RAO BULLETIN 15 August 2020

PDF Edition



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- 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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* DoD

National Guard Reorganization Preparation for Possible Fights with Russia and China

The Army National Guard will move most of its brigades under the command of its eight division headquarters as it reorganizes its fighting formations to give the force more combat power and some soldiers new career opportunities, officials said. The Guard move will mark a substantial increase in the number of fully manned divisions that the Army can deploy, as only the service's 10 active-duty divisions are now filled out with subordinate units, said Lt. Gen. Daniel Hokanson, the director of the Army National Guard. The increase to 18 complete Army divisions comes at a time when service officials believe a major conflict with a near-peer rival — namely Russia or China — would require the employment of full divisions, he said.

For the last two decades, the Army has focused on its smaller brigade combat teams as its primary fighting elements for counterterrorism operations and deployments focused on assisting the forces of other nations. "When you look at the [2018] National Defense Strategy and competition among near-peer competitors, peer competitors — that great power competition, there is a potential for large-scale combat operations ... [and] it could actually be division level fights," Hokanson said in an interview 30 JUL ahead of the Guard's planned announcement 1 AUG. "We wanted to make sure that everything that the Army National Guard did was in support of the total Army and the NDS, and one issue was that our divisions are just headquarters they don't have brigades under them."

The National Defense Strategy, crafted by former Defense Secretary Jim Mattis, guides the Pentagon on future planning, placing the potential for major conflict with rivals China and Russia as the nation's primary national security threat. For the two decades prior, the military had focused almost exclusively on fighting transnational terrorist organizations, which the strategy defined as a lesser threat than those posed by nation-state competitors. The Army National Guard now has eight headquarters elements stationed in Virginia, Texas, Pennsylvania, Minnesota, Kansas,

Indiana, California and New York, which are each made up of about 300 or so soldiers. Some have established relationships with subordinate units, but none are manned in the way the Regular Army has built its divisions, which boast about 20,000 soldiers.

After studying the formations, Hokanson found the Army Guard had plenty of brigades and battalions to staff those divisions, which would allow the formations to train together and establish critical bonds should they be needed to deploy together into combat. The actual division alignments have yet to be finalized. This week, officials notified key lawmakers and stakeholders in the 54 U.S. states and territories that host Army Guard formations about the plans, Guard officials said. They will require governors and other top state leaders to agree to partnerships with some units falling under the control of headquarters in other states. But Hokanson said the new alignment will have no impact on the governors' and state adjutant generals' control of the forces assigned to their home states. He also said the National Guard has not asked Congress to provide additional funding for the changes.

The plan calls for more brigades to align with other divisions in their general regions of the nation. In one example, Hokanson said New Mexico's 1-200th Infantry Battalion would become part of the 41st Infantry Brigade Combat Team based in Oregon, which would become part of with the 40th Infantry Division based in California. The new alignment, the general said, will actually provide new opportunities for soldiers serving in units such as the 1-200th, where states have no higher headquarters in a combat unit. Under the reorganization, a battalion commander or a battalion sergeant major who performed well would have an opportunity for promotions to serve in higher commands within the new division — potentially even becoming a brigade commander or division commander of a unit based in another state.

"So, if you've got a lieutenant colonel or sergeant major out there in New Mexico, and one of them is absolutely, potentially the best battalion commander or senior [noncommissioned officer] in the entire division [right now] really wouldn't matter — there's no opportunity for them to advance," Hokanson said. "This would provide us the ability to better manage our talent across the National Guard by providing opportunities to those officers and NCOs that demonstrate the greatest potential and capability — we then give them the potential for opportunities beyond where they might normally get if they just stayed in their [home] state."

He said he hopes to have all the National Guard divisions established in the coming months and reach initial operating capability — meaning they have trained enough together to be certified as minimally effective to deploy and fight as a unit — by Oct. 1, 2021. Hokanson will receive a fourth star 3 AUG as he is promoted to the director of the National Guard, making him one of the Joint Chiefs of Staff. The new plan will then be overseen largely by his replacement, Maj. Gen. Jon Jensen, who is now adjutant general for Minnesota. Jensen is scheduled to be promoted to lieutenant general and also become Army Guard director 3 AUG.

Like the bigger Army, Hokanson pointed out the National Guard has been heavily used during the last 20 years, at home — where Guard soldiers have responded to myriad natural disasters, civil unrest and the recent coronavirus pandemic — and abroad, where they have regularly deployed to the Middle East and Afghanistan. He wants those units to be well-prepared for the next kind of fight they could encounter with a major military power. "We never want to fight," he said. "The goal is to prevent conflict." But if that fight does come, he wants the Army Guard soldiers ready to deploy as a full division that has spent time working together, instead of having to piece together a division at the last minute. He compared it to a basketball team where the players have spent years playing together as opposed to a pickup game where teammates might not know one another.

"When you go out on the playground and everyone picks players and you just go versus having a team, and you may only practice once a month and two weeks over the summer, but over the course of months and years you know your strengths and weaknesses, you've worked together and as a team, you would play much better together," Hokanson said. "That's what we're looking at with this." [Source: Stars & Stripes | Corey Dickstein | August 1, 2020 ++]

Transgender Troops

Update 27: House Passes Amendment Barring Funding for Ban

The House on 30 JUL passed an amendment aimed at overturning the Trump administration's transgender military ban. The measure, from Rep. Jackie Speier (D-CA) and 28 Democratic co-sponsors, was approved by voice vote as part of a group of a few dozen amendments passed while the House considers a \$1.3 trillion spending package that includes the fiscal 2021 defense appropriations bill. The amendment would block the use of funds to implement the Pentagon's transgender service policy, which says transgender people can only serve in the military if they do so in their biological sex or get a waiver.

The House approved the same amendment last year, but it did not survive negotiations with the Senate and White House to be signed into law in the final spending bill. Since then, the military has granted just one waiver to allow a transgender person to serve openly. A report to Congress last month also said that as of February, the military had only considered two waivers total and that 19 people were medically disqualified from enlisting or commissioning as an officer because of the policy. The Pentagon argues its policy is not a ban because of the exception for waivers, as well as a carve-out for people who were serving openly before the policy took effect last year to continue doing so.

But opponents of the policy say the data show it effectively is a ban akin to the defunct "don't ask, don't tell" policy that banned open service by gay, lesbian and bisexual service members. "The Department of Defense should not be spending taxpayer money on a politically motivated policy that keeps qualified people out of the military, particularly when the military continues to face enlistment shortfalls," Aaron Belkin, director of the Palm Center, said this week in a statement on the House amendment. Additionally, the Supreme Court issued a ruling in June barring discrimination against LGBT workers. The ruling did not apply to the military, but lawyers in the four lawsuits against the policy are hopeful the ruling will bolster their arguments, and 116 Democrats urged the Trump administration to drop its policy in light of the ruling. [Source: The Hill | Rebecca Kheel | July 30, 2020 ++]

Overseas Stationing

Poland Agrees To Pay Almost All Costs of US Troop Presence



American and Polish soldiers during an exercise at a Polish base.

The Polish government will pay the majority of costs associated with stationing 5,500 US troops at bases within its borders as part of a new security cooperation pact, the Pentagon has confirmed to Breaking Defense. The deal comes

as the Trump administration keeps prodding longtime allies like South Korea and Japan to pay more of the costs of tens of thousands of US troops within their borders, while President Trump has complained that countries like Germany don't meet defense spending goals outlined by NATO.

But Poland, which already meets the NATO-mandated goal of spending 2 percent of GDP on national defense by 2024, has agreed to take more US forces, aircraft and drones while footing what is likely to be a hefty bill to build infrastructure for those forces as they flow in and out of the country on a rotational basis. Warsaw "has agreed to fund infrastructure and logistical support to U.S. forces in Poland, including the current 4,500 rotational forces and the planned increase of 1,000 additional rotational forces," Lt. Col. Thomas Campbell, a Pentagon spokesperson said.

The final amount isn't clear. The Enhanced Defense Cooperation Agreement has been agreed to, but will not be signed for several weeks yet, and no infrastructure improvements that might be needed have not been started. In broad terms, Poland has agreed to fully fund infrastructure for:

- A command post of the Army's V Corps headquarters
- A US division headquarters in Poland
- A joint-use Combat Training Center in Drawsko Pomorskie, among other training locations
- Facilities for an Air Force MQ-9 drone squadron
- An aerial port of debarkation to support the movement of forces in and out of the country
- Facilities to support special operations forces so they can conduct air, ground and maritime operations
- Infrastructure for an armored brigade combat team, a combat aviation brigade, and a combat sustainment support battalion

In a 3 AUG statement, Defense Secretary Mark Esper said the new deal "will enhance deterrence against Russia, strengthen NATO, reassure our Allies, and our forward presence in Poland on NATO's eastern flank will improve our strategic and operational flexibility." The Polish deal comes as the US is in the early stages of planning to pull 12,000 troops from Germany and remains locked in a spending dispute with South Korea over Trump's demand Seoul pay more to keep the 28,500 American forces in the country.

During a Pentagon briefing last week, DefSec Mark Esper and Vice Chairman of the Joint Chiefs John Hyten repeatedly made the case that moving the Germany-based troops back to the US, Belgium and Italy, is a strategic decision that will benefit the US and NATO. Within minutes of that press conference however, Trump contradicted his military leaders from the White House lawn, saying he ordered the pullout so the US won't be "suckers...so we're reducing the force because they're not paying their bills. It's very simple, they're delinquent."

Trump again conflated the 2 percent NATO pledge with payments to the alliance itself. Germany, despite being the wealthiest nation in Europe, continues to fall well below that mark. Relying on Polish construction efforts has recently cost the Pentagon about \$100 million in cost overruns however. Europe's second Aegis Ashore site based in Redzikowo, Poland, was supposed to be up and running in 2018, but problems with local contractors have pushed that back to 2022 and will cost the US an additional \$96 million in 2021, according to budget documents. The Missile Defense Agency stopped paying the contractor in the spring due to the schedule slippages; work has since resumed. Stepping in to foot the bill — while fulfilling its NATO pledge — Warsaw is ticking off all the boxes demanded by the White House to maintain and improve its relationship with Washington.

Esper has recently acknowledged he is considering "adjustments" to the American military presence in South Korea, but clarified that he has issued no order to withdraw troops, despite reports suggesting a drawdown is being considered by Pentagon leadership. Under the previous agreement between the US and South Korea, which ended in December, South Korea agreed to pay \$870 million for 2019. The Trump administration originally demanded \$5 billion in 2020 to keep the US footprint as is. That was rejected by the South Korean government, who then agreed to pay the salaries of thousands of Koreans who had been furloughed from their jobs on American bases. Since that tweak, talks between the two sides have stalled. [Source: Breaking Defense | Paul McLeary | August 03, 2020 ++]

RP-US Relations

Update 07: Duterte bans South China Sea Joint Military Exercises

Philippine President Rodrigo Duterte has banned joint military exercises with the United States in the South China Sea, where American officials seek to aid the Philippines in territorial disputes with China. "President Rodrigo Duterte has a standing order to us, to me, that we should not involve ourselves in naval exercises in the South China Sea except our national waters, the 12-mile distance from our shores," Defense Secretary Delfin Lorenzana said in a briefing during the week of 3 AUG.

That statement stiff-arms American efforts to forge a coalition to rebuff China's claim to most of the South China Sea, one of the busiest waterways in the world. Beijing's assertion of sovereignty comes at the expense of the Philippines and several other countries in the region, but Duterte has flinched from confronting the neighboring communist power in favor of undermining his country's traditional ties to Washington. "He probably agrees with the idea that the United States is actually a power that is in decline and China is actually an emergent power," the University of the Philippines' Herman Kraft said recently. "China has always been associated with economic largess."

Some U.S. allies in the region see a growing risk of a clash between American and Chinese forces. Secretary of State Mike Pompeo has affirmed that President Trump would defend the Philippines from a Chinese attack, in keeping with the U.S.-Philippines Mutual Defense Treaty, but Duterte maintains that he fears being dragged into a U.S.-China war. "If one country's action is considered as belligerent, another tension will normally rise, so I hope that all the parties in this exercise will have, will work on their actions there, to exercise prudence and carefulness so that there will be no miscalculations that could further increase the tension," Lorenzana said.

And yet, the military leadership in the Philippines is eager to expand its partnership with the U.S. Manila plans to send a naval contingent to the Rim of the Pacific Exercise this year, even as Duterte resists cooperation closer to home. "Our participation in this exercise marks the beginning of a new era of naval operations as we build up our capabilities for modern warfare," Philippine Navy Vice Adm. Giovanni Carlo Bacord told Asia Times. "This is a great opportunity for the ship and its crew to observe and learn how other countries utilize weapons against air, surface, and sub-surface threats." [Source: Washington Examiner | Joel Gehrke | August 04, 2020 ++]

Military Travel New Covid-19 Guidelines



Army Chief of Staff Gen. James McConville takes a coronavirus test upon arriving in Thailand for an official visit

Troops looking to <u>travel on temporary duty</u>, for a permanent change-of-station or for vacation will have to complete a risk assessment, and possibly a <u>restriction-of-movement</u> (ROM) before and/or after, per Defense Department guidance published on 6 AUG. The guidelines can also apply to operational movements, but component commanders have more local guidance, which may include more restrictions, but might also allow aircrew, for example, to travel without ROM on either end. "Adherence to this guidance will protect the health of personnel and enable prevention of the spread of

<u>COVID-19</u> within and outside the United States," Defense Undersecretary Matthew Donovan, who heads up the personnel and readiness office, wrote in a memo.

All service members will need to do a risk assessment before travelling, and if they are bringing dependents, that travel won't be reimbursed unless they have also completed an assessment. Those requirements include documenting whether someone has had any COVID-19 symptoms, whether they've been contact with a confirmed case or someone otherwise symptomatic and whether he or she knows what to look for and what steps to take if a COVID-19 infection develops. "Service members, DoD family members, DoD civilian employees, and DoD contractor personnel should not travel if they have tested positive for COVID-19 and have not yet met the criteria for discontinuing isolation, or they are symptomatic," Donovan wrote. They should also push back any travel if they have been in contact with someone who has tested positive, or been symptomatic, he added. Only California, Florida and Michigan are still no-go zones for non-essentially Defense Department travel.

If a command determines that a ROM is necessary for travel, a service member and any accompanying dependents will be confined to their home, and should stay six feet apart from any family members or roommates, while monitoring for symptoms. If any develop, they will report that to their chain of command. Those rules apply to <u>installations</u> <u>marked cleared</u> within the U.S., but traveling outside the country will subject troops to the policies of those countries. That includes a two-week ROM before leaving, unless the country requires one after arrival. For troops traveling with family members, they must take accountability for their dependents also completing a ROM.

The order, known as FRAGO 9, initially had been due to start 7 AUG but was pushed back to provide time to adjust and prevent confusion among service members already en route, officials said. Eighth Army commander Lt. Gen. Mike Bills said soldiers traveling to new assignments in South Korea should continue as planned. "With FRAGO 9, it only applies in terms of the ROM or the quarantine, at any camp, post, or station back in the States after the 21st of August," Bills said in a video posted 7 AUG on the command's Facebook page. "Please continue your travel; we look forward to you joining our team," he said, adding any questions should be referred to individual chains of command or the Eighth Army, which has its headquarters on Camp Humphreys.

