had yet legalized recreational marijuana, 46% of U.S. adults supported legalizing it, but that grew to about two-thirds in four consecutive readings by decade's end. Today, 11 states and Washington, D.C., have legalized recreational use of marijuana, while many other states have decriminalized it or passed laws allowing for medical marijuana use.

The U.S. Economy: That two in three Americans say it is a good time to find a quality job in the U.S. at the conclusion of 2019 shows how far U.S. consumers have come from the economic despair Gallup found as the decade began. In January 2010, just 9% of Americans said it was a good time to find a quality job. And for the better part of the decade, Gallup's Economic Confidence Index was in negative territory as Americans continued to reel from the effects of the global economic crisis and the U.S. recession. President Donald Trump's inauguration in 2017 marked an important turning point as Americans again became net-positive about the economy and jobs in particular. But Gallup has consistently found that most Americans view the country's current and future economic health through a political lens.

Political Polarization: Republicans and Democrats have become more polarized in their views on issues and evaluations of politicians. This polarizing trend is not unique to the end of the decade, but it's one that has accelerated over the past 10 years. A 2017 Gallup analysis found that Barack Obama's presidential approval ratings had been the most politically polarized ratings for any president in Gallup's history -- and President Donald Trump's are on pace to be even more polarized. But Republicans and Democrats diverge even on questions that are seemingly apolitical, including how the U.S. economy is doing and how they rate their personal healthcare situation, for example. This will have enormous consequences not just for the coming presidential election, but for how U.S. politics navigate beyond it.

Religion: Religious faith is prominent in the U.S., but much less so than in previous decades. Church membership and attendance -- as well as frequency of attendance -- are all down to record lows. Americans have become less likely to believe in God. Meanwhile, more than one in five Americans (21%) now describe themselves as having no religion, a sizable jump from 14% in 2010 and 8% in 1999. In addition to the decline in Americans identifying with any religion, some of the largest changes within religious groups have occurred among U.S. Catholics, of whom weekly church attendance has nearly halved since the beginning of the millennium, and whose confidence in organized religion and the clergy have fallen.

Persistent Issues and Concerns

Gun Violence: Many of the deadliest mass shootings in U.S. history have occurred during the past decade, and Americans have often reacted to these events with alarm. In 2012, U.S. parents' worries about their children's safety rose after the tragic shooting at Sandy Hook Elementary School in Newtown, Connecticut, which marked one of the least happy days in 2012, according to Americans' self-reports of their emotions. In March 2018, less than a month after the Parkland, Florida, school shooting, Americans' mentions of guns as the nation's top problem spiked to a record high. But much like the cyclical political conversations on gun control, these fears typically decline until the next event drives them back up again. How Americans interpret deadly shootings is also divisive, as Republicans and Democrats attribute gun violence to different root problems. Majorities of Americans have generally reported wanting stricter gun control over time, and violent events have often pushed this desire to relative heights.

Terrorism: Americans' worries about terrorism in the 2010s were somewhat of a holdover from the prior decade, which was largely defined and shaped by the attacks that took place on Sept. 11, 2001. Much like gun violence,

Americans' worries about terrorism ebb and flow in reaction to terrorism in the U.S. and abroad. The 2013 Boston Marathon bombings prompted a double-digit increase in the percentage of Americans who believed another terrorist attack was coming. After the 2015 terrorist attacks in Paris, Americans' concerns about the possibility of future terrorist attacks rose the most among a list of 15 problems facing the U.S. Fears about terrorism affect Americans' behavior, as was evident in 2017, when a record-high percentage of U.S. adults reported they were less likely to attend large events because of terrorist attacks. As recently as October 2019, nearly half of Americans said they worried that they or a family member could be a victim of terrorism.

Race Relations: Whites and blacks alike are less positive in their assessments of race relations in the U.S. than they were in the previous decade. The final years of the 2010s revealed heightened worries about race relations compared with previous measures Gallup has taken since 2001. The election of Obama, the first black U.S. president, may have signaled a major achievement in race relations, but Americans' views of race relations became less harmonious during Obama's time in office -- and have further soured during Trump's presidency.