Many service members have tested positive for the virus after arriving at their destination, suggesting they either had it before getting on the plane or contracted it during their travels. The issue has prompted concern in South Korea, where 115 troops, dependents and civilian employees have received positive results after traveling to the divided peninsula since mid-April. U.S. Forces Korea insists the patients pose no risk to the general population because of a mandatory testing and two-week quarantine that begins as soon as they arrive to reduce the risk of the virus spreading. However, local South Korean officials in communities near the main base have called for troops to be tested before they get on the plane. The South has sharply lowered its daily count but continues to struggle with cluster infections and imported cases. The problem isn't unique to South Korea, but few other commands have implemented such a rigorous system or publicized the incoming cases. [Source: Military times & Stars & Stripes | Meghann Myers & Kim Gamel | August 7, 2020 ++]

Military Hospitals

Update 04: Handover to Defense Health Agency Issues

The heads of the U.S. military branches are calling on the Defense Department to stop the transfer of all medical facilities to the Defense Health Agency, saying the novel coronavirus pandemic has shown that the plan to convey the services' hospitals and clinics to the agency is "not viable." In a memo sent to Defense Secretary Mark Esper on 5 AUG, the secretaries of the Army, Navy and Air Force, along with the branch chiefs of the Army, Navy, Air Force, Marine Corps and Space Force, called for the return of all military hospitals and clinics already transferred to the DHA and suspension of any planned moves of personnel or resources.



Fort Belvoir Community Hospital

They said that the COVID-19 outbreak has demonstrated that the reform, which was proposed by Congress in the fiscal 2017 National Defense Authorization Act, "introduces barriers, creates unnecessary complexity and increases inefficiency and cost." They wrote in the memo, first obtained by a reporter for Synopsis, a Capitol Hill newsletter that focuses on military and veterans health care, "The proposed DHA end-state represents unsustainable growth with a disparate intermediate structure that hinders coordination of service medical response to contingencies such as a pandemic,"

The DoD launched major reforms of its health system in 2013 with the creation of the Defense Health Agency, an organization initially established to improve the quality of health care available to military personnel and family members and reduce services such as administration, IT, logistics and training that existed in triplicate across the three service medical commands. But the initiatives ballooned in 2016, with Congress passing legislation that placed the DHA in charge of military hospitals and clinics worldwide, as well as research and development, public health agencies, medical logistics and other operations run by the service medical commands. On Oct. 1, 2019, all military hospitals and clinics in the continental United States were transferred to the DHA, with those overseas expected to move over by October 2021.

But in December, Army Secretary Ryan McCarthy asked for a temporary halt of the transfers of Army facilities and requested that the Army Public Health Center and Army Medical Research and Development Command remain permanently under the service's control. Ryan said he had concerns with what he viewed as a "lack of performance and planning with respect to the transition" by the DHA and Defense Department Health Affairs, according to a memo he sent Deputy Defense Secretary David Norquist. McCarthy's comments were the first public statements by a military service in opposition to the transformation, which also calls for cutting roughly 18,000 military medical personnel. In early March, the Air Force and Army surgeons general weighed in, telling the House Appropriations defense subcommittee that the reorganization is an "extremely difficult" and "complicated merger of four cultures." They suggested that the Defense Health Agency isn't ready for some of the coming changes.

The DHA assumed management of all domestic military treatment facilities without the staff or management capabilities to actually run them. As part of the plan, the services were to provide support and guidance for the DHA to run the hospitals and clinics in the interim, until its personnel were ready to operate them. But then the pandemic struck. And according to a source familiar with operations at several medical treatment facilities in the Washington, D.C., region, tensions that had been bubbling since the initial facility transfer erupted. At one facility, commanders and DHA leadership argued over who was responsible for the COVID-19 screening tents in the parking lot. "There are definitely turf battles going on," said the source, a DoD civilian employee. "[The services] are making it very hard."

The COVID-19 pandemic has delayed several elements of the military health system reform effort. In March, the DoD placed a 60-day hold on a step to establish administrative markets responsible for military treatment facilities in

five regions in the U.S. In April, the department paused the rollout of its Military Health Systems Genesis electronic medical records program to several new medical facilities, although it continued to modernize the IT infrastructure needed to support the system. And in June, the Pentagon's top health official announced that the DoD would delay some of the changes planned for this year, including an effort to begin closing or restructuring 48 hospitals and clinics and sending at least 200,000 patients to private care.

But Assistant Secretary of Defense for Health Affairs Thomas McCaffery, a former health industry executive who took office last August, has said he remains committed to reform, which he believes will improve quality of care while also saving taxpayer dollars. "There's been at least 12 times since World War II where there has been efforts to change our system," McCaffery said during a visit to military health facilities in Washington last week. "All focused on the best way to organize and manage for the mission, have a ready medical force and a medically ready force. The mission is still the same, and having a more integrated system is the way to do it."

In their letter to Esper, the service heads said the DHA has been helpful during the pandemic in developing standardized clinical practices for the coronavirus response. But they still asked him to suspend any transfer activity and appoint a working group to explore different options for management of the hospitals. They also asked that all military hospitals, including two that have operated under the DHA and the National Capital Region since 2013 -- Walter Reed National Military Medical Center in Maryland and Fort Belvoir Community Hospital -- be returned to their respective services. They did not say which service Walter Reed would fall under; the medical center was created after a merger between the Army's Walter Reed Medical Center in Washington, D.C., and the Navy's National Naval Medical Center in Bethesda, Maryland. It remains housed at Bethesda, a Navy installation. "We look forward to working together to achieve successful reform of the military health system," they wrote.

Lisa Lawrence, a public affairs officer at the Pentagon, said the department plans to continue pursuing reforms as spelled out in the fiscal 2017 defense policy bill. "The Department remains focused on ensuring the Services maintain a medically ready force and a ready medical force, as well as [ensuring] all eligible beneficiaries have continued access to quality health care," Lawrence said. A staff member for the National Military Family Association said that it "makes sense" the pandemic would lead to a reevaluation of the military health system reforms, adding that the organization hopes the DoD, DHA and military services will continue focusing on accountability, transparency and standardization across the system. "Whatever the outcome, our priority is that service members and families have access to high-quality health care, wherever they happen to be stationed," said Eileen Huck, deputy director for health care at NMFA. [Source: Military.com | Patricia Kime | August 10, 2020++]

POW/MIA Recoveries & Burials Reported 01 thru 15 AUG 2020 Two

"Keeping the Promise", "Fulfill their Trust" and "No one left behind" are several of many mottos that refer to the efforts of the Department of Defense to recover those who became missing while serving our nation. The number of Americans who remain missing from conflicts in this century 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 <u>http://www.dpaa.mil</u> and click on 'Our Missing'. Refer to <u>https://www.dpaa.mil/News-Stories/Recent-News-Stories/Year/2019</u> 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:

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

LOOK FOR

-- Marine Corps Reserve Pfc. Frank L. Athon, Jr., 29, was a member of Company A, 1st 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. Athon died on the third day of battle, Nov. 22, 1943. Interment services are pending. Read about Athon.

-- **Marine Corps Sgt. George R. Reeser**, 25, of Washington, Illinois, was a member of Company A, 1st 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. Reeser died on the third day of battle, Nov. 22, 1943. Reeser will be buried Sept. 26, 2020, in Deer Creek, Illinois. <u>Read about Reeser</u>.

[Source: http://www.dpaa.mil | August 15, 2020 ++]



VA Prescription Refills

Update 03: Four Ways to Do It During the Pandemic

As COVID-19 spreads, people who regularly take prescription drugs for chronic conditions such as diabetes or high blood pressure may be wondering what will happen with their refills. VA wants you to know we're working hard to make sure you get your prescriptions on time, and when you need them. They ask that you request refills of your VA Prescriptions as soon as possible. VA will process your refill request and have it sent to you before you're scheduled to run out.

How do Veterans request refills of their prescriptions?

To prevent waste and reduce the risk that unneeded medications could fall into the wrong hands, VA does not automatically refill medications. To receive a medication refill authorized by your VA prescriber, you must actively request a refill using one of the methods described below:

- *Online with <u>My HealtheVet</u>*: You can request refills of your refillable VA-issued prescriptions, track VA prescription deliveries, view VA prescription history online.
- *The NEW <u>Rx Refill Mobile</u> App:* You can request refills of your refillable VA-issued prescriptions, track VA prescription deliveries, view VA prescription history from the convenience of your mobile device.
- *Telephone Call:* Most VA Pharmacies have automated telephone refill lines. You can find the phone number of your local VA Pharmacy on your prescription label. To order refills by phone, you will need the prescription number (shown as RX # on the prescription label) and your Social Security Number. For many prescriptions that are no longer refillable, this automated system may allow you to send a request for more of this medication to be sent to you. For some medications, the healthcare team will need to contact you first.
- *By Mail:* VA Pharmacy provides a <u>refill request form</u> with each prescription filled. To refill by mail, please complete the request form and mail it to your VA pharmacy at the address listed on the paperwork that arrives with your prescription.

The COVID-19 situation is changing fast. Try not to forget to take your medications or refill your prescriptions. Not having certain medications could cause health problems that require medical attention, putting you at risk of exposure with a facility visit. Veterans who forget to re-order their medications in time have three options. You can contact your VA medical center pharmacy, call the phone number on the prescription label, or use My HealtheVet's <u>Secure Messaging</u> (sign in required) to get in touch with your health care team, especially if your prescription is no longer refillable. As a last resort, you may visit your VA pharmacy in person to request a refill. You may be subject to screening before entering the facility. You might also have a very long wait to have your prescription refilled. Visiting in person can unnecessarily put you and others at risk of infection.

Delivery times can be affected by weather and the COVID-19 pandemic. Using the Track Delivery feature on My HealtheVet (sign in required), you can obtain the tracking number in use by either the U.S. Postal Service or UPS. Keeping yourself healthy is one of the best ways to defend yourself against COVID-19. VA knows that this can be a stressful time for Veterans, make sure you're doing everything you can to keep your immune system strong and healthy. [Source: VA News | August 12, 2020 ++]

VA EHR

Update 26: Overhaul to Restart in OCT

After an eight-month delay, the Veterans Affairs Department plans to restart its electronic health record and scheduling system overhaul in October, the agency announced 7 AUG. VA was ready to kick off two of three major, agency wide

IT upgrades last spring but opted to delay those deployments first due to staff requests for additional capabilities and training, then due to the outbreak of the COVID-19 pandemic. In February, VA officials told Congress the agency was halting the initial deployment of its EHR system at Mann-Grandstaff Medical Center in Spokane, Washington, originally planned for 28 MAR.

Melissa Glynn, VA assistant secretary for enterprise integration, told a House committee that staff at Mann-Grandstaff reported frustration over not being trained on the full Millennium system, as VA and the vendor—Cerner—started training on an unfinished product missing core functionality. "Earlier this month, our clinicians in the field identified and communicated critical requirements and capabilities that must be available prior to user training," Glynn testified in February. "The secretary listened to this feedback and postponed training so that we will bring the system closer to 100% complete prior to commencing training."

Initially, VA chose to postpone the rollout to July. Then COVID-19 hit, forcing mass telework for many VA employees and triggering the agency's lesser-known mission: to act as the nation's backup health care network in times of crisis. In April, VA Secretary Robert Wilkie announced another indefinite delay to the EHR rollout as the agency dealt with the pandemic. "The worldwide pandemic created by the coronavirus disease has shifted the overall priorities of the Department of Veterans Affairs," Wilkie wrote in a letter to House appropriators. "Our priority is the care of veterans and providing surge capabilities for civilian health care systems."

But, on Friday, Wilkie announced the work would resume in October, and future rollouts would be moved up to ensure the project stayed on the original 10-year timeline. "After a period of delay during which [VA medical centers] focused on their response to the COVID-19 pandemic, we are pleased to have our Electronic Health Record Modernization team resume activities with our facilities to move forward with a program that will transform VA and enhance veteran care," he said. "As we implement the new EHR solution at these facilities, we will continue to prioritize the safety of our veterans and our staff by following guidelines to prevent the spread of COVID-19."

Once the rollout at Mann-Grandstaff is complete, VA plans to begin rollouts at "select Midwest facilities that feature a balance of small, medium and large sites," including medical centers in Ohio, Indiana, Kentucky and Michigan. Simultaneously, VA's Office of Electronic Health Record Modernization has been working with Cerner to roll out a new scheduling system, originally set to go live in April. The new system was set to be piloted at a network of medical centers in the Columbus, Ohio, area, including the Chalmers P. Wylie Ambulatory Care Center, which hosted the pilot for the last scheduling system upgrade. Wilkie said that system is now scheduled to launch this month.

The agency is also in the midst of a third major IT overhaul: the Financial Management Business Transformation project, a \$2.5 billion effort to deploy the Momentum financial management system developed by CGI. Wilkie did not provide any updates on that project's progress, though its timeline extends through 2030. [Source: NextGov | Aaron Boyd | August 10, 2020 ++]

VA Pharmacy Mail-Order Delays | Officials Say to Order Early

The vast majority of the Department of Veterans Affairs prescriptions are fulfilled by mail. But as U.S. Postal Service delays mount, more and more veterans are reporting long wait times to receive critical medication and VA staff says the problem is only growing. In fiscal year 2016, VA's mail-order pharmacy processed nearly 120 million outpatient prescriptions and VA provides about 80% of all its outpatient prescriptions to veterans by mail using seven "highly automated pharmacies," according to the department. The other 20% are filled at local VA medical facilities. VA's mail-order pharmacy system, the Consolidated Mail Outpatient Pharmacy (CMOP), processes nearly half a million prescriptions daily and each working day, more than 330,000 veterans receive a package of prescriptions in the mail.

Veterans who live further from VA medical facilities, especially in rural and remote areas of the country, often depend on mail-order prescriptions.

More than two dozen veterans and more than half a dozen VA employees who work in department pharmacies nationwide reported delays for mail-order prescriptions to Connecting Vets. Those veterans and staff spoke on condition of anonymity because they said they feared retaliation from the department or stigma for the medications they use. They provided documents showing medication shipping delays. VA's website says prescriptions "usually arrive within three to five days" of being ordered or even an average of "60 hours from filling to delivery," and advises veterans to request refills at least 10 days in advance of running out. That estimate appeared consistent with the normal wait times veterans described to Connecting Vets, and some vets said they have yet to see significant delays.

But in recent weeks, dozens of veterans said they faced wait times that have doubled, tripled or worse. Some reported wait times as long as three weeks or more for prescriptions that previously took a few days. None of them have been contacted by VA with an explanation, they said. "What used to take days now takes weeks," one said. "We depend on these medications," another veteran said. "This could be devastating. I can't go without." "I received my life-saving medication 20 days late," another said. "I ordered five weeks early, expecting delays," another veteran said. "My meds were still late." Others said they saw delays in delivery of medical equipment, in addition to medications.

Veterans said they were worried about going to VA facilities to refill prescriptions because of the COVID-19 pandemic, especially for those at higher risk. "I'm immunocompromised and am trying to avoid going out at all, especially into a clinic," one veteran said. "VA is telling us to stay home and canceling appointments, but wants us to come in to refill prescriptions?" another veteran said. "I wouldn't feel safe." Some veterans said their healthcare providers told them in recent telehealth appointments that their only option to receive their medication was through the mail, since VA is still steering veterans away from in-person visits to some of its facilities during the pandemic.

A VA pharmacy chief described the USPS delays for prescriptions as "critical breaks in veterans' therapy," adding, "we are swamped with patient complaints over delivery delays." Other VA staff who work in pharmacies across the country echoed those comments, saying they worried about the veterans who depend on medication for pain, depression, post-traumatic stress disorder and other serious physical and mental health concerns. The pharmacy chief said VA has had "reports of veterans in withdrawal and/or off antidepressants that are experiencing relapse" but so far department leaders have not offered any solutions and USPS "is minimizing delays." "So far we are on our own," the pharmacy chief said. "(We're) using lots of UPS and FedEx overnight when we know someone is short." But local VA facilities can only do so much when they only fulfill up to 20% of prescriptions, compared to the 80% fulfilled at VA's centralized mail order facilities.

Two leaders of pharmaceutical companies that contract with VA's mail-order pharmacy system confirmed to Connecting Vets that VA prescriptions have been delayed because of USPS issues. VA's online My HealtheVet tool (https://www.myhealth.va.gov/mhv-portal-web/home) allows veterans to track their mail-order prescriptions. For some veterans who spoke to Connecting Vets, their medications have been sitting at post office locations for nearly two weeks with no movement. So far, VA officials are providing little to no information about how the USPS delays are affecting the department's massive mail-order prescription system. Connecting Vets tried multiple times to confirm with VA officials that the department is aware of delays for veterans' prescriptions. VA Press Secretary Christina Noel refused to respond to those questions, saying only: "VA always encourages veterans to order routine prescriptions in advance. When it comes to emergent prescriptions, VA fills them onsite or uses commercial carriers to ensure timely delivery." Noel referred any other questions to USPS.

USPS is now headed by a new Postmaster General, Louis DeJoy, who took over on 15 JUN. DeJoy, a top donor to President Donald Trump, issued a memo during his first month leading USPS which mentioned the Post Office's continued financial struggles and announced new policies, including that the Post Office would now accept delayed mail to save costs. "One aspect of these changes that may be difficult for employees is that — temporarily — we may see mail left behind or mail on the workroom floor or docks (in Processing and Distribution Centers), which is not typical," the memo reads, adding that USPS should avoid overtime payments caused by "late and extra trips." The

<u>memo</u>, first reported by The Washington Post, directed employees to leave mail behind at distribution centers if it would delay carriers on their routes. USPS warned customers' months before DeJoy took over that the coronavirus pandemic could cause mail delays. USPS is one of the country's largest veteran employers.

Veterans and VA staff told Connecting Vets they did not begin seeing delays in mail-order prescriptions until July. VA staff said they worried about the patients waiting for medications who are at highest risk. "We already have a suicide problem," one said. "Missing antidepressants isn't good. (Missing) maintenance meds for blood pressure or anticoagulants can be catastrophic." "We don't want to see someone get sicker or even die because of mail delays," another said. "This is completely avoidable." [Source: ConnectingVets.com | Abbie Bennett | August 05, 2020 ++]

VA Pharmacy Mail-Order

Update 01: VA Works to Mitigate Medication Waits

As U.S. Postal Service delays grow and spread, the Department of Veterans Affairs is rushing to get prescriptions to veterans on time. The vast majority of VA prescriptions are fulfilled by mail from a group of seven massive, automated hub pharmacies across the country, the Consolidated Mail Outpatient Pharmacy (CMOP) system. That centralized pharmacy system processes about 80% of all VA outpatient prescriptions, and 90% of those are shipped through USPS. The other prescriptions are typically filled at local VA medical facilities.

VA's mail-order pharmacy system processes nearly half a million prescriptions daily and each working day, more than 330,000 veterans receive a package of prescriptions in the mail. Veterans who live further from VA medical facilities, especially in rural and remote areas of the country, often depend on mail-order prescriptions. Connecting Vets first reported the delays, according to dozens of veterans, VA pharmacy staff and pharmaceutical company leaders, on 5 AUG. By 7 AUG, nearly 100 veterans and caregivers, along with dozens of VA employees, pharmaceutical leaders and USPS staff confirmed that Postal Service issues are delaying veterans' medications.

This week, VA told Congress it plans to mitigate the medication delays by sending prescriptions earlier, according to sources with knowledge of those conversations. VA is developing a communications plan to inform veterans of the possibility of delays and that the department plans to send prescriptions out for delivery earlier than expected. VA told Congress that USPS delays may be worse in some areas, including New York, New Jersey, Arizona and Michigan. In those areas, VA is converting its deliveries from USPS to UPS 2nd Day Air or FedEx temporarily. VA also is setting up a new USPS code to help the Postal Service identify and prioritize veteran prescription deliveries. That code is already in place for first-class and priority mail packages, and the two agencies are working to expand it to other mail categories.

Many of the veterans and staff who reached out to Connecting Vets spoke on condition of anonymity because they said they feared retaliation from the department, stigma for the medications they use or were not authorized to speak publicly. They provided documents showing medication shipping delays, internal memos and more. Most said they had not yet heard from VA about delays. Some said healthcare providers warned them during recent telehealth appointments to order refills earlier and that mail-order was their only option, as some VA facilities are still limiting visitors because of the coronavirus pandemic. Veterans and their caregivers told Connecting Vets they've faced wait times that have doubled, tripled or worse. Some reported wait times as long as three weeks or more for prescriptions that previously took a few days. Others said medical equipment deliveries were also delayed. Many expressed concerns about going to VA in person to retrieve medications during the pandemic.

VA's website says prescriptions "usually arrive within <u>three to five days</u>" of being ordered or even an average of "<u>60 hours from filling to delivery</u>," and advises veterans to request refills at least 10 days in advance of running out. That estimate appeared consistent with the normal wait times veterans described to Connecting Vets, and some vets said they have yet to see significant delays.

A VA pharmacy chief described the USPS delays for prescriptions as "critical breaks in veterans' therapy," adding, "we are swamped with patient complaints over delivery delays." Other VA staff who work in pharmacies across the country echoed those comments, saying they worried about veterans with chronic health conditions who depend on medication for pain, depression, post-traumatic stress disorder and other serious physical and mental health concerns. The pharmacy chief said VA has had "reports of veterans in withdrawal and/or off antidepressants that are experiencing relapse" and neither USPS or VA leaders have provided specific solutions. "So far we are on our own," the pharmacy chief said. "(We're) using lots of UPS and FedEx overnight when we know someone is short." But local VA facilities can only do so much when they only fulfill up to 20% of prescriptions, compared to the 80% fulfilled at VA's centralized mail order facilities.

VA's online My HealtheVet tool allows veterans to track their mail-order prescriptions. For some veterans who spoke to Connecting Vets, their medications have been sitting at post office locations for weeks with no movement.

- "I had to get an emergency refill from my doctor who was good enough to do it," said one veteran said.
- "I have been experiencing medication delays with little to no assistance offered from the VA," said a Florida veteran, who added that while VA advises veterans order refills before they run out, not all medications can be ordered early. She's gone without some of her critical medication for a week. "Currently, I am experiencing adverse side effects from not having my medication and I have only been offered reassurance that 'it's on the way.' This is unacceptable. Some veterans take life-saving medications. The VA needs a serious inquiry into how to prevent this issue from continuing."
- Another veteran said going without his prescription for a week because of USPS delays landed him in the hospital. "They've never been late," he said of his mail-order prescriptions. "They often show up early ... This time, I had to wait and I thought I could make it through until they arrived but I was wrong."

Connecting Vets tried multiple times to confirm with VA officials that the department is aware of delays for veterans' prescriptions. VA Press Secretary Christina Noel refused to respond to those questions, saying only: "VA always encourages veterans to order routine prescriptions in advance. When it comes to emergent prescriptions, VA fills them onsite or uses commercial carriers to ensure timely delivery." Noel referred any other questions to USPS.

USPS is now headed by a new Postmaster General, Louis DeJoy, who took over on 15 JUN. DeJoy, a top donor to President Donald Trump, issued a memo during his first month leading USPS which mentioned the Post Office's continued financial struggles and announced new policies, including that the Post Office would now accept delayed mail to save costs. "One aspect of these changes that may be difficult for employees is that — temporarily — we may see mail left behind or mail on the workroom floor or docks (in Processing and Distribution Centers), which is not typical," the memo reads, adding that USPS should avoid overtime payments caused by "late and extra trips."

The <u>memo</u>, first reported by The Washington Post, directed employees to leave mail behind at distribution centers if it would delay carriers on their routes. USPS warned customers months before DeJoy took over that the coronavirus pandemic could cause mail delays. USPS is one of the country's largest veteran employers. This week, Capitol Hill Democrat leaders, House Speaker Nancy Pelosi and Senate Minority Leader Chuck Schumer, called for an investigation of USPS delays in a letter to DeJoy and for DeJoy's recent policies to be reversed to avoid further delays.

Cole Butterfield, an Army veteran and American Postal Workers Union leader in Oregon, said postal workers nationwide tried to warn USPS leaders of the dangers of delaying mail, including prescriptions for veterans, seniors and people with disabilities. He said his wife is a disabled veteran who relies on USPS for her medication. "That has now come to pass," he said. "Parcel volumes are at or above Christmas volumes. However, even first-class letter mail is being delayed in many installations ... The delaying of mail is troubling and borderline criminal. In the past, workers have been disciplined or fired for delaying mail. The USPS provides a vital service to all Americans, especially to our veterans. "I assure you that postal workers nationwide are outraged. We care about the mail and we care about our customers." [Source: ConnectingVets.com | Abbie Bennett | August 07, 2020 ++]

VA Caregiver Program Update 64: Final 1 OCT PCAFC Regulation Posted

The U.S. Department of Veterans Affairs (VA) on 31 JUL published its final regulation to improve and expand the VA <u>Program of Comprehensive Assistance for Family Caregivers (PCAFC)</u> with the final regulation going into effect on 1 OCT. Under the final regulation, PCAFC will include <u>eligible</u> Veterans that have a single or combined serviceconnected disability rating by VA of 70% or higher, regardless of whether it resulted from an injury, illness or disease.

This is a notable change to the definition of serious injury from the current regulations, among other improvements aimed at standardizing the PCAFC and improving transparency in the program. Expansion of VA's PCAFC to eligible Veterans of earlier eras will occur in two phases. The first phase will begin October 2020 and will include eligible Veterans who incurred or aggravated a serious injury in the line of duty in the active, military, naval or air service on or before May 7, 1975. Phase two will go into effect two years later and include eligible Veterans of all eras.

"The expanded regulation addresses the complexity and expense of keeping Veterans at home with their families who provide personalized care," said VA Secretary Robert Wilkie. "This will allow our most vulnerable Veterans to stay with their loved ones for as long as possible. Expanding the program and eligibility for the Program of Comprehensive Assistance for Family Caregivers ensures we can continue to meet the changing needs of America's Veterans and their caregivers." Additionally, the new regulation will change the PCAFC stipend payment methodology, define new procedures for revocation and discharge, and include certain advance notice requirements aimed at improving communication between VA and PCAFC participants as well as include information for <u>current program participants</u>.

VA is also standardizing operating procedures for the Caregiver Support Program, providing new training for staff and caregivers, and boosting operational capacity by hiring additional staff. With this expansion, Primary Family Caregivers in PCAFC will also have access to financial planning and legal services. VA is also working to fully implement the new information technology system required by the VA MISSION Act of 2018 by October 2020. VA's Caregiver Support Program offers support services for caregivers including training, peer mentoring, respite care, a telephone support line, and self-care courses for caregivers of covered Veterans enrolled in VA health care who need personal care services.

Caregivers can visit VA Caregiver support website <u>https://www.caregiver.va.gov</u> or call the Caregiver Support Line at 855-260-3274 for questions. The final regulation can be found <u>here</u>. If necessary, search for RIN 2900-AQ48, Program of Comprehensive Assistance for Family Caregivers Improvements and Amendments under the VA MISSION Act of 2018. [Source: VVA Web Weekly | July 31, 2020++]

VA Caregiver Program

Update 65: DAV Memo on PCAFC Regulation

MEMO TO: Department Commanders and Adjutants Department Benefit Protection Team Leaders FROM: Joy J. Ilem, National Legislative Director SUBJ: CAREGIVER INFORMATION UPDATE DATE: August 6, 2020

Last week the VA issued its final regulation concerning the expansion of its Program of Comprehensive Assistance for Family Caregivers to pre-9/11 veterans as required by the VA MISSION Act. We are pleased to be moving closer to expanding eligibility for this program to veterans and caregivers who, despite their needs, have been unable to access

these benefits for a decade. While we thoroughly review the details of the new regulations, it is important to note a few points.

- First, VA has not yet announced when or how pre-9/11 veterans may apply for caregiver benefits based on the • new regulations. Even though these regulations will take effect on October 1, 2020, the program cannot begin expanding to cover these earlier eras of veterans until the Secretary has certified that a new caregiver IT system is fully implemented, which is already a year late. As soon as VA makes this certification or provides additional information on application procedures, we will pass it along to you. You can also find VA's latest information about the program and the expansion to pre-9/11 veterans at https://www.va.gov/family-memberbenefits/comprehensive-assistance-for-family-caregivers.
- Second, we are very pleased that the new regulations will finally open eligibility for the caregiver program to include not just severely injured veterans, but also those who incurred or aggravated an illness in the line of duty, which includes diseases and conditions like cancer, diabetes, etc. These veterans may be eligible for VA's caregiver support program if they have a single or combined service-connected rating of 70% or more and meet the other applicable program criteria in the new regulations. More information on the updated eligibility criteria can be found at

https://www.caregiver.va.gov/pdfs/MIssionAct/CaregiversPCAFcEligibilityFAQ73120.pdf

For years, DAV has advocated for inclusion of these veterans and their caregivers, knowing their disabilities take just as heavy a toll as do many physical wounds. This is a decisive victory for our nation's veterans, and is long overdue recognition of their sacrifices and those of their family caregivers.

Finally, while VA's final rule will open eligibility to phase one immediately following IT certification, it also states that phase two expansion will not happen for another two years after that date (phase one includes veterans who became injured or ill on or before May 7, 1975, phase two includes veterans who became injured or ill between May 8, 1975 and September 10, 2001). Congress clearly intended the second phase to occur by October 2021, and we believe that veterans and their caregivers should not have to wait another year for these benefits due to VA's continued delays in certifying the IT system.

We will continue to provide updates on the expansion of the VA's caregiver program, including information about when veterans may begin applying under the new criteria, as well as our efforts to accelerate the second phase of the expansion. Thanks for all your continued efforts to support the men and women who served.



VA Caregiver Program

Update 66: Stipends Set to Expand To Vietnam Vets & Older Generations



Chris Ott, right, helps maneuver her son, Marine veteran John Thomas Doody, around their family house

Veterans Affairs officials are planning to expand caregiver's stipends to additional families starting this October, one year after advocates had originally hoped for the financial assistance to be put in place. About 20,000 veterans — all

of whom left the service after Sept. 11, 2001 — are currently participating in the VA caregiver program. The payouts provide thousands of dollars a month in compensation to spouses, parents and other partners of severely injured veterans who otherwise would require expensive institutionalization.

Under new regulations released 31 JUL, department officials said caregivers of veterans injured on military duty before May 7, 1975, would be eligible for the monthly payouts as early as 1 OCT, although when the bulk of payouts would occur remains unclear. Caregivers of veterans injured between 1975 and 2001 would have to wait two more years to enter the stipend program, under rules previously established by Congress. That leaves those families with a wait until at least October 2022 to enter the program. VA Secretary Robert Wilkie said the changes "will allow our most vulnerable veterans to stay with their loved ones for as long as possible" while recognizing the complexity of adding up to 41,000 new families to the program in coming years.

The expansion is expected to cost about \$3 billion over the next five years, according to previous VA calculations. The expansion was mandated under the VA Mission Act passed by Congress and signed into law by President Donald Trump in summer 2019. The law is best known for an overhaul of VA's community care programs, which Trump often refers to as "veterans choice" in campaign stump speeches. But the caregiver provisions were a major issue for veterans advocates at the time of passage, because of concerns that many eldery veterans had been unfairly excluded from the program. The program was due to be expanded in fall 2019, but delays in mandated technology upgrades pushed back the initiative by a year.

Under the final regulation, the revised Program of Comprehensive Assistance for Family Caregivers veterans with a service-connected disability rating of 70 percent or higher, regardless whether their condition resulted from an injury, illness or disease. Lawmakers say the VA is not doing enough to help family members who care for wounded veterans. Monthly stipends are based on federal locality pay rules where veterans live. For a veteran living in Phoenix, for example, the caregiver of a veteran unable to live without full-time assistance would receive about \$2,700 a month, and a caregiver of a veteran who needs only partial help would receive about \$1,700 a month.