Striking Moments

The 2016 Election: In 2016, for only the fourth time in U.S. history, the president elected by the Electoral College did not win the popular vote. Still, the event was singular in that the two major-party candidates had the worst favorable ratings Gallup has ever recorded leading up to an election, and Americans rated the tone of the election more negatively than elections in the past. Despite then-candidate Trump's low ratings on personality and leadership qualities, the constant news about his opponent Hillary Clinton's email server scandal hurt her. Trump's attacks on the media came at a time when confidence in the media had dipped to new lows -- especially among members of his own party.

Osama bin Laden: Al-Qaeda founder Osama bin Laden had been "Public Enemy No. 1" even before the attacks on 9/11. His eluding capture had dogged then-President George W. Bush, who was in the first year of his presidency when the U.S. experienced the deadliest terrorist attack in its history. Nearly a decade after 9/11, bin Laden was killed in Pakistan by a U.S. special operations team. The raid was well received in the U.S., with 93% approving of the military action and about eight in 10 saying it was extremely or very important to the U.S. that bin Laden was killed (though the operation was not well-received in Pakistan, where it occurred). Americans gave most credit to the U.S. military and the CIA. Obama received a six-percentage-point bump in his approval ratings -- a rare "rally event" for him.

Government Shutdowns: The federal government shut down three times over the decade. While one was relatively brief (Jan. 20-22, 2018), the other two lasted weeks -- with the most recent shutdown that ended in January 2019 being the longest in U.S. history. Gallup has found that these events affected Americans' views of the country in various ways. In 2013, Congress approval dropped to one of its lowest levels in history, while satisfaction with government reached a new low. Meanwhile, Americans' confidence in the U.S. economy -- which had been slowly rebuilding after the global economic crisis -- plummeted as the shutdown wore on.

The Republican Party's image took a hit as a result of GOP members of Congress' role in the shutdown. Obama's approval ratings mostly held steady during the shutdown of 2013, as did Trump's ratings during the shutdown earlier this year. During the most recent shutdown, mentions of the government and poor leadership as the top U.S. problem spiked, while trust in the government to handle domestic and international issues each dropped to record lows.

The Tea Party: The seeds of the Tea Party movement took root in 2009 and early 2010 when fiscal conservatives opposed "excessive" federal spending and government bailouts -- and later, when conservative Republicans were outraged over various proposals from the new Democratic-controlled Congress and White House, particularly the Affordable Care Act. But the movement bore fruit in 2010, when 87 Republicans were newly elected to Congress, many under the umbrella of the Tea Party movement -- representing one of the GOP's greatest electoral victories in generations. In 2010, Gallup found that more than a quarter of Americans (28%) and about half of Republicans (49%) were supporters of the Tea Party movement, with strong support among whites and conservatives. Support for the movement waned after peaking at 32% following its successes in the 2010 elections. By 2015 -- the last time Gallup posed the question -- support was about half that level (17%).

Occupy Wall Street: Not long after the Tea Party movement's successes in 2010, the Occupy Wall Street movement was born when protesters in New York City's Zuccotti Park remained there for two months in the fall of 2011. This prompted national and international re-creations of the protest and ignited larger conversations about wealth inequality in the U.S., particularly the top 1% of income earners. Americans were slightly more approving than disapproving of the movement's goals and the way the protests were being conducted, but most were unfamiliar with the Occupy Wall Street movement. Occupy Wall Street likely tapped into frustrations that were present that year, as Americans' satisfaction with opportunities for people to get ahead by working hard had dipped to a new low (55%) in 2011 and a record-low 44% said it was likely that U.S. youth would have better lives than their parents. Many of the movement's messages have resonated with the current presidential campaigns of Sens. Bernie Sanders and Elizabeth Warren, whose platforms are largely centered on income inequality.

Lasting Effects

The Affordable Care Act (ACA): One of the decade's most significant pieces of legislation was passed at its beginning. Signed by Obama in March 2010, the ACA successfully reduced the percentage of uninsured Americans. The bill, which became widely known as "Obamacare," was controversial, with 45% of Americans supporting it and 48% opposing just weeks before its passage. Since then, public opinion has continued to tilt against the law, averaging 46% approval and 49% disapproval since 2012, based on annual averages. Americans were most negative about the ACA as the ACA exchanges opened in late 2013 and the individual mandate took effect in early 2014. The ACA enjoyed majority approval in only two polls, both conducted in 2017, amid Republican attempts to repeal it. Twin polls in 2019 found the law just as divisive today as it was at the start, with 50% approving of the ACA and 48% disapproving.