Department officials said they will also provide new training for staff and caregivers, to include financial planning and legal services for families. The caregiver support program already provides eligible recipients with peer mentoring, respite care, and other support services. More information is available on <u>https://www.va.gov/family-member-benefits/comprehensive-assistance-for-family-caregivers</u>. [Source: MilitaryTimes | Leo Shane III | July 31, 2020 ++]

VA Caregiver Program

Update 67: Respite Relief for Veteran Caregivers

The U.S. Department of Veterans Affairs in partnership with the <u>Elizabeth Dole Foundation</u> (EDF) on 5 AUG announced the launch of a new foundation program granting family caregivers access to no-cost, short-term aid to help those caring for wounded, ill or injured Veterans or service members in their homes during the coronavirus pandemic.

Under the <u>Respite Relief for Military and Veteran Caregivers</u> program, caregivers of Veterans can apply to receive approximately 24-hours of respite care from a <u>CareLinx</u> professional to help with bathing, companionship, cooking, exercising, grooming, light housekeeping, medical and medication reminders, mobility assistance, transportation and other activities. "Caregivers charged with caring for our nation's Veterans face new challenges during the COVID-19 pandemic," said VA Secretary Robert Wilkie. "They have become increasingly isolated and are hindered from getting reliable, outside help. This program provides caregivers compassionate and needed relief during this stressful time."

Respite Relief for Military and Veteran Caregivers will initially be available in select regions of California, Florida and Texas. The EDF will work to expand the program to other regions of the country later this year. The <u>Association</u> for the <u>Advancement of Retired Persons</u> will also be supporting the effort by sharing information about the program

with their members in the selected states. Applicants to the Respite Relief for Military and Veteran Caregivers program will be selected and awarded by the Elizabeth Dole Foundation. Apply at <u>https://hiddenheroes.org/respite</u>.

[Source: VA News Release | August 5, 2020 ++]

VA Progress

Update 01: VA Secretary Speaks Out on Today's Concerns

Last week's blockbuster Government Accountability Office report found that between 2014 and 2016, an estimated 26 percent of female and 14 percent of male VA employees experienced sexual harassment. "That report was about the Obama Administration," said Secretary of Veterans Affairs Robert Wilkie. "That wasn't made clear in the hearing. That report stopped in 2016." Wilkie said the report does not reflect conditions at the VA today, four years later. "I would ask people to take a really close look at the way VA is now, as opposed to a snapshot of VA a long away period, which is what that GAO study was," he said.

Wilkie also spoke about the House Veterans Affairs Committee vote to force the VA to cover three additional medical conditions presumed to have been caused by exposure to the toxic herbicide Agent Orange during the Vietnam War. The VA estimates that expansion could cost from \$11.2 billion to \$15.2 billion. "We will take care of patients wherever they are and however they are presented to us," he said. "The only thing I will ask the Congress is that they provide us the funds to do that."

The wait time for primary care at the Hampton Veterans Affairs Medical Center, according to the VA's own website, was the worst in the nation back in 2010, with a backlog of 108 days. Today, it is 15 days. How'd they do it? "Good people," said Wilkie. "Good people who are reaching out, hiring good people, and reaching out into the community. The other thing that we've done is we've given veterans options. We've given them the option, if they don't like the wait times, they can go in the private sector."

Wilke also weighed in on numerous other topics:

- *Veteran Suicide*. The continuing tragic problem of veterans suicide currently stands at about 6,000 cases per year. "What we want to do is expand our reach into areas we're not in," he said. "The majority of veterans who take their lives, we have no contact with." Wilkie said he believes the VA is "on the right path" with veteran homelessness, which stands at about 37,000 vets without a home currently. Wilkie points out it was 400,000 a few years ago.
- *Veteran Homelessness*. A spokesperson for the Department of Veterans Affairs provided 13News Now with a clarification, stating "Homelessness among Veterans declined by 50 percent between 2010 and 2019, from 74,087 to 37,085, respectively."
- *COVID-19.* Wilkie offers condolences for the estimated 2,040 VA patients who have died from the virus, but points out that figure is out of a total patient base of nine and a half million veterans.
- VA Motto Wilkie takes exception with lawmakers trying to change Abraham Lincoln's word in the VA motto to be more gender-neutral, noting that the agency has an above 80 percent satisfaction rate among female patients. "We're not seeing what some activists are seeing," he said. Wilkie made clear he is not a fan of the idea. "I would not be arrogant enough to want to change the words of perhaps our greatest American," he said. "Those words are there to inspire."

[Source: <u>www.13newsnow.com</u> | Mike Gooding | August 1, 2020 ++]

VA Voluntary Service

Update 03: Plans Announced to Reintroduce to Facilities

The U.S. Department of Veterans Affairs (VA) announced 11 AUG plans to gradually and safely reintroduce volunteers to its health care facilities. While volunteers are important to the operation of VA services and programs, most volunteer activities have been paused to prevent the spread of the virus that causes COVID-19. "Just as our facilities are <u>gradually reinstating services</u>, volunteers are slowly reintegrating into them," said VA Secretary Robert Wilkie. "Volunteers are an integral part of our health care teams, offering fundamental services. We look forward to their return."

Some volunteer roles will be new, while others will stay the same, be modified, go virtual or remain paused as a precaution to prevent the spread of COVID-19. Individual VA facilities will tailor the reintegration of volunteers based on the facilities' operational needs and the volunteers' abilities. Volunteers can expect the following safety measures:

- **Phased reentry:** Volunteers are being asked to return to duty on an as-needed basis while maintaining physical distancing. VA asks that volunteers do not return to the facility unless they have been approved to do so.
- **Retraining:** Volunteers must complete an orientation and training on VA's policies and procedures. This includes the proper use of personal protective equipment including face coverings.
- **Health screenings:** Volunteers, like staff and patients, must consent to being screened for COVID-19 exposure and symptoms prior to entering facilities.

These actions are being taken to protect the health, safety and wellbeing of Veterans, staff and volunteers. Visit <u>VA Voluntary Service</u> for more information. [Source: VA News Release | August 11, 2020 ++]

VA Data Availability

Update 01: Online Downloads & Services for Vets

Whether you're just getting out of the service or you've been a civilian for years now, the VA Welcome Kit can help guide you to the benefits and services you've earned. Based on where you are in life, your VA benefits and services can support you in different ways. Keep your welcome kit handy so you can turn to it throughout your life—like when it's time to go to school, get a job, buy a house, get health care, retire, or make plans for your care as you age.

Download your VA Welcome Kit

Feel free to share this guide with friends or family members who need help with their benefits too. You can print out copies for yourself and others:

- Your VA Welcome Kit in black and white (PDF)
- Your VA Welcome Kit in color (PDF)

Download VA's COVID-19 guide

Read our guide to find out how to help protect yourself and others at <u>COVID-19 links and resources (PDF)</u>. For questions about COVID-19 and how it affects VA health care and benefit services, visit the VA <u>Coronavirus FAQs</u> page or read VA's public health response at <u>https://www.publichealth.va.gov/n-coronavirus</u>.

Download guides to VA benefits and services for Veterans

- <u>Apply for VA health care (PDF)</u>
- <u>Get started with mental health services (PDF)</u>
- <u>Understanding community care (PDF)</u>

- Accessing urgent care (PDF)
- <u>Apply for a disability rating (PDF)</u>
- <u>Apply for education benefits (PDF)</u>
- Apply for burial in a VA national cemetery and for memorial products (PDF)
- <u>Understanding the modernized decision review process (PDF)</u>

Download guides to VA benefits and services for family members

- Get started with caregiver benefits (PDF)
- <u>Apply for survivor benefits (PDF)</u>

Explore VA.gov to learn about your benefits

- <u>**Disability</u>** -- File a claim for disability compensation for conditions related to your military service, and manage your benefits over time.</u>
- <u>Health care</u> -- Apply for VA health care, find out how to access services, and manage your health and benefits online.
- <u>Education and training</u> -- Apply for and manage your GI Bill and other education benefits to help pay for college and training programs.
- <u>Housing assistance</u> -- Find out if you're eligible for VA home loan programs to help you buy, build, repair, or keep a home. If you have a service-connected disability, see if you qualify for a housing grant to help you live more independently.
- <u>Careers and employment</u> -- Apply for vocational rehabilitation services, get support for your Veteran-owned small business, and access other career resources.
- <u>Life insurance</u> -- Explore VA life insurance options for Veterans, service members, and families. Manage your policy online, file claims for benefits, and access helpful resources.
- <u>Pension</u> -- Apply for monthly payments for wartime Veterans and survivors with limited or no income who meet certain age and disability requirements.
- <u>Burials and memorials</u> -- <u>Get help planning a burial in a VA national cemetery, order a headstone or other</u> memorial item to honor a Veteran's service, and apply for survivor and dependent benefits.
- <u>**Records</u>** -- Apply for a printed Veteran ID card, get your VA benefit letters and medical records, and learn how to apply for a discharge upgrade.</u>
- **Benefits for spouses, dependents, survivors, and family caregivers** -- Learn about benefits for spouses and dependents of a Veteran or service member, including added support if you're caring for a Veteran with a service-connected disability.

. [Source: <u>https://www.va.gov/welcome-kit</u> | Kevin Secor | August 12, 2020 ++]

Covid-19 Security

Virtual Check-Ins Latest VA Service

The Department of Veterans Affairs has recently launched a new feature of its VEText application to maintain COVID-19 security and protect veterans from viral contact while using VA facilities. A collaboration between the VA's Office of Information and Technology and the Veterans Health Administration, the "I am Here" feature allows veterans to text VA care centers from the parking lot to give notice of their arrival. Once the care team has been notified, the veteran will then receive confirmation their text has been received as well as further instruction when it is time for their appointment.

Connecting veterans directly with clinical staff allows them to stay within their cars or outside the facility before having to enter the building itself, lowering the risk of COVID-19 exposure and protecting their health during the ongoing pandemic. The updated VEText application also includes appointment reminders, pre-entry COVID-19 screening registration, as well as support for unscheduled appointments. The agency launched the app at 30 VA centers

and intends to expand its usage more broadly across the U.S. — part of a broader push toward increasing the accessibility and convenience of remote health capacities.

The agency's greater digital modernization program has been quickly reoriented toward sustaining VA services and helping both contain COVID-19 and better care for veterans during the COVID-19 pandemic. This has been a particularly complicated process in light of the VA's Fourth Mission, or the essential role the VA takes on as the health system of record during times of national crisis.

VHA is also the largest consolidated health network in the U.S., with the COVID-19 crisis placing exceptional demands on a care system that already has considerable extant responsibilities. In light of the quantity of veterans who continue to seek care within the VHA network, the agency has prioritized ensuring their safety within its facilities — a project in which the VEText application slated to take a paramount role. "I continue to be impressed by the speed with which VA teams have quickly developed creative solutions to help VA respond to the pandemic. These innovations are a testament to the ingenuity and commitment of the public servants who work at VA to support our Veterans through this unprecedented situation," said VA CTO Charles Worthington, noting the essential role VEText will play within the agency's broader focus on COVID-19 safety. [Source: Government CIO Journal | Adam Patterson | August 4, 2020 ++]

VA Fraud, Waste & Abuse

Reported 01 thru 15 AUG 2020

Pensacola, Fla. -- Pensacola resident **Howell E. Camp**, 58, pled guilty to carrying a concealed firearm and possession of firearms on federal property, stemming from a May 6 incident at the Department of Veterans Affairs (VA) Joint Ambulatory Care Clinic in Pensacola. Camp admitted that he illegally possessed a 5.56 millimeter Del-Ton Incorporated rifle and a 9 millimeter Smith & Wesson pistol while at the federal facility.

Camp became agitated while waiting for a prescription to be filled by the clinic, and left the federal facility to retrieve multiple firearms from his residence. When he returned, Camp approached the clinic doors armed with his rifle, which was loaded with 20 rounds, including one in the chamber. He was stopped at gunpoint by Veterans Affairs Police officers and taken into custody. The officers found a concealed Smith & Wesson pistol in Camp's waistband. "Tragedy was averted thanks to the diligence and professionalism of the VA Police officers on duty that day," said U.S. Attorney Keefe. "We and our law enforcement partners are deeply committed to stopping gun violence and protecting federal facilities and the people who work and visit them. Veterans clinics are there to serve the brave men and women who have given so much to serve our nation, and those officers were truly heroes that day."

"The VA Police officers on scene deserve the highest praise. They showed tremendous restraint, protected the public, and even protected Howard Camp. Because of their actions, lives were saved," said Jack Massey, FDLE Pensacola Special Agent in Charge. "FDLE will continue working closely with our federal partners doing all we can to protect our community." David Spilker, VA OIG Special Agent in Charge said, "Camp's dangerous actions risked the safety and well-being of veterans and VA employees. VA OIG is steadfast in ensuring that VA facilities remain a safe environment for veterans and their families to seek healthcare services and we will work with our law enforcement partners to hold accountable anyone who attempts to commit acts of violence or intimidation at VA facilities. I commend the swift and heroic actions of the VA Police officers, who prevented a potentially deadly outcome in this case."

Camp faces up to six years' imprisonment following his guilty plea. As a convicted felon, he will be prohibited from possessing firearms in the future. His sentencing has been scheduled for October 29, 2020 at the United States Courthouse in Pensacola. [Source: DoJ Northern Dist. of Fla. | U.S. Attorney's Office | July 31, 2020 ++]

[Source: <u>https://www.va.gov/oig/podcasts/transcripts/20200707-49_VA_OIG_May_2020_Highlights.pdf</u> | July 2020 ++]



Vet Unemployment

Update 23: Crisis May be Turning Around for Veterans

The unemployment rate for all veterans fell to 7.9% in July from 8.6% in June, led by a drop of more than two percentage points in the jobless rate for post-9/11 veterans to 8.2%, the Bureau of Labor Statistics reported 7 JUL. The national unemployment rate also fell in July to 10.2% from 11.1% in June in the "continued resumption of economic activity that had been curtailed due to the coronavirus pandemic and efforts to contain it," BLS said.

- The unemployment rate for all male veterans in July was 7.5%; for female vets, it was 10.7%, BLS added.
- For post-9/11 veterans, classified as Gulf War II-era veterans by BLS, the unemployment rate was 8.2% in July, down from 10.3% in June
- Gulf War I-era veterans, or those who served in the 1990s, saw their unemployment rate in July increase to 7.0% from 6.0% in June, BLS reported.

Despite new claims for unemployment continuing at a rate of more than one million for the past 20 weeks, the jobs market reflected "notable job gains" in leisure and hospitality businesses, government, retail trade, professional and business services, other services, and health care, BLS said. Shortly after the BLS monthly jobs report was released, President Donald Trump tweeted: "Great jobs numbers!" "We're happy to see the numbers get lower, [but] the reality is that we have a health crisis, not so much an economic crisis," said Thomas Porter, executive vice president of Iraq and Afghanistan Veterans of America. "We're not going to climb out of the economic hole we're in" until the pandemic is brought under control.

Bryan Rollins, director of the Warriors to Work program at the Wounded Warrior Project, agreed the numbers are encouraging but cautioned that "we haven't seen a huge change" in recent months in the number of job placements made through Wounded Warrior programs. "We're roughly seeing about 35-40 job placements per week" since March, he said, adding that there has also been a shift to the service sector in types of jobs accepted. To provide relief, IAVA and the WWP have joined with veterans service organizations in backing proposed legislation, **Veterans Economic Recovery Act of 2020** (H.R. 7111), approved by the House Veterans Affairs Committee last week. The bill would grant up to 35,000 veterans who lost their jobs in COVID-19 layoffs an extra year of GI Bill benefits to retrain for high-skill jobs.

Lawmakers urged that the committee's bipartisan bill H.R.7111 be included in the next coronavirus relief package, although the House, Senate and White House are currently at an impasse over what the relief package will include. In urging inclusion of the bill in the relief package, Rep. Phil Roe, (R-TN), the ranking member of the House Veterans Affairs Committee, said in a statement, "Prior to the COVID-19 pandemic, we had the lowest veteran unemployment rate in 20 years. "We owe it to our veterans to do everything we can do to get back there again," he said of the 3.6% unemployment rate for veterans recorded by BLS in February before the full impacts of the pandemic began to be felt.