Socialism: Nationally, socialism has not gained in popularity over the past decade -- and less than half of Americans would vote for a socialist presidential candidate. But U.S. Democrats have warmed slightly to socialism, and they now view socialism more favorably than they do capitalism. About half of millennials view socialism positively. Though Americans skew negative in their views of socialism, their views are more nuanced when asked about specific aspects of government responsibility. With more political leaders, namely Democrats, adopting socialist messages, the coming decade will tell whether Americans become more positive in their views of socialism or whether they will remain as negative about it as they were in the 2010s.

[Source: Gallup | Justin McCarthy | December 31, 2019 ++]

DPRK Nuclear Diplomacy

Trump-Kim Ups & Downs

North Korean leader Kim Jong Un's threat to show the world a new strategic weapon and possibly resume long-range missile tests is another dramatic turn in his high-stakes summitry with President Donald Trump. Following are some of last two year's key moments in North Korea-U.S. diplomacy which have brought us to this have led to the present situation:

- **Jan. 1, 2018:** Kim uses his annual New Year's address to call for improved relations with South Korea though adds that he has a nuclear button on his desk. Trump tweets that he has a bigger and more powerful nuclear button, adding "and my Button works!"
- **March 5-6, 2018:** South Korean presidential envoys meet with Kim in Pyongyang and report he is willing to discuss his nuclear program with the United States.
- **March 8, 2018:** South Korean envoys meet Trump at the White House and deliver an invitation from Kim to meet with Trump, who accepts.
- **April 21, 2018:** North Korea unilaterally suspends its nuclear and ICBM tests and says it will shift its focus to developing its economy. Trump tweets: "This is very good news for North Korea and the World."

- **April 27, 2018:** Kim holds a summit with South Korean President Moon Jae-in. The leaders make vague vows for denuclearization and peace.
- **May 9, 2018:** U.S. Secretary of State Mike Pompeo visits Pyongyang to prepare for a Trump-Kim summit. North Korea releases three Americans who had been imprisoned.
- **June 12, 2018:** Trump and Kim meet in Singapore for the first summit between the countries' leaders since the end of the 1950-53 Korean War. They issue an aspirational statement on a nuclear-free Korean Peninsula without describing when and how it would occur.
- **Jan. 1, 2019:** Kim in his New Year's Day speech says he hopes to continue his nuclear summitry with Trump but also that he would seek a "new way" if the United States persists with sanctions and pressure against the North.
- **Feb. 27-28, 2019:** Trump and Kim meet in Hanoi, Vietnam, for their second summit. The meeting breaks down after the Americans reject North Korean demands for major sanctions relief in exchange for a partial surrender of its nuclear capabilities.
- **April 13, 2019:** Kim sets the year's end as a deadline for the Trump administration to offer mutually acceptable terms for an agreement to salvage the diplomacy.
- **May 9, 2019:** North Korea fires two short-range missiles toward the sea in its second launch in five days, ending a pause in ballistic testing and ramping up pressure on Washington over the slow pace in negotiations.
- **June 30, 2019:** Trump holds an impromptu summit with Kim at the inter-Korean border and becomes the first U.S. president to cross over into North Korean territory. The leaders agree to resume working-level talks.
- **Oct. 3, 2019:** North Korea says it carried out its first underwater-launched ballistic missile test in three years. The missile, which possibly could be launched from a submarine, represents the North's most high-profile weapons test since the start of diplomacy in 2018.
- **Oct. 10, 2019:** North Korea threatens to resume nuclear and ICBM tests days after the collapse of the working-level talks in Sweden, which North Korean officials blamed on the Americans' "old stance and attitude."
- **Dec. 3, 2019:** North Korea says the Trump administration is running out of time to salvage nuclear negotiations, saying it's entirely up to the United States to choose what "Christmas gift" it gets from the North.
- **Dec. 7, 2019:** North Korea says it performed "a very important test" at its long-range rocket launch site. Six days later, North Korea says it conducted "another crucial test" at the same site, prompting speculation that it's developing a new ICBM or preparing a satellite launch.
- **Jan. 1, 2020:** North Korea says Kim during a key political conference accused the Trump administration of dragging its feet in nuclear negotiations and warned that his country will soon show a new strategic weapon that would bolster its nuclear deterrent in the face of "gangster-like" U.S. pressure. Kim also says the North would no longer be bound to its moratorium on nuclear and ICBM tests.

[Source: The Associated Press | January 1, 2020 ++]

Iran Tensions

Update 09: Defensive Measures Prevented Casualties in Iranian Attack

Although Iranian missiles damaged equipment and infrastructure at U.S. and ally-occupied military installations in Iraq 7 JAN, training and defensive readiness paid off in no lives being lost, the chairman of the Joint Chiefs of Staff General Mark A. Milley said. "There's sirens that go off on these bases. ... There's bunkers and jersey barriers, and

there's places to go hide and all that," Milley told reporters at the Pentagon. Milley and Defense Secretary Dr. Mark T. Esper briefed reporters after spending most of the day on Capitol Hill talking with lawmakers.

"We have various levels of protective gear, and we have various scatter plans that do certain things," the chairman said. "They are all tactics, techniques and procedures — normal defensive procedures that any military unit would do that would come under rocket attack, indirect fire, mortars, large-scale missiles, etc. So in this particular case, Al Asad is a big base — they put 11 large rockets [with] 1,000-, 2,000-pound warheads in them — but we took sufficient defensive measures that there were no casualties to U.S. personnel, coalition personnel, contractors or Iraqis."

Esper said good discussions took place on Capitol Hill. "We covered a number of issues in both the House and Senate, everything ranging from authorities and imminence, all the way though force posture, next steps, etc.," he said. "So a very good discussion, a very robust discussion, and you know I thought it was a good chance for all of us to kind of share our views and to consult on next steps." The secretary said Iran launched 16 ballistic missiles into Iraq. He said he believes the missiles were short-range ballistic missiles and that the missiles landed in at least two spots. Both landing spots were Iraqi military bases that played host to American and coalition forces, including service members from the United Kingdom, Denmark and Canada.

At least 11 of the 16 missiles struck at Al Asad Air Base, about 175 miles from Iraq's border with Iran, and about 115 miles from Baghdad. At least one missile also hit at a military installation near Erbil, Iraq, some 200 miles north of Baghdad and about 60 miles from the border with Iran. The secretary said the current battle damage assessment includes loss of such things as tents, taxiways, parking lots and damage to a helicopter, but "nothing I would describe as major, at least as I know it at this point in time." While no lives were lost, Milley said, he believes the Iranians intended to cause deaths.

"The points of impact were close enough to personnel and equipment ... that I believe, based on what I saw and what I know, is that they were intended to cause structural damage, destroy vehicles and equipment and aircraft, and to kill personnel," Milley said. "That's my own personal assessment." Esper and Milley both said professional intelligence analysts are working on a final assessment. The secretary said he remains cautious about drawing any conclusion that if the Iranians intended to kill Americans and did not accomplish that during the attack, they may consider the attempt a failure and try again. "I think we have just got to assess the situation. Let's see what they are saying publicly, see what they are saying privately, look at our intelligence, all those things," he said. "We are not going to do anything imprudent. ... These are serious times, and we take things one step at a time." [Source: U.S. Dept. of Defense | C. Todd Lopez | January 8, 2020 ++]

Iraq War

Update 03: Iraqis Vote To Eject US Troops

In a remarkable few hours, Iraq's parliament voted 5 JAN to remove US forces from the country over the killing of Iran's Qassem Soleimani in Baghdad two days earlier. The US also suspended its efforts in Iraq to hunt ISIS fighters and to train Iraqi forces. That drama unfolded as thousands of US paratroopers, Marines, and US warships flowed into the region.

U.S. Secretary of State Mike Pompeo dismissed the Iraqi Parliament's vote Sunday that called for U.S. troops to leave their country. "We are confident that the Iraqi people want the United States to continue to be there to fight the counterterror campaign. And we'll continue to do all the things we need to do to keep America safe," Pompeo said on "Fox News Sunday. Pompeo said he did not consider the parliament's vote to be a final, formal decision by the Iraqi government. "We'll have to take a look at what we do when the Iraqi leadership and government makes a decision," he said. "But the American people should know we'll make the right decision." A pullout of the estimated 5,200 U.S. troops could cripple the fight against ISIS and allow its resurgence.