One cautionary note to the July jobs report is that it was based on data collected through mid-July as COVID-19 cases and death tolls were rising across the nation, forcing states to impose more restrictions. Federal Reserve Chairman Jerome Powell warned again last week that high unemployment rates will persist until the pandemic is brought under control. "The pace of recovery looks like it has slowed" since the virus began to spike in June, he said at a July 29 news conference. "Recent labor market indicators point to a slowing in job growth, particularly among smaller businesses. "There's probably going to be a long tail where a large number of people are struggling to get back to work," he added. [Source: Military.com | Richard Sisk | August 7, 2020++]

WWII Vets 230

Richard Sherman | Flying Tigers



Army Air Force Veteran, Richard Sherman joined the Aviation Cadet Corps in January 1942. After basic training, he attended bombardier school in Santa Ana, California, and in Kirtland Field near Albuquerque, New Mexico. He also trained as a navigator, a secondary role that many bombardiers served. Sherman initially served on Kwajalein Atoll in the Marshall Islands, but later transferred to China. There, he joined the 11th Bomb Squadron of the 14th Air Force, best known for its association with the Flying Tigers.

The Flying Tigers were originally known as the American Volunteer Group (AVG), a group trained by Claire Chennault to assist the Chinese Air Force after the Japanese invasion in 1937. The nickname "Flying Tigers" came from the painted tiger shark teeth on the noses of the group's aircraft. From December 1941 to July 1942, the AVG destroyed 296 Japanese aircraft in China and Burma. Unlike most Flying Tigers who flew P-40 Warhawks, Sherman flew missions on a B-25 Mitchell. In February 1944, his plane was shot down over the South China Sea. He and the crew survived the loss but had to be hidden by Chinese civilians and guerillas on their way back to base. Sherman flew 52 missions during his service with the 14th Air Force.

After the war, Sherman returned to the U.S. and settled in Monroe, Louisiana. Sherman later joined the Air Force Reserve. During the Berlin Wall incident, he deployed with the 123rd Aircraft Control and Warning Squadron to Landshut, Germany. There he briefly worked in the automotive section, which managed vehicles and ground transport for the military. Sherman later retired from the military in April 1968 as a major. During his service, Sherman received numerous medals, including a Distinguished Flying Cross, a Purple Heart and an Air Medal with two oak leaf clusters.

In his retirement, Sherman remained active in the Veteran community. He joined the American Legion, serving as post and district commander, and kept in touch with Chennault and his family. He also was involved in the preservation of Selman Army Airfield in Monroe which had served as a navigation school during World War II. Thanks to Sherman and members of the Chennault family, Selman Army Airfield later became the home of the Chennault Aviation and Military Museum. Sherman donated pieces of his memorabilia from the war and participated in museum events.

In 2015, Sherman and the four other surviving members of the Flying Tigers received gold medals from the Chinese government for their service. Sherman passed away in January 2019 at the age of 96. We honor his service. Read more

about the Flying Tigers at <u>https://www.blogs.va.gov/VAntage/68944/claire-lee-chennault-flying-tigers</u>. [Source: Vantage Point | Sarah Concepcion | August 2, 2020 ++]

WWII Vets 231

Frank Witek | Died Liberating Guam



Marine Corps Pfc. Frank Witek fought and died while liberating Guam from the Japanese during World War II. He was born Dec. 10, 1921, in Derby, Connecticut, but his family — including two sisters and three brothers — moved to Chicago when he was 9. He graduated high school there and went to work as a laborer at the Standard Transformer Company. Shortly after the Japanese attacked Pearl Harbor in 1941, 20-year-old Witek enlisted in the Marine Corps. He left for recruit training in late January 1942 and was soon sent to serve with the 3rd Marine Division during World War II. About a year later, his family got word he was in New Zealand. He was then sent to Bougainville, a small South Pacific island near Papua New Guinea, where he fought in three major battles and earned a promotion to private first class.

On July 21, 1944, the 3rd Division was sent to liberate Guam, a U.S. territory in the Mariana Islands that had been captured by the Japanese in 1941. Witek was a scout and automatic rifleman with the division's 1st Battalion, 9th Marines. On Aug. 3, 1944, Witek's platoon was in a bitter fight with the Japanese in an area of the island known as Finegayen. At one point, they were pinned down by heavy fire that came as a surprise from a well-camouflaged enemy position. Instead of finding cover, Witek stood and, at point-blank range, fired a full magazine into a depression that held Japanese troops. Eight enemy soldiers were killed; the short respite from attack gave most of Witek's platoon a chance to take cover.

Soon, the platoon was ordered to withdraw to consolidate lines. Witek stayed behind to help a severely wounded comrade, firing at the enemy until more men came with a stretcher for the injured Marine. Witek continued firing as they evacuated, but soon his platoon was pinned down again due to heavy machine gun fire. Without being ordered to do so, Witek pushed forward into the hail of gunfire to help support tanks and infantrymen leading the fight. Using his gun and hand grenades, he managed to get within 5-10 yards of the Japanese, close enough to kill eight more enemy fighters and destroy their machine gun.

Unfortunately, his luck ran out at the same time. Witek was targeted by an enemy rifleman and killed. The 23-yearold's heroic actions massively reduced the enemy's firepower during the fight, enabling his platoon to reach its objective. By 10 AUG, Japanese resistance had ended, and Guam was declared secure. Nearly a month later, Witek's mother received word that her son had given his life for the cause. According to the combat correspondent's release, when Witek was found, his rifle had only eight cartridges left on an original 240 rounds.

On May 20, 1945, Witek's mother, Marine Corps Commandant Gen. Alexander A. Vandegrift and about 50,000 other people gathered at Soldiers Field in Chicago to honor the slain Marine. During the ceremony, his mother accepted the Medal of Honor on his behalf. Less than a year later, the Navy's newest destroyer, the USS Witek, was commissioned and named for him. Initially buried in the Army, Navy and Marine Corps Cemetery on Guam, Witek was reinterred in 1949 at Rock Island National Cemetery in Rock Island, Illinois. While he spent most of his young adult life in Chicago, he never forgot the Connecticut town in which he was raised. For that, 144 acres of land in the town of Derby were named Witek Memorial Park in 1999. [Source: DOD News | Katie Lange | August. 3, 2020 ++]

WWII Vets 232



Joe N. Hazel | Bronze Star Medal Recipient

Joe N. Hazel was born in 1921. In 1943, the Army drafted him, and he went to Florida for basic training. He spent some time in Fort Meade, Maryland, before traveling to Camp Gruber, Oklahoma, where he joined the 42nd Infantry Division. Hazel trained as an infantryman and as a wireman, with the job of stringing wire under combat conditions to ensure lines of communication remained open. On Thanksgiving Day 1944, Hazel left the U.S. and eventually arrived in Lassigny, France. The first few days in France were peaceful, but Hazel and his division soon engaged with the enemy. He and a team of three others rested in a mansion for a short while, before moving on to a nearby French town. Every day the Nazis fired artillery on the telephone lines, and every day Hazel and his team would have to repair the wires under continuous snowfall.

After the Battle of the Bulge, Hazel and his team retreated to straighten up the line, and spent time in another town, with a German-speaking family. Hazel and his team eventually traveled to the Harz Mountains. After learning that their radios were non-operational, the team traveled on Army mules to spend three days laying telephone wire across the mountains. Hazel earned a Bronze Star Medal for working on the Army's only line of communication in the middle of combat.

After the war, Hazel spent some time traveling through Germany. He ended up spending nine months in Vienna. Hazel remembered fondly the time spent in Vienna, celebrating with Americans and Germans alike, along with the letters and packages from his mother. He later returned to the U.S. He passed away in 2009. We honor his service. [Source: Vantage Point | Kelly Dooley & Rob Laucius : August 8, 2020 ++]

Vet Home Covid-19 Impact

Update 01: Aging Veterans at State Homes 'Left Behind'

Aging, ill and disabled veterans living at state homes across the country were "left behind" during the coronavirus pandemic, according to a recent report, and now more than 1,000 have died. At least 1,011 residents of state veterans' homes across the country died from complications of the coronavirus as of 17 JUL, according to a report released last week by Vietnam Veterans of America (VVA). But that number is likely much higher. Only 47 of the 162 total state veterans' homes have reported data to federal officials so far -- five months into the pandemic.

As the numbers of veterans dying in state homes began to grow, VVA assembled a committee to investigate. VVA leaders called what they discovered "disturbing" -- a lack of oversight, transparency and most of all, accountability, investigators said. So far, the committee has been unable to obtain pandemic data for 115 of the state homes, leaving the extent of the virus' effects on older veterans unclear. But advocates and lawmakers said the number of known deaths is startling enough to question the Department of Veterans Affairs' role in managing the homes. VVA leaders said VA refused to own any responsibility for the failings at state homes that led to so many deaths. The rising death toll, VVA said, "called into question the entire spectrum of the state veterans' home/VA relationship." "There is a sense that VA does not embrace the care of these veterans as being part of its mission," VVA's report reads.

The report, "<u>America's Aging Veteran Population and the COVID-19 Pandemic</u>" is the result of five months of investigation into the state homes, and comes to one major conclusion: VA should have a greater role in overseeing the state homes. "We were disturbed that VA officials, including VA Secretary Wilke, have denied having any authority or responsibility for veterans in the homes," said VVA National President John Rowan. "In truth, VA's Geriatric and Extended Care Programs offer a continuum of services and programs -- which include the state veterans' homes. We were dismayed that VA leadership had chosen to view this group of veterans as part of VA's Fourth Mission -- to assist civilians in times of emergency."

Veterans eligible for VA-funded assisted living care are split up among several types of facilities. Some receive care at 157 state veterans' homes. Others, at VA-managed community living centers (CLCs). Still others receive care at private facilities paid for by VA. VA provides federal grants to the veterans' homes, but they are owned and managed by the states under federal law. VA officials told lawmakers during a hearing last month that the department "does not have authority over the management or control of a (state veterans' home)." But VVA leaders said VA "relies heavily on state homes to provide the bulk of long-term care for our elderly veterans." VA is responsible for ensuring the homes meet department standards through annual surveys, audits, inspections and other checks. In some cases, VA is the only agency inspecting the facilities, a 2019 Government Accountability report revealed. That report also showed VA allowed its inspectors to disregard failings at some state homes.

But a sharp disparity has emerged over the course of the pandemic. In an interview last month, Secretary Robert Wilkie said just two of the about 7,500 veterans in CLCs nationwide were battling the virus. In other interviews, Wilkie stressed his lack of direct authority over the homes, but said VA had moved into some of them to offer aid. VA officials said the department has admitted more than 120 patients from at least 12 state veterans' homes, in addition to deploying staff to state homes directly. VA offered that aid through the agency's Fourth Mission, to serve as a last line of defense for the American health care system in emergencies such as natural disasters or pandemics. VVA's report revealed that at least 33 of the state homes saw 10 or more veterans die because of the coronavirus. The facilities with the greatest number of deaths were the Soldiers' Home in Holyoke, Mass., and the Paramus Veterans Memorial Home in New Jersey. Both reported more than 80 COVID-19 deaths. VA does not include the deaths of veterans at state homes in its COVID-19 data, Press Secretary Christina Noel previously told Connecting Vets.

Lawmakers were dissatisfied with what several viewed as VA shirking responsibility, arguing that there should not be separate standards of care for veterans under VA's direct authority and those at state homes. VVA's report reflects that, saying Wilkie "disavowed any responsibility" and calling his comments "puzzling," "disappointing and disturbing." The report concludes, "The scope of his responsibility applies to every one of the 20 million living veterans and the 3.83 million veterans buried in 143 VA cemeteries, not to mention America's men and women in uniform serving on the frontiers of freedom today". Federal law states that VA "shall have no authority over the management or control of any state (veterans') home, Noel pointed out, arguing that states are "solely responsible" for the homes "and any problems that arise within them."

VA data estimates that nearly 55% -- more than 10.8 million -- of all American veterans are 65 or older. Congress, veteran service organizations and other advocates have continually questioned whether VA is prepared to handle a growing number of aging and ill former service members. The pandemic has deepened those concerns. "The idea of not abandoning a fallen soldier on the battlefield is a tightly held credo," Rowan said. "Images of overflowing emergency rooms, body bags stacked on loading docks, refrigerated trucks for morgues and stories of patients dying without their families triggered memories of our own wartime experiences, and we recognized that today's battlefield is the COVID-19 pandemic." [Source: ConnectingVets.com | Abbie Bennett | August 11, 2020 ++]

Military Retirees & Veterans Events Schedule As of 15 AUG 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: <u>http://www.hostmtb.org/RADs_and_Other_Retiree-Veterans_Events.html</u>.
- PDF: <u>http://www.hostmtb.org/RADs_and_Other_Retiree-Veterans_Events.pdf</u>.
- Word: <u>http://www.hostmtb.org/RADs and Other Retiree-Veterans Events.doc</u>.

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, <u>Milton.Bell126@gmail.com</u> [Source: Retiree\Veterans Events Schedule Manager | Milton Bell | August 15 2020 ++]

Vet Hiring Fairs Scheduled As of 15 AUG 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. To participate, sign up for the workshop in addition to registering (if indicated) for the hiring fairs which are shown on the Hiring Our Heroes website https://www.hiringourheroes.org for the next month. For details of each you should click on the city next to the date Listings of upcoming Vet Job Fairs nationwide providing location, times, events, and registration info if required can be found at the following websites. Note that some of the scheduled events for the next 2 to 6 weeks have been postponed and are awaiting reschedule dates due to the current COVID-19 outbreak. You will need to review each site below to locate Job Fairs in your location:

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

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 | August 15, 2020 ++]

Veteran State Benefits Georgia 2020

The state of Georgia provides a number of benefits to veterans in the below categories. To obtain information on these refer to the attachment to this Bulletin titled, "Vet State Benefits – GA" for an overview of what is available available to veterans who are current residents of the state. For a more detailed explanation of those identified refer to http://veterans.georgia.gov:

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

[Source: https://www.military.com/benefits/veteran-state-benefits/georgia-state-veterans-benefits.html | August 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. To read the text of bills that are to be considered on the House floor in the upcoming week refer to https://docs.house.gov/floor.



Vet Toxic Exposure | Karshi-Khanabad Update 02: S.4415 | VA Coverage for Exposed Vets

The U.S. Senate introduced legislation 4 AUG requiring the Department of Veterans Affairs to provide health care and benefits to service members who were deployed to a contaminated Uzbekistan base and now face cancers or other chronic illnesses. The Senate bill marks an important next step for the veterans who served at Karshi-Khanabad, Uzbekistan, or K2, a former Soviet base where U.S. troops were quickly sent in the weeks after the Sept. 11 attacks because it was located near Taliban and al Qaeda targets.

In December McClatchy reported that the military knew how bad the contamination was at K2 as early as October 2001, but still sent thousands of forces there. K2 had remnants of depleted uranium and contamination from a former chemical weapons storage site. Now hundreds of service members who deployed there have reported various cancers, and they continue to struggle with getting the Department of Veterans Affairs to recognize their illnesses as connected to their time at the base.

"This bill will bring life-saving relief to hundreds – and potentially thousands – of veterans who were exposed to extremely harmful toxins in the black goo and glowing ponds reported at K2," said Sen. Richard Blumenthal (D-CT) who introduced the legislation with Sen. Tammy Baldwin (D-WI). The cancers have hit members of the Army and Air Force special operations communities particularly hard.