Just hours before the Iraqi vote, during which lawmakers chanted anti-American and pro-Iranian slogans, the American command in Baghdad announced a halt to all operations in the country. “We are now fully committed to protecting the Iraqi bases that host Coalition troops,” the command said after several rocket attacks struck US positions Saturday. “This has limited our capacity to conduct training with partners and to support their operations against Daesh and we have therefore paused these activities, subject to continuous review.” The Iraqi vote to expel was a non-binding resolution so nothing has to happen right away and it may be an indication that leaders are signaling to the Iraqi people that they care but need American and allied forces for other reasons.

While events play out in Baghdad, 3,000 US paratroopers are moving into Kuwait, and a potent force of roughly 2,500 Marines is steaming through the Mediterranean, capable of arriving in the Middle East within days. The Marines making up the 26th Marine Expeditionary Unit are trained to move from their ships via Osprey tiltrotors to provide quick reaction forces for embassy protection, evacuating civilians by air and sea, and to provide a deadly punch with Harrier jets, Super Cobra attack helicopters, and heavily-armed infantry troops and combat engineers. The MEU is part of the USS Bataan Amphibious Ready Group including the amphibious transport dock ship USS New York, and dock landing ship USS Oak Hill.

Col. Trevor Hall, commanding officer of the 26th MEU, said in an official statement that the unit “possess the unique ability to move seamlessly between operations at sea, ashore, and in the air. We provide commanders with a forward-deployed, flexible, and responsive sea-based Marine Air-Ground Task Force.” Most analysts are skeptical that Iran would respond with a frontal assault on US military targets to the killing of Soleimani, predicting Tehran will resort to smaller, asymmetric attacks on softer targets such as US embassies, economic interests and allies. The Marines will take some of the weight off the 173rd Airborne Brigade Combat Team out of Vicenza, Italy, who have reportedly been put on alert to protect the US Embassy in Beirut if needed.

Former CENTCOM commander Joseph Votel, who was on the front lines for various confrontations with Iranian forces, said “a very high level of vigilance and readiness to an Iranian response,” is critical across the board for the Trump administration. “I think that right now it is really important to be clear and consistent in our communication on why we acted; highlight our enduring interests in this area; clarify our strategy going forward; and address our critical regional relationships,” he told me in an email. The arrival of the 2,500 Marines and the 3,000 paratroopers will add to the significant American troop buildup in the Middle East over the past several months, bringing the total to about 20,000 since the summer. The Trump Administration has said the buildup, which includes new air wings and missile defenses sent to Saudi Arabia in the wake of Iranian drone and cruise missile attack on a major oil facility there in September, are for self-defense purposes.



USS Bataan (LHD5)

President Donald Trump appeared in no mood to cool things down, threatening the evening of 4 JAN to hit 52 Iranian sites “very hard” if Iran attacks Americans or US assets. The number of sites represented the 52 Americans held hostage in Iran in 1979 after militants seized at the US Embassy there. The sites are “at a very high level & important to Iran & the Iranian culture, and those targets, and Iran itself, WILL BE HIT VERY FAST AND VERY HARD,” he tweeted. Marines have hit the beaches to evacuate civilians before. In 2006, the 24th MEU landed on a

Beirut beach to evacuate Americans to the amphibious assault ship USS Nashville after heavy fighting erupted between Israel and Hezbollah fighters.

A former destroyer captain, Bryan McGrath, head of the Ferrybridge Group, said the ships and Marines bring “immediate proximate power that can be projected ashore in the event of additional staged embassy protests. We have a number of embassies and consulates in the region, and with 2,500 Marines afloat within a MV-22 ride, that provides significant reinforcement.” Spokesman for the 6th Fleet, Lt. Cmdr. Matthew Comer, said in a statement the Bataan and MEU are “conducting routine operations, demonstrating the inherent flexibility of our naval forces.”