Retired Air Force Lt. Col. Rich Riddle deployed to K2 with the 8th Special Operations Squadron in 2003. He died in June of pancreatic cancer at the age of 63. On Saturday, his widow and family buried him. Sunday would have been his 64th birthday. "It was beautiful. Sad, but beautiful," Daryl Riddle said of the military ceremony to honor her late husband's life. "The hardest part was the flag, the reason for the folding of the flag and giving it to me." If the VA had alerted health care workers that K2 veterans may have a higher chance of cancer and should be screened, "maybe he would have had a fighting chance," Daryl Riddle said. Riddle's pancreatic cancer was stage three by the time it was detected, she said.

The U.S. House of Representatives passed K2 legislation in its 2021 National Defense Authorization Act last month requiring the VA to launch a study of how many veterans who served at K2 are now sick. At the time, there was no complementary legislation in the Senate, which made it less likely K2 relief would be included in a final bill. The Senate version goes farther than the House bill and would create a "presumption of service connection" for diseases that K2 veterans now face to help them qualify to have the VA cover their medical costs, Blumenthal and Baldwin said. That "presumption of service" language is key for all K2 veterans still trying to get the VA to recognize their illnesses as service-connected. When Rich Riddle learned earlier this year that Congress was considering legislation on K2, he said, "It won't help me now," Daryl Riddle recalled, because Rich knew his cancer was too advanced. "What Rich thought at the time was, 'I want to help other people,'" Daryl Riddle said.

The Senate bill also makes those K2 veterans eligible to record their exposure to toxic trash fires burned at the base in the VA burn pit registry. The registry was established to record how many veterans are sick who served at military bases across the Middle East where large open-fire trash bits burned human waste, computer parts, ammunition and other trash, releasing harmful particles into the air. To date, the VA has not recognized Uzbekistan as a site with a burn pit even though early military studies identified burn pits at the base and projected as many as 75% of the forces who served at K2 would be exposed to toxic air. "The Pentagon has known for years that our U.S. troops were exposed to cancer causing toxins while serving in Uzbekistan and it's simply wrong for the VA to deny them health care and disability benefits," Baldwin said in the statement.

The bill is supported by a variety of veterans groups who have banded together over the last year to get the government to take a more comprehensive approach to the hundreds of thousands of service members who've become sick because of contaminants they were exposed to during their military service. [Source: www.mcclatchydc.com/news | Tara Copp| August 4, 2020 ++]



Vet Toxic Exposure Legislation Update 10: S.4393 | TEAM Act of 2020

Veterans exposed to toxic substances during their military service could qualify for additional benefits from the Department of Veterans Affairs under landmark legislation introduced in the Senate 31 JUL. The **Toxic Exposure in the American Military (TEAM) Act** creates sweeping mandates for VA to further research, track and care for eligible veterans who fall ill because of exposure to toxic substances during service -- perhaps the most comprehensive legislation on military toxic exposures ever introduced in Congress. The TEAM Act was introduced by Sen. Thom Tillis (RONC) who represents one of the largest populations of troops and veterans in the country, including the largest Army base in the world, Fort Bragg.

The bill aims to allow VA to potentially expand benefits and health care to thousands of veterans by allowing VA to add more presumptive conditions for troops exposed to toxic substances, such as herbicides and burn pits, and provide consultations, testing and treatment, among other major mandates. Toxic exposures have increasingly gained attention as veterans and troops sicken with rare cancers, respiratory and fertility issues, especially those who served in Afghanistan and Iraq.

Establishing a firm link between toxic exposures and the illnesses they cause has proved difficult over the years, as Pentagon records of exposures are notoriously incomplete or nonexistent -- including the locations of burn pits and other hazards -- leaving veterans waiting as they grow more ill or die, "I know firsthand the obstacles thousands of veterans who have been exposed to toxicants while serving our country have had to overcome. Veterans stationed at Camp Lejeune spent decades pushing for documentation of their exposure and fair treatment for the damages caused by the military, but this cannot continue to be the norm," Tillis said in a statement 31 JUL. "After working alongside veterans who were stationed Camp Lejeune and fighting for service members exposed to toxicants from burn pits in

Afghanistan and Iraq, it's clear the men and women who served our country deserve better. The bipartisan TEAM Act ensures that all veterans are given a fair and uniform process to receive the health care and benefits to which they are entitled following exposure to toxicants during their service."

The TEAM Act is the culmination of nearly two years of effort from the TEAM Coalition of veteran service organizations, researchers, advocates and others working to codify care for veterans afflicted by their toxic exposures. "The TEAM coalition has made great strides since we launched this effort last June, and we're all very proud of the work we have done collectively," said Wounded Warrior Project CEO, retired Lt. Gen. Mike Linnington. "We're honored to stand alongside Sen. Tillis and others, who are championing this necessary reform to help those coping with these specific wounds of war."

Veterans eligible for consultations, testing and treatment under the bill would include those who received hazardous duty pay for more than one day, or who have been identified by the Pentagon as possibly exposed inside or outside the U.S. to burn pits or other toxic substances or visited a location where service members were potentially exposed. The authority to decide which illnesses qualify as service-connected resides with the Secretary of the VA. The bill would:

- Require VA provide consultation, testing and treatment for eligible veterans who received hazardous duty pay, or were exposed to toxic substances with no copays;
- Permanently reauthorize VA's authority to establish presumptive service connection for diseases associated with herbicide exposure;
- Allow the VA Secretary to establish additional presumptives for illnesses linked to certain toxic substances;
- Establish a Toxic Exposure Review Commission to authorize further research on exposures;
- Formalize an agreement with the National Academies of Sciences, Engineering and Medicine to report on scientific evidence for illnesses linked to exposures;
- Require analysis of veterans exposed to toxic substances to help identify those most at risk and provide regular reports to Congress;
- Require VA create a list of resources to be published for veterans exposed to toxicants, and an outreach program for those veterans, their caregivers and survivors;
- Incorporate toxic exposure questionnaires during primary care appointments;
- Create a portal for veterans to access their Individual Longitudinal Exposure Record;
- Require VA establish training for its staff on illnesses linked to toxic exposure.

The bill gives authority to VA leadership to determine illnesses that qualify for service-connected benefits, as has been the case in the past. But to avoid delays Agent Orange-exposed veterans and others have faced as VA weighs whether to expand benefits, the bill requires VA to make a decision within 60 days of a National Academies of Sciences report linking illnesses to exposures. In a call with reporters earlier this month, VA Secretary Robert Wilkie said VA did not have the authority to provide benefits to veterans exposed to toxic substances after Sept. 11, 2001 until Congress passes legislation. "Now the Congress does have to change legislation, change the statute when it comes to the categorization of disability benefits and the categorization of the percentage that a veteran is considered disabled," Wilkie said, though he prefaced by saying, "we don't deny medical services to any veteran who is sick."

Wilkie, a colonel in the Air Force Reserve and son of a Vietnam veteran, said, as he often has, that VA does not want veterans of more recent conflicts to face the decades-long wait for recognition and benefits that some Vietnamera vets still face. "My pledge ... as the son of the Vietnam combat soldier is we don't want our veterans to go through what Vietnam veterans went through in terms of not knowing," he said. "But because of the disability ratings, that has to come through legislation."

Tillis' introduction of the TEAM Act comes just days after the House passed a slate of new burn pit measures in its draft of the annual defense authorization bill and Capitol Hill hearings on how VA should handle toxic exposures, even as scientific evidence is pending to prove their connections to a range of illnesses. For information on how to add yourself to VA's burn pit and airborne hazard registry, click <u>here</u>. Need help with toxic exposure? Click <u>here</u> for a list of resources and information on VA and Defense Department registries. [Source: ConnectingVets.com | Abbie Bennett | July 31, 2020 ++]

Military Mental Health Disorders

Update 01: S.4334/H.R.7368 | Brandon Act



Aircrew Aviation Electrician's Mate Striker Brandon Caserta, 21 died by suicide on June 25, 2018

A bill that would give service members a way to get mental health treatment without going through their chains of command received a boost 28 JUL after being introduced in the Senate by Arizona Republican Martha McSally. Named for a Navy sailor who died in June 2018 by suicide after he was bullied and harassed by his supervisors, the Brandon Act passed the House last month as an amendment to the fiscal 2021 defense policy bill. Aircrew Aviation Electrician's Mate Striker Brandon Caserta's experience was first reported in an award-winning article on Military.com.

The Brandon Act would provide troops a path to confidentially requesting a mental health evaluation and treatment without command notification, similar to an option available to troops for reporting sexual assaults without launching a formal investigation, known as a restricted report. Under the proposal, service members would be able to use a safe word or term while seeking an evaluation or treatment that would guarantee confidentiality.

McSally, a retired Air Force colonel who disclosed during a Senate hearing last year that she was raped while serving in the military but did not report it, said the Brandon Act is needed to help "break the stigma around mental health." "Bullying and abuse have no place in our military. The bullying Brandon Caserta experienced in his squadron is heartbreaking, and what's worse is that he was unable to get the mental health treatment he needed," she said. Caserta, 21, died June 25, 2018, in Norfolk, Virginia, after struggling for nearly two years at Helicopter Sea Combat Squadron 28. Caserta initially joined the service to become a Navy SEAL, but was forced to drop out after breaking his leg during Basic Underwater Demolition/SEAL School.

He was unhappy in his assigned rating and also served under a lead petty officer who frequently abused, cursed and mocked sailors under his command. Caserta also was harassed by command leadership for not producing a driver's license and spent months at a time assigned to sell snacks at the unit canteen. When he broke a collarbone and was sidelined at work -- an event that reset the progress he'd made on earning his professional qualifications for his ratings from 72% to zero -- Caserta told his parents he was "done," according to his suicide note. "Everything I worked for was gone in a moment's glance," he wrote.

While Caserta texted and talked frequently with friends and told some that he was struggling, his parents, Patrick and Teri Caserta, said he seemed to have few options for getting medical care, including mental health treatment. Since his death, they have raised awareness of the impact of "toxic leadership" on junior military personnel and fought for legislation to protect service members and provide them better access to behavioral health. "The Brandon Act would carry on his legacy by ensuring all service members can ask for help with no risk of retaliation when they are struggling," the Casertas said in a release.

While McSally's introduction of the Brandon Act in the Senate does not guarantee that the bill will become law, it makes it more likely that senators will seriously consider the proposal, given it has passed the House. The House version was sponsored by Rep. Seth Moulton (D-MA). McSally initially attempted to introduce the bill as an amendment to the Senate's version of the National Defense Authorization bill -- a move that would have ensured its passage if President Donald Trump does not veto it -- but Senate leadership accepted very few amendments from members during this year's legislative process.

The Defense Department's Annual Suicide Report for 2018 found the suicide rate among active-duty U.S. service members was 24.8 deaths per 100,000 troops, the highest on record since the DoD began tracking suicides closely in 2001. The age-adjusted suicide rate in the general population in 2017 was 18.2 deaths per 100,000, according to the DoD. In 2018, the Army had the highest number of active-duty suicides in 2018, 139, for a rate of 24.9 per 100,000. The Navy experienced 68 deaths, a rate of 20.7 per 100,000, while the Air Force had 60 suicides, a rate of 18.5 per 100,000. The Marine Corps had 58, or 31.4 deaths per 100,000. According to the report, of the 325 service members who died by suicide that year, more than half -- 53% -- had contact with the military health system in the 90 days before they died, mainly a general appointment (48%) or a mental health visit (30%).

The Casertas said 28 JUL that the bill will ensure that "no service member will be left behind." "The Brandon Act brings us peace of mind that all service members will be able to get the help they need when they need it the most," they said in a statement. If you or someone you know needs help, the Veterans Crisis Hotline is staffed 24 hours a day, seven days a week, at 800-273-8255, press 1. Services also are available online at <u>www.veteranscrisisline.net</u> or by text, 838255. [Source: Military.com | Patricia Kime | 30 Jul 2020 ++]

PTSD & TBI

Update 07: S.785 | Mental Health Care Improvement Act of 2019

The top Veterans Affairs lawmaker in the Senate pledged to pass a major veterans' mental healthcare bill in a letter to America's veterans ahead of Memorial Day. On 5 AUG, the Senate made good on that promise. That legislation is the **Commander John Scott Hannon Veterans Mental Healthcare Improvement Act**. It was one of the first bills unanimously passed out of the committee in January after Sen. Jerry Moran (R-KS) took over as Senate Veterans Affairs Committee chairman for Sen. Johnny Isakson (R-GA) upon his retirement. The omnibus bill is named for Commander John Scott Hannon, a former leader of SEAL Team Two, member of SEAL Team Six and Special Operations and policy staff officer at U.S. Special Operations Command, who retired in 2012. Six years later, Hannon died of suicide after 23 years of service.

Hannon received treatment for post-traumatic stress disorder, traumatic brain injury, severe depression and bipolar disorder at the VA in Montana. He was committed to helping others while seeking his own recovery. Volunteering with the National Alliance for Mental Illness he spoke candidly at events about his wartime injuries. "Scott was open about his invisible wounds of war and found solace and recovery in many of the causes that also allowed him to give back to his fellow veterans and his community. He was passionate about improving veterans' access to mental health care and integrating service animals into mental health care. Scott worked closely with Montana Wild and VA Montana to develop a group therapy program for veterans that involved birds of prey. Scott was embraced on his

journey to recovery by his family, friends, and community. He died from his invisible wounds of war Feb. 25, 2018," his biography reads.

VA data shows an estimated 20 veterans die by suicide daily, and that number has stagnated or even worsened in recent years, despite continued spending and expanded programs and services aimed at preventing those deaths. Nearly 79,000 veterans died by suicide from 2005 to 2017 -- more than the total number of American service members who died in Vietnam, Afghanistan and Iraq. On the House floor 5 AUG, Moran said there is "no single explanation or reason for suicide and there is no single treatment or prevention strategy. We all have the obligation to help those who served our nation ... to help fix this tragedy. Every day that we fail to act we lose another 20 veterans to suicide ... They need our help."

Senate Veterans Affairs ranking member Jon Tester (D-MT) said "there is no better way of supporting our veterans than passing this bill" and promised that it "isn't the final bill" Senators will pass this year to aid veterans, but "today we can be proud of senators for doing something that needed to be done that's going to help our veterans and move this country forward." The bill aims to improve mental health care provided by the Department of Veterans Affairs through initiatives including:

- Expansion of care to veterans with other-than-honorable discharges;
- Transition assistance;
- Providing private grants to local groups working to help vets;
- Calling for a study of complementary and alternative care such as animal therapy, yoga, meditation, acupuncture and tai chi;
- Studying how effective VA efforts so far have been to combat suicide;
- Hiring more suicide prevention coordinators for each VA.

The bill would provide about \$174 million over five years for VA mental health care services, including the grant program for local organizations. "This bipartisan legislation will give the VA and communities serving veterans across the nation the necessary tools and resources to better serve you in several key ways. This legislation will provide funding to organizations already serving you in our communities across the country in an effort to bolster their work so that you may benefit, and will direct VA to begin targeted precision medicine research which will greatly improve how mental health conditions are diagnosed and treated," Moran wrote in a letter addressed to the nation's veterans ahead of Memorial Day. "This crucial bill will provide greater access to the care you deserve, improve rural access to mental health care and make targeted investments in promising innovative and alternative treatment approaches."

Now that it has been approved by the Senate, the bill moves on to the House for consideration, but the timing of the bill's Senate passage could complicate things as Congress heads toward a recess through the beginning of September, returns for a short secession and then breaks again ahead of the election. There are signs of support in the House for the bill, but it could face some partisan fights. The bill shares priorities and goals with several suicide prevention bills under consideration by the House Veterans Affairs Committee and ranking member Rep. Phil Roe (R-TN) called for a quick vote on the Hannon bill.

"It includes numerous provisions that would help fulfill our calling to support and protect veterans at risk," Roe said in a statement following the Senate vote. "While we cannot bring the thousands of (veterans lost to suicide) back, we can solemnly honor them and all of our nation's veterans by delivering this bill to President Trump's desk without any further delay." But the House may look to reconcile the Senate's version with its own suicide prevention priorities, which include body cameras for VA police, additional efforts toward safe firearm storage for veterans, more requirements for community groups that could receive VA grants to help combat suicide and more.