The Bataan ARG (Amphibious Ready Group) will joining the USS Harry S. Truman Carrier Strike Group currently in the North Arabian Sea, and the UK’s HMS Montrose and HMS Defender — a frigate and destroyer respectively — which have been dispatched to accompany British-flagged ships through the Strait of Hormuz. Brig. Gen. Gholamali Abuhameed, commander of the Islamic Revolutionary Guard Corps (IRGC) in the southern province of Kerman, said 3 JAN that his country had identified 32 targets including ships, the Tasnim News Agency said. That is what apparently prompted Trump to offer the 52 Iranian targets America has painted on maps. [Source: Breaking Defense & AP | Paul McLeary | January 5 & 6, 2020 ++]

Nurses’ Honesty & Ethics

Continue to Rate Highest Over Other Professions

For the 18th year in a row, Americans rate the honesty and ethics of nurses highest among a list of professions that Gallup asks U.S. adults to assess annually. Currently, 85% of Americans say nurses' honesty and ethical standards are "very high" or "high," essentially unchanged from the 84% who said the same in 2018. Alternatively, Americans hold car salespeople in the lowest esteem, with 9% saying individuals in this field have high levels of ethics and honesty, similar to the 8% who said the same in 2018.

Nurses are consistently rated higher in honesty and ethics than all other professions that Gallup asks about, by a wide margin. Medical professions in general rate highly in Americans' assessments of honesty and ethics, with at least six in 10 U.S. adults saying medical doctors, pharmacists and dentists have high levels of these virtues. The only nonmedical profession that Americans now hold in a similar level of esteem is engineers, with 66% saying individuals in this field have high levels of honesty and ethics.

Americans' high regard for healthcare professionals contrasts sharply with their assessments of stockbrokers, advertising professionals, insurance salespeople, senators, members of Congress and car salespeople -- all of which garner less than 20% of U.S. adults saying they have high levels of honesty and ethics. The public's low levels of belief in the honesty and ethical standards of senators and members of Congress may be a contributing factor in poor job approval ratings for the legislature. No more than 30% of Americans have approved of Congress in the past 10 years. Americans have been consistent in their assessments of the honesty and ethics of most professions on Gallup's list. However, there have been a few notable changes in the past year, including:

- Americans' assessment of the honesty and ethics of journalists fell by five percentage points. There was previously a 10-point increase in Americans' belief that this profession is honest and ethical, from 23% in 2016 to 33% in 2018 -- but this most recent drop to 28% returns journalists to levels last seen in 2015.
- The ongoing decline in views of the honesty and ethics of clergy seems to have paused. From 2012 to 2018, the percentage of Americans saying clergy had high levels of honesty and ethics slid from 52% to 37% -- but 40% now regard clergy as having high honesty and ethical standards. Clergy had been held in high regard by Americans for much of Gallup's trend, but views of their honesty and ethics have declined overall since 2006, when 58% of Americans said this group had high levels of these virtues.

- Trust in the honesty and ethical standards of members of Congress also rose modestly to 12%, from 8% in 2018. The percentages saying legislators have high honesty and ethics rose slightly among both Republicans (from 7% to 9%) and Democrats (from 6% to 12%). This improvement in Americans' overall views of members of Congress now makes car salespeople the lowest-rated profession.

[Source: Gallup | R.J. Reinhart | January 6, 2020 ++]

Retirement Trends

Update 01: Reasons Fewer People at 65 are Retiring

It seems like more and more Americans can't get enough of work, whether it's for enjoyment or necessity. The Bureau of Labor Statistics estimates that by 2028, about 23% of people age 65 or older will be in the workforce. Provision Living, which operates senior living communities in three states, recently sought to find out why seniors continue to work. It surveyed more than 1,000 people between age 65 and 85 who work full- or part-time. The responses indicated that 62% of these folks work for financial reasons while 38% work for personal reasons. Following is a closer look at the findings. The percentages noted indicate the share of all surveyed seniors who cited a particular reason.

7. Loneliness - 2.3%

The Provision Living survey found that a small share of working seniors stay on the job out of loneliness. Specifically, these seniors "say that their workplace provides invaluable camaraderie and they would feel too lonely if they stopped working," according to the survey. These seniors might be on to something. The findings of a 2018 survey of people ages 50 to 80 from the University of Michigan National Poll on Healthy Aging suggest that chronic loneliness can affect older adults' memory, physical well-being, mental health and life expectancy.

6. Saving for a big expense - 2.5%

Older workers adding to their income by working must also be smart about not wasting those precious dollars. While that sounds like common sense, you may be wasting money without realizing it. Money Talks News outlines several ways that seniors blow money needlessly at www.moneytalksnews.com/slideshows/surprising-ways-retirees-waste-their-savings.

5. To avoid boredom or fill time - 11.4%

Survey found that about 6.8% of working seniors remain in the workforce out of boredom and about 4.6% work to fill time, although the survey did not explain the difference between these two responses. Many people relish the thought of never having to work again, but for some, retirement isn't all it's cracked up to be. All those hours once spent commuting and working have to be filled up somehow.

4. Supporting family - 14.3%

The days of kids financially being on their own at age 18 are quickly fading into the past, with more parents helping support their kids well after they officially become adults.

3. Paying off a mortgage or other debt - 19.9%

Survey found that about 8.1% of working seniors remain in the workforce because they are paying off a mortgage. An additional 11.8% said they are still working because they are paying off debt, although the survey does not specify what type of debt. At least seniors' average debt load of \$70,633 is less than the national average of \$93,446, according to a 2019 analysis from credit reporting company Experian.

2. Can't afford to retire - 22.9%

About 22.9% of working seniors "say they simply can't afford to retire at the moment," which easily makes retirement affordability — or rather, lack thereof — the most commonly cited financial reason for which seniors remain in the

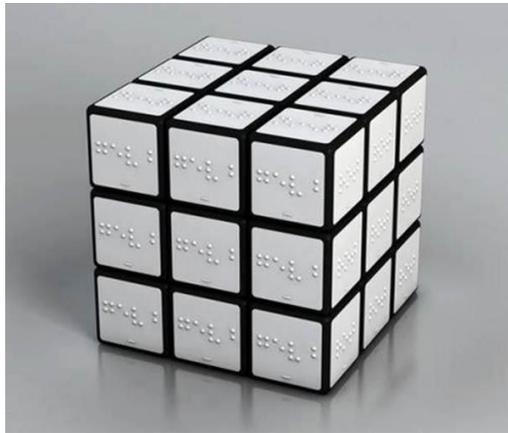
workforce. The second-most common financial reason, supporting family, was cited by only 14.3% of survey respondents.

1. Enjoy working - 23.2%

The survey found that of seniors who still work either full-time (17.1%) or part-time (6.1%), nearly a quarter do so because they enjoy it. That makes enjoyment of work the most commonly cited reason, whether financial or personal, among survey respondents.

[Source: MoneyTalksNews | December 2019 ++]

Interesting Inventions
Rubik's cube for the blind



Have You Heard?
Military Humor 11 | Suicide Incentives | Great Truths

Military Humor 11

Who Is Going to Afghanistan First?

Boudreaux, the smoothest-talking Cajun in the Louisiana National Guard, got called up to active duty. Boudreaux's first assignment was in a military induction center. Because he was a good talker, they assigned him the duty of advising new recruits about government benefits, especially the GI insurance to which they were entitled.

The officer in charge soon noticed that Boudreaux was getting a 99% sign-up rate for the more expensive supplemental form of GI insurance. This was remarkable, because it cost these low-income recruits \$30.00 per month for the higher coverage, compared to what the government was already providing at no charge. The officer decided he'd sit in the back of the room at the next briefing and observe Boudreaux's sales pitch.

Boudreaux stood up before the latest group of inductees and said, "If you has da normal GI insurance an' you goes to Afghanistan an' gets yourself killed, da government pays you beneficiary \$20,000. If you takes out da supplemental insurans, which cost you only t'irty dollars a mons, den da governmenten' gots ta pay you beneficiary \$200,000!"

"Now," Boudreaux concluded, "which bunch you tink dey gonna send ta Afghanistan first?"

###

THE Marine Corps Genesis 1 Version -- In the beginning was God, and all else was darkness and void, and without form. So God created the heavens and the Earth. He created the sun, and the moon, and the stars, so that light might pierce the darkness. The Earth, God divided between the land and the sea, and these he filled with many assorted creatures.

And the dark, salty, slimy creatures that inhabited the murky depths of the oceans, God called sailors. And He dressed them accordingly. They had little trousers that looked like bells at the bottom. And their shirts had cute little flaps on them to hide the hickeys on their necks. He also gave them long sideburns and shabby looking beards. God nicknamed them "squids" and banished them to a lifetime at sea, so that normal folks would not have to associate with them. To further identify these unloved creatures, He called them "petty" and "commodore" instead of titles worthy of red-blooded men.