If the House does pass the Hannon bill, though, it could set 2020 up as a key year for veteran suicide prevention efforts in Congress. "Our nation has a duty to make certain that you have the support and resources you need. You are highly capable and motivated individuals, who are a valuable addition to any community — yet too often the invisible wounds of war can go undiagnosed and untreated," Moran said. "For those of you who might be experiencing

those wounds, I want you to know that you are not alone, we appreciate you and you deserve the best our nation has to offer." [Source: ConnectingVets.com | Abbie Bennett | August 05, 2020 ++]

VA Women Vet Programs

Update 40: S.514 | Deborah Sampson Act

A landmark bill designed to improve women's health services in the Department of Veterans Affairs took a step closer to becoming law 5 AUG with a Senate committee's advance of the Deborah Sampson Act. The Senate Veterans Affairs Committee approved the proposal unanimously, sending it to the full Senate for consideration. The legislation was approved overwhelmingly in the House last October in a 399-11 vote.

The measure, S. 514, would require the VA to offer primary care for female veterans at all medical centers and clinics, expand eligibility and access to counseling for female vets who experience sexual trauma, improve standards for providing women's health care services and provide access to counseling for post-traumatic stress disorder at retreats. The proposal also would require the VA to offer gender-specific medical equipment such as mammography machines at each VA medical center, expand health care coverage for newborns of veterans from seven to 14 days, and establish a VA Office of Women's Health.

The measure was sponsored in the Senate by Jon Tester of Montana, the committee's ranking Democrat. He attributed the measure's passage to efforts to educate lawmakers on the barriers that women and minority veterans face in obtaining health services and benefits at the VA. "Women are the fastest growing population in the VA, and the VA needs to be fully prepared to meet those needs that women have," Tester said following passage. Sen. John Boozman (R-AR), the bill's co-sponsor in the Senate, also praised its passage. "This is the first important step in ensuring women veterans have access to care in a manner that is supportive to their needs. With more women answering the call to uniform ... we must ensure that we provide the very best," Boozman said.

The legislation is named for Revolutionary War veteran Deborah Sampson, a Massachusetts woman who disguised herself as a man in 1782 and enlisted under the name Robert Shurtleff. She served 17 months with the 4th Massachusetts Regiment and was wounded in combat, reportedly refusing medical treatment for a musket injury out of fears she would be identified as a woman. The compendium bill has been a primary focus of several veterans advocacy groups, including Disabled American Veterans and Iraq and Afghanistan Veterans of America. The organizations have pressed for passage since the legislation was first introduced in 2017. "The specific needs of women veterans are not being met," IAVA CEO Jeremy Butler said after passage in the House. "[This] brings us one step closer to providing the equal level of health care and resources women veterans desperately rightly deserve." [Source: Military.com | Patricia Kime | August 6, 2020 ++]

VA Disability Benefits Questionnaire

Update 01: S.1422 | Improve Vet Ability to Access/Submit

On 5 AUG, Sens. Jon Tester (D-MT) and Mike Rounds (R-SD) introduced VFW-supported S.4412, to improve the ability of veterans to access and submit disability benefit questionnaire forms. This important legislation would require VA to publish Disability Benefits Questionnaires (DBQs) on a public website. DBQs were introduced in 2010 to streamline the collection of medical evidence in support of disability benefits claims.

DBQs are standardized forms used by clinicians performing disability examinations (also known as Compensation & Pension exams, or C&P exams). There are more than 80 different DBQs. The majority of DBQs are for entire body

parts or systems, like respiratory conditions, but there are a few specific conditions, like sleep apnea, that have their own DBQ. A disability examination must usually be completed by a physician before the VA will pay a veteran disability benefits. For example, the DBQ for shoulder and arm conditions requires the examiner to note how much a veteran's range of motion is limited, how much strength in the joint is decreased, how much pain the veteran experiences, and how much these measurements change after repeated motion. Often, the forms have checkboxes that can be completed by the physician with little or no explanatory writing or having to know detailed standardized medical codes. This data is then transmitted to the VA, which compares it against the Schedule of Rating Disabilities written into federal law and makes a disability percentage determination.

Until recently, both VA and private medical physicians were permitted to use DBQs. As stated by VFW National Legislative Service Deputy Director Matthew Doyle, "For more than a decade, VA physicians and private medical providers used DBQs to supplement evidence in support of disability claims. This April, VA removed public-facing DBQs from its website, thereby preventing private medical providers and veterans from accessing these forms." [Source: VFW Action Corps Weekly | August 7, 2020 ++]

Vet Treatment Courts

Update 03: H.R.886 Signed into Law by Trump

Veterans needing help with mental health and other issues soon will have the ability to possibly get into a treatment program rather than deal solely with the threat of jail time. President Donald Trump on 8 AUG announced he signed the bipartisan **Veteran Treatment Court Coordination Act** into law. "With this new law, thousands more veterans across the country facing the criminal justice system will have an alternative to jail time, ensuring they get the treatment they need," Rep. Charlie Crist (D-St. Petersburg) said in a news release. Crist and Rep. Elise Stefanik (R-NY) introduced the bill in November 2017. "Our local Tampa Bay veteran's courts have been a lifeline for so many, and were the model for this legislation. The funding and resources being made available under this law will go towards standing up many new Veterans programs, and expanding current ones," Crist said.

The law creates a program within the Department of Justice, in coordination with the VA, to provide grants, training and assistance to state, local and tribal governments to set up and maintain treatment courts, the release reads. Crist also secured \$30 million for the courts that was included in the last appropriations funding package that recently passed the U.S. House of Representatives.

Victor Neglia, a veteran in the Tampa Bay area, in August 2018 was the first graduate of the Hernando County Veterans' Treatment Court program. After being honorably discharged from the Army, where he served from 1979-81, he suffered from PTSD and substance abuse issues. He ended up getting arrested after blacking out at a bar and stealing money. Neglia found out he was not taking the proper medication, and the veterans' court program allowed him to get the treatment he needed rather than go through a regular court proceeding for a felony charge. "There is a high prevalence of PTSD, traumatic brain injury, and major depressive disorder among combat veterans," Circuit Judge Donald Scaglione said at the time. "This program recognizes the unique challenges facing veterans and connects them to the services they need." [Source: Tampa Bay News | Andrew Krietz + August 8, 2020 ++]

Disabled Vet Housing Grants

H. /S.2022 | Signed into Law by Trump

President Donald Trump signed a bill into law 9 AUG to increase funding and access to a grant program that allows certain disabled veterans to modify their homes to meet their physical needs. The Ryan Kules and Paul Benne Specially

Adaptive Housing Improvement Act of 2019, H.R. 3504, updates a Department of Veterans Affairs program that provides money for veterans with certain permanent, service-connected disabilities, with the most common being bilateral amputees and paralyzed veterans. The new law increases the funding available to those veterans from about \$85,000 to about \$98,000. It also extends the benefit to blind veterans and allows beneficiaries to access the funding up to six times instead of three. During a news conference from Trump National Golf Club in Bedminster, N.J., Trump thanked everyone who worked on the legislation and noted the importance of expanding the benefit to blind veterans.

Former Army Capt. Ryan Kules, a double amputee for whom the House version of the bill was named, has spoken about how beneficial the grant can be and how extending it to veterans multiple times would improve their quality of life drastically. He was able to use the full grant when he purchased his first home. However, once he needed to buy a larger home to accommodate his growing family, the cost of widening hallways and adding other wheelchair-accessibility improvements was at his expense. "I know the difference that these benefits can make on a warrior's home life and I experienced their shortcomings as well," Kules said. The changes, he said, "ensure that warriors who are severely injured and paid a heavy, heavy sacrifice for their country have the appropriate adaptations to live in their homes, not only today, but for many tomorrows down the road."

Paul Benne, the retired Army colonel for whom the Senate version of the bill was named, died in December before seeing it pass. He was 54. Trump signed two other veteran-related bills into law Saturday, according to a news release from the White House. H.R. 886, the Veteran Treatment Court Coordination Act of 2019, requires the Justice Department, in coordination with the Department of Veterans Affairs, to establish a Veterans Treatment Court Program. H.R. 4920, the Department of Veterans Affairs Contracting Preference Consistency Act of 2020, provides for an exception to certain VA small business contracting requirements. [Source: Stars & Stripes | Rose L. Thayer | August 10, 2020 ++]

VA Records

Update 05: HR.7926 | Allow Electronic Request of Certain Records.

On 5 AUG, Reps. T.J. Cox (D-CA) and Chip Roy (R-TX) introduced H.R.7926, *to allow for the electronic request of certain records*. This legislation would require VA to permit veterans to request copies of their entire disability claims file online. These files contain comprehensive information regarding the evidence a veteran submitted in support of a claim, information VA obtained from third parties, and a record of requests for higher-level review and supplemental claims. [Source: VFW Action Corps Weekly | August 5, 2020 ++]

National MOH Monument

Update 01: S.4433/HR.5173 | National Medal of Honor Monument Act

If two senators get their way, Washington, D.C., will make way for another monument -- this time, to honor Medal of Honor recipients, according to bipartisan legislation introduced 5 AUG. The National Medal of Honor Monument Act, introduced by Sens. John Cornyn (R-TX) and Tim Kaine (D-VA) would authorize the National Medal of Honor Museum Foundation to build a monument in recognition of the more than 3,500 recipients who represent its values and performed acts of extraordinary valor in combat. "The United States is forever indebted to our courageous women and men in uniform. Thanks to their service, our nation has overcome monumental challenges," Kaine said in a statement. "Establishing a National Medal of Honor Monument will help allow all Americans to reflect on the sacrifices service members have made in defense of our freedom."

Federal funds will not be used to pay for the monument, according to the legislation. The foundation said it will be responsible for raising funds from private and public donations. "The location and design of the D.C. monument are undetermined since the legislation that was just introduced only authorizes the National Medal of Honor Museum to begin planning," said Holly Jackson, a spokesperson for the museum. "We hope it will be a place to be inspired by the valor and values of the Medal of Honor. We also see it as a location for further Medal of Honor Day activities and potentially for Medal of Honor ceremonies."

Another project under the management of the foundation -- a National Medal of Honor Museum in Arlington, Texas -- is scheduled to open to the public in 2024 with permanent, interactive experiences, rotating exhibits and an education center, according to the foundation. "It is past time to build a monument in recognition of the heroic patriotism and sacrifice of the Medal of Honor represents, and I look forward to seeing this bill pass both chambers of Congress," Rep. Ron Wright (R-TX), a co-sponsor of the House version of the bill, said in a statement. The foundation will raise funds for the monument and the museum simultaneously, according to Jackson. The initial estimate for the monument's design and construction is approximately \$40 million.

"The design of Arlington museum has been selected; that will be revealed to the public in early October," said Chairman of the Foundation Board of Directors Charlotte Jones. "Fundraising is very strong; the initial design and site surveys are being completed for pre-construction work to begin in mid-2021." The museum's president expressed excitement for the proposed monument. "I cannot think of a better way to bring Americans together than to build this monument in our nation's capital," said Joe Daniels, the museum president and CEO, in a statement. "Along with the National Medal of Honor Museum in Arlington, Texas, it will allow Americans from every corner of the country to pay homage to the Medal and the amazing courage and patriotism it stands for."

"The National Medal of Honor Monument is not just about the valor, it's about the values the Medal of Honor represents. We owe it to future generations of Americans to educate them on the extraordinary patriotism and service that have always protected our freedoms, so that they can be better citizens for it," Patrick Brady, a retired Army major general, Medal of Honor recipient and member of the National Medal of Honor Museum's board of directors, said in a statement. "That's why it's so important for Congress to pass the National Medal of Honor Monument Act." [Source: Military.com | Bing Xiao | August 7, 2020 ++]

Senate Vet Bill Progress 01 thru 15 AUG 2020

The Senate Veterans Affairs Committee on 5 AUG approved a number of measures. The bills approved must be voted on in the Senate and signed by President Donald Trump before becoming law.

- A bill that would require the VA to study the relationship between exposure to pollutants at Karshi-Khanabad and illnesses seen in veterans who served there, including cancer.
- A proposal to provide testing and health services to veterans sickened by exposure to hazardous chemicals in combat or garrison, as well as one that recognizes that veterans who served overseas in certain locations were exposed to potentially harmful airborne pollutants.
- A bill to support construction of VA nursing homes on private lands
- A bill to expand eligibility for mental health services at the VA for National Guard and Reserve members
- A bill to eliminate the manifestation period limits for three conditions presumed to be related to Agent Orange: chloracne; porphyria cutanea tarda; and acute and subacute peripheral neuropathy
- A bill to require the VA to launch a pilot program to study the benefits of programs offered at veterans retreats and nonprofits that focus on "posttraumatic growth" -- life coaching and other therapies -- to help former service members with post-traumatic stress disorder.

Earlier this week, senators also introduced several other bills to help K2 veterans, but the proposals have yet to be considered by the committee. They include legislation from Democratic Sens. Richard Blumthal of Connecticut and Tammy Baldwin of Wisconsin that would require the VA to provide health care and benefits to all K2 veterans, and a bill from Baldwin and Sens. Marsha Blackburn (R-TN) and Dianne Feinstein (D-CA) requiring the DoD to conduct an epidemiological study and for the VA to include K2 veterans in in its Airborne Hazards and Burn Pits Registry, as well as the DoD and VA depleted uranium medical programs. [Source: Military.com | Patricia Kime | August 6, 2020 ++]





COVID-19 Convalescent Plasma

Update 02: MHS Asks Recovered to Donate Plasma for Seriously III



Phlebotomist assigned to Naval Medical Center San Diego, sets up an apheresis machine for drawing plasma at NMCSD's Blood Donation Center

The COVID-19 Convalescent Plasma (CCP) Collection Program is a Department of Defense effort to collect 10,000 units of CCP donated by members of the military community who have recovered from the disease. CCP will be used to treat critically ill patients and to support the development of an effective treatment against the disease. Eligible donors should contact the Armed Services Blood Program at https://www.militaryblood.dod.mil/Donors/COVID-19andBloodDonation.aspx to find a complete list of available collection centers.

Patients who have recovered from COVID-19 can expect a call from a military hospital or from the Armed Services Blood Program (ASBP) alerting them of the opportunity to donate their plasma to help critically ill patients recover. The calls are part of the Military Health System response to the pandemic. "The ASBP celebrates those who have fully recovered from COVID-19. We are asking for you to consider donating plasma via apheresis or whole blood donation process to help give others a fighting chance," said Army Col. Audra L. Taylor, ASBP division chief. Blood collection agencies such as the Blood Centers of America, the American Red Cross, and the ASBP are <u>collecting</u> COVID-19 convalescent plasma, or CCP. Plasma collections based on MHS outreach follow safety guidelines set by the Food and Drug Administration.

The ASBP provides blood products to the MHS and helps meet demand within the Department of Defense, said Army Col. Jason Corley, director of the Army Blood Program. The CCP collected will help beneficiaries within the MHS, but it's also a readiness issue, he said. "If a donor donates today, it [the plasma] could be used in one of our garrison hospitals, or it could be sent aboard a Navy ship or to our forces in U.S. Central Command to make sure they have it on hand and are medically ready," said Corley. Frozen plasma can last up to one year, he added. "It's definitely a way to treat the force and protect the force."

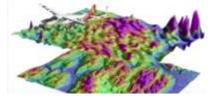
Representatives from military hospitals and the ASBP are calling recovered patients to inform them about donating plasma and explain donation requirements. Potential donors who have recovered from COVID-19 must be symptomfree for at least 14 days since they were last tested positive. The ASBP will test the donated plasma for SARS-CoV-2, the virus that causes COVID-19, antibodies and alert the donor with a written letter about the presence of such antibodies, Corley added. Those who are eligible may donate whole blood every eight weeks or plasma by apheresis more frequently based on blood donor center guidance and donor qualification.