And the flaky creatures of the land, God called soldiers. And with a twinkle in His eye, and a sense of humor that only He could have, God made their trousers too short and their covers too large. He also made their pockets oversized, so that they may warm their hands. And to adorn their uniforms, God gave them badges in quantities that only a dime store owner could appreciate. And He gave them emblems and crests... and all sorts of shiny things that glittered...and devices that dangled. (When you are God you tend to get carried away.)

On the 6th day, He thought about creating some air creatures for which he designed a Greyhound bus driver's uniform, especially for Air Force flyboys. But He discarded the idea during the first week, and it was not until years later that some apostles resurrected this theme and established what we now know as the "Wild-Blue-Yonder Wonders."

And on the 7th day, as you know, God rested.

But on the 8th day, at 0730, God looked down upon the earth and was not happy. No, God was not happy! So He thought about His labors, and in His divine wisdom God created a divine creature. And this He called Marine. And these Marines, who God had created in His own image, were to be of the air, and of the land, and of the sea. And these He gave many wonderful uniforms. Some were green; some were blue with red trim. And in the early days, some were even a beautiful tan. He gave them practical fighting uniforms, so that they could wage war against the forces of Satan and evil. He gave them service uniforms for their daily work and training. And He gave them evening and dress uniforms... sharp and stylish, handsome things... so that they might promenade with their ladies on Saturday night and impress the hell out of everybody! He even gave them swords, so that people who were not impressed could be dealt with accordingly. And at the end of the 8th day, God looked down upon the earth and saw that it was good. But was God happy? No! God was still not happy! Because in the course of His labors, He had forgotten one thing: He did not have a Marine uniform for himself. He thought about it, and thought about it, and finally God satisfied Himself in knowing that, well... not everybody can be a Marine!

###

Late to Work -- Tom was in his early 50's, retired and started a second career. However, he just couldn't seem to get to work on time. Every day, 5, 10, 15 minutes late. But he was a good worker, real sharp, so the Boss was in a quandary about how to deal with it. Finally, one day he called him into the office for a talk.

"Tom, I have to tell you, I like your work ethic, you do a bang-up job, but you're being late so often is quite bothersome."

"Yes, I know Boss, and I am working on it."

"Well good, you are a team player. That's what I like to hear. It's odd though, you're coming in late. I know you're retired from the Air Force. What did they say if you came in late there?"

"They said, "Good morning, General."

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Suicide Incentives

Everyone seems to be wondering why Muslim terrorists are so quick to commit suicide.

Let's see now... No Jesus, No Christmas, No television, No cheerleaders, No Nude Women, No car races, No football, No soccer, No pork BBQ, No hot dogs, No burgers, No chocolate chip cookies, No lobster, No nachos, No Beer nuts, No Beer !!!!!!! Rags for clothes and towels for hats. Constant wailing from the guy next-door because he's sick and there are no doctors. Constant wailing from the guy in the tower. On your knees facing east most of the day. More than one wife. You can't shave. Your wives can't shave. You can't shower to wash off the smell of donkey cooked over burning camel dung. Your bride is picked by someone else. She smells just like your donkey, and is uglier than your goat. Then they tell you that when you die it all gets better!

I mean, really, is there a mystery here?

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Great Truths

- In my many years I have come to a conclusion that one useless man is a shame, two is a law firm, and three or more is a congress.
-- *John Adams*
- If you don't read the newspaper, you are uninformed. If you do read the newspaper, you are misinformed. --
Mark Twain
- Suppose you were an idiot and suppose you were a member of Congress. But then I repeat myself.
-- *Mark Twain*
- I contend that for a nation to try to tax itself into prosperity is like a man standing in a bucket and trying to lift himself up by the handle.
-- *Winston Churchill*
- A government which robs Peter to pay Paul can always depend on the support of Paul.
-- *George Bernard Shaw*
- A liberal is someone who feels a great debt to his fellow man, for which he proposes to pay off with your money.
-- *G. Gordon Liddy*
- Giving money and power to government is like giving whiskey and car keys to teenage boys.
-- *P.J. O'Rourke, Civil Libertarian*
- Government's view of the economy could be summed up in a few short phrases:
- If it moves, tax it.
- If it keeps moving, regulate it.
- And if it stops moving, subsidize it. -- *Ronald Reagan (1986)*

Thought of the Week

“Some people spend an entire lifetime wondering if they made a difference in the world; US veterans don’t have that problem.” — *John Hampton*



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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>
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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
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