The ASBP is collecting CCP donations at nearly all of its donor centers with the exception of the Pentagon Blood Donor Center. Donating plasma can take anywhere between 45 and 90 minutes, producing two to three units from one visit. Anyone who has questions about the MHS outreach effort to collect donated COVID-19 convalescent plasma can contact their local blood center by visiting the <u>ASBP website</u>.

"For those who have donated, whether for CCP or regular blood donations, we at the ASBP want to sincerely thank you for taking time to do that," said Corley. "We encourage everyone, regardless of whether you've been COVID-positive or not, if you're interested in blood donation, please reach out to us. We always need help and we couldn't do this without our volunteers." [Source: Health.mil | August 4, 2020 ++]

GPS Alternative

Update 01: USAF's Latest - Earth's Magnetic Fields



A map of magnetic fields for navigation

Military leaders have been warning of the fragility of GPS for years and researchers have been working on a variety of solutions, from quantum clocks to inertial navigation. The Air Force is adding a new one, using the earth's magnetic fields as a secure way to detect location for aircraft and possibly other vehicles.

Magnetic fields emanating from the earth's surface vary in intensity, just like topography, and so-called magnetic anomaly maps of those fields have existed for years. Back in 2017, Aaron Canciani, an assistant professor of electrical engineering at the Air Force Institute of Technology, set out to see if magnetic sensors (magnetometers) affixed to aircraft could measure the intensity of those magnetic fields and, thus, locate the plane based on where it was in relation to those "landmarks." His paper (and this video) shows how to outfit a Cessna plane with magnetometers in the rear and the front. Forty flight-hours' worth of data and a lot of work reducing noise from the readings proved the idea viable.

But swapping magnetic fields for GPS isn't easy. Unlike a crisp clear signal from space, factors such as the electrical operations of the plane itself — can interfere with a sensor's ability to detect the strength of the field. This is where artificial intelligence comes in, canceling out the noise from the sensor readings to allow for a better signal

and more accuracy. Researchers in the Air Force's-MIT Artificial Intelligence Accelerator community, working with scientists at MIT, continued to work on the problem, publishing their own paper in July. They showed that magnetic field readings can be accurate to ten meters, only slightly inferior to GPS, which is accurate down to three meters.

But magnetometer readings are much less easy to jam than GPS signaling. GPS readings rely on a signal sent along a specific wavelength across vast distances. Magnometers just have to read the magnetic environment around the vehicle. "Because of the size of the earth and the magnetic field... it takes a whole lot to jam a signal coming from the earth, and by a whole lot I mean on the scale of a nuclear blast," Maj. David "Stitch" Jacobs with the accelerator told Defense One. "Apart from that, it would take a giant scale of a machine to block what's coming from the earth's crust. But then you could also cancel it out with machine learning" The Air Force, working with MIT as part of a new joint accelerator program, has posed a challenge to the open AI community to help with refined AI tools to improve the magnetic field navigation. The challenge closes on 28 AUG

In something of an unusual step for the military, Air Force leaders are sharing their dataset with the open research community as part of the program. The government generally doesn't "like to just give up data," said Michael Kanaan who directs AI and machine learning for the deputy director of Air Force Intelligence. Instead of using the more burdensome contracts that the military typically uses with defense contractors, Jacobs worked with the Air Force general counsel to create a new sharing license for the program that much more closely resembles the sort that academics use when working on open-source data programs. The click through agreement stipulates that the user has to be using the data for research purposes and will report the results back to the AI community as whole. "That was something we created just this year and it's already being executed in several projects, including this one," Kanaan said. [Source: Defense One | Patrick Tucker | July 31, 2020 ++]

Military Laser Program

Update 01: Army Starts Construction on Prototype Lasers

After years of lower-power field tests and more than one thousand hours of soldier feedback, the Army is on track to field-test two different types of high-energy lasers in 2022: a 50-kilowatt weapon to destroy enemy drones and incoming artillery rockets, and a 300-kW weapon that could potentially shoot down cruise missiles. Key components are now under construction for both systems, the directed energy chief at the Rapid Capabilities & Critical Technologies Office said. Its Director Craig Robin said ahead of the 4 AUG Space & Missile Symposium, the service plans many more "soldier touch points" to come on both programs, especially once the prototypes are built and available for field tests.



An early experimental laser-armed Stryker vehicle, the MEHEL (left) and an early Army HEL (High Energy Laser) Mobile Demonstrator (right)

Furthest along is the 50-kilowatt laser, to be mounted on an 8×8 Stryker armored vehicle. It's known in Army jargon as DE-MSHORAD (Directed Energy – Maneuver Short-Range Air Defense). Four prototype laser Strykers – a full platoon – will be fielded to an actual combat unit in 2022. "That's real hardware being built now," Craig Robin

said. "The laser weapon hardware exists now; we expect to have them integrated on the vehicles by the end of December."

In fact, there are two competing lasers being built for DE-MSHORAD, one by Northrop Grumman and the other by Raytheon. Each of those lasers will be integrated onto a different Stryker for a "shoot off" – officially, a "performance characterization" – at Fort Sill, Okla. in May 2021, when real soldiers will put both weapons through their places in a realistic combat scenarios. Earlier Stryker-mounted lasers successfully shot down drones in prior field tests with real soldiers. Troops' input in field tests, brainstorming sessions, and reviews of CAD designs helped refine everything from the user interface controlling the weapon, to how equipment should be installed inside the Stryker so the crew wouldn't hit it scrambling in and out. Power output has also risen rapidly in recent years, from just two kilowatts in 2016 to five, to 10, to the 50 kW weapons now being built.

Prime contractor Kord Technologies will integrate both the Raytheon and Northrop weapons, plus a power & thermal management system by Rocky Research, onto the Stryker, with assistance from the vehicle's original manufacturer, General Dynamics Land Systems. The laser-armed DE-MSHORAD will operate alongside the Leonardo DRS IM-SHORAD variant of the Stryker – now in testing – which wields a more traditional anti-aircraft armament of guns and missiles. The Strykers, being off-road armored vehicles, are intended to follow the frontline M1 tanks and Bradley troop carriers. At the same time, the Army is also developing a second echelon of larger lasers mounted on heavy trucks, which trade Stryker's mobility and protection for sheer carrying capacity. This IFPC-HEL (Indirect Fire Protection Capability – High Energy Laser) will work alongside a missile-armed IFPC variant and a high-powered microwave variant – probably based on Air Force experiments – to defend forward command posts and other key sites.

Starting with a truck-mounted 10-kilowatt weapon in 2012, the Army first proposed a 100-kW model and then – boosted by a collaboration with the Office of the Secretary of Defense – decided to go for 300 kW. "We're on track to demo the 300-kW system at the end of 2022," Craig Robin dais, probably around August or September. Critical Design Review is complete and "we're starting to bend metal," he said. "We're moving out and starting to build that demonstrator now, along with OSD." OSD's assistant director for directed energy, Thomas Karr, is leading a multi-service push to scale up laser technology to 300 kW and beyond, enough to kill incoming cruise missiles.

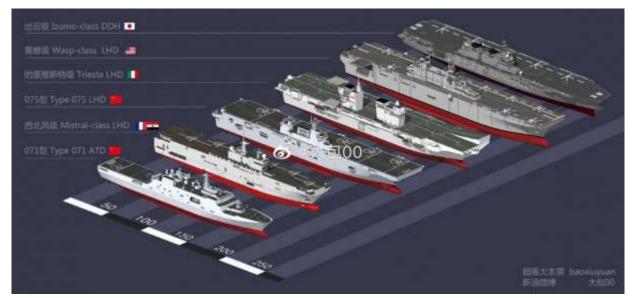
Karr has multiple contractors developing competing approaches, but under his aegis, the Army specifically is working with aerospace titan Lockheed Martin to build the laser itself and with Dynetics to integrate it onto an Oshkosh 10-wheeler truck, the Palletized Load System. If the 2022 demonstration shots go well – and the soldiers' feedback is positive – the Army plans to build and field four HEL-IFPC laser trucks as a combat unit in 2024. [Source: Breaking Defense | Sydney J. Freedberg Jr. | August 04, 2020 | August 4, 2020 ++]

China's New Amphib Warship

Sea Trials Kick Off



The first in a new class of Chinese amphibious warships began sea trials, according to photos released on Chinese social media platforms Pictures showing the People's Liberation Army Navy (PLAN) Type 075 amphibious assault ship (LHD) heading out to sea emerged on the Chinese-language Internet 5 AUG. The Chinese Navy first put the amphib in the water last year and launched another in April, according to a Congressional Research Service report. A 2020 report from the Office of Naval Intelligence says the Chinese Navy is currently constructing three amphibious assault ships. The CRS report, which detailed the capabilities of the Chinese Navy, said China could use the amphibious vessels for various actions ranging from noncombatant evacuation operations to protecting its stated claims in the South China Sea.



Comparison of similar sized big deck amphibious ships.

"Although larger amphibious ships such as the Type 071 and Type 075 would be of value for conducting amphibious landings in Taiwan-related conflict scenarios, some observers believe that China is building such ships as much for their value in conducting other operations, such as operations for asserting and defending China's claims in the South and East China Seas, humanitarian assistance/disaster relief (HA/DR) operations, maritime security operations (such as antipiracy operations), and noncombatant evacuation operations (NEOs)," the report reads, referring to China's Type 071 amphibious transport dock.

The sea trials for China's new amphibious assault ship come as strains between Washington D.C. and Beijing have worsened in recent months amid the ongoing COVID-19 pandemic and the Trump administration's increasingly vocal criticism of China. "The PLAN began development of the Type 075 in 2011 as a helicopter carrier that would displace about 35,000 tons — smaller than the U.S. 45,000-ton Wasp and America-class big decks," USNI News reported last week. [Source: USNI News | Mallory Shelbourne | August 5, 2020 ++]

USMC Rocket Launcher

Marines Getting Upgrade to Their Iconic Vietnam-Era Launcher

The Marine Corps is working to procure and field a next-generation anti-tank rocket launcher system that significantly reduces backblast within the next several years, the service announced on 3 AUG. Army Contracting Command in late July issued a request for proposals on behalf of Marine Corps Systems Command for a new 66mm M72 Light Anti-Armor Weapon (LAW) Fire from Enclosure (FFE) munition developed by Nammo. Unveiled in June 2018, Nammo's new 13-pound FFE system is characterized as a "compact, lightweight, single-shot weapon system" that

incorporates an "improved" launcher with an enhanced in-line trigger mechanism and improved sling design, according to MARCORSYSCOM.

The upgrade doesn't just offer a suite of adjustments to the M72 fire control system, but purportedly all-but eliminate backblast, the heat and overpressure created by each round that can limit the use of anti-tank weapons in combat. According to MARCORSYSCOM, the new M72 system "enables Marines to fire several shots per day from inside a room," a tremendous boon for marines operating from, say, a secure bunker downrange. When firing at night, the upgraded M72's muzzle flash and back blast "is less than that of an M9 pistol," per MARCORSYSCOM. As Task & Purpose previously observed, less backblast and a reduced noise and visual signature will allow troops to unleash on light armored vehicles from fortified, enclosed positions, ostensibly offering an increase in lethality with less risk of opening troops up to enemy fire.



An assaultman, prepares a M72 Light Anti-Tank Weapon (LAW) rocket launcher during a combined arms exercise at the Kaneohe Bay Range Training Facility, Marine Corps Base Hawaii, Aug. 3, 2018

"The new LAW FFE is a true Fire-from-an-Enclosure capability unlike anything the Marine Corps has ever seen," Warren Clare, the program manager for Ammunition at MARCORSYSCOM, said in a statement. "It will become a force multiplier." Grunts appear to agree. In 2018, troops with the 3rd Battalion, 4th Marine Regiment got a chance to test out the new rockets during the Urban-ANTX 18 urban warfare exercise and deemed the new rounds "a game changer," as Lance Cpl. Sam Elichalt told Defense News at the time. First adopted by the Army and Marine Corps at the height of the Vietnam War, the M72 has remained a staple of infantry arsenals for over a half-century.

The new FFE comes in two configurations, according to MARCORSYSCOM: an M72A8 anti-armor warhead and the M72A10 multi-purpose, anti-structure munition that gives Marines the added capability of leveling small buildings. The M72A10 incorporates an advanced warhead design with a multipurpose explosive and a self-discriminating fuse that operates in either fast- or delay-mode based on target construction," Richard Dooley, a project officer for Maneuver Ammunition and Missile Programs with MCSC's PM Ammo, said in a statement. "These advancements enable Marines to engage various targets, such as structures, bunkers and enemy personnel." It's unclear how much the upgrade will cost: funding for a M72 LAW upgrade does not appear in the service's fiscal year 2021 budget request. The service hopes to begin fielding of the new system starting in fiscal year 2022, according to MARCORSYSCOM. [Source: Task & Purpose | Jared Keller | August 4, 2020 ++]

Military Rape

OSI Losses Records on 20-Yr Old Case

A former airman and veterans advocate says two military investigators showed up at her Indiana home unannounced 10 AUG after she recently tweeted about her rape, which happened more than two decades ago. "Just cold-calling a

rape survivor, it's totally fallible," Lisa Wilken said. "... It almost felt like an intimidation tactic." Wilken, 49, served in the Air Force between 1994 and 1996. She is the chairwoman of AMVETS National Women Veterans Committee and testified before a House Veterans' Affairs Committee subpanel in 2013 about her attack, which led to two surgeries and a medical discharge.



Agents with the Air Force Office of Special Investigations (OSI) told Wilken there was no record of her rape when they showed up Monday at her door, asking whether she wanted to file a report now. Her recent tweet about her attack, they said, caught the branch's attention. There should be plenty on file about her case. She has her own copies and showed them to investigators, who were surprised to see them. "I wanted to give those records to show how stupid their visit was. ... It baffles me," she said. She said there was nothing to be done to revisit the case, since her attacker was out of the military. He received an other-than-honorable discharge after an Article 32 hearing and served no time in jail.

"I also don't believe that the United States Air Force will take accountability for their bad decision in 2020 to coldcall a rape survivor, essentially revictimization, about a violent crime that happened in 1994." She said she has a 90% service-connected disability rating from the VA, 50% of which is from post-traumatic stress disorder as a result of the attack, and there was an initial investigation with OSI after the attack when she was 22. Wilken said she is disturbed that OSI has no records of the attack and didn't track down her records from other sources, saying if the Air Force lost them, the Department of Veterans Affairs should have them. Wilken also raised concerns that if the Air Force has no records, there is no evidence of the rape and the chain of command would not have that stain on its record.

OSI did not respond to questions on why military officials were acting on Wilken's tweet and why investigators went to her home as the first means of contact. Stars and Stripes contacted one of the investigators that Wilken said came to her home, but he said military rules forbid him to comment on a sensitive investigation. Wilken said victims of sexual crimes can feel liberated talking about their attacks on social media. If survivors believe the military is looming over their social media, and could come to their homes with no warning, it could be intimidating.

"It came across as big brother-ish," Wilken said. "... I'm not in uniform anymore, I can say whatever I want." She added that she felt pressured to talk to investigators. "It should always be the survivor's choice. They put me in the position I had to talk ... I just want to make sure this doesn't happen to anyone else." She said that there are situations when the military should follow up with survivors, or inquire if veterans want to file reports for long-ago attacks. But Wilken said the first contact should be a phone call or letter. "I don't believe they will use this as a teaching moment within their Office of Special Investigation to do their due diligence before contacting a victim, and to always notify the sexual assault response team prior to making that first contact," she said. "I do know speaking out about this may stop them from behaving ... in this manner again."

The Air Force investigators drove more than two hours from Grissom Air Reserve Base in Indiana. She said she was not told which specific tweet spurred the visit. On 9 JUL, she tweeted a news story about Spc. Vanessa Guillén's slaying, and how the tragic event spurred women across the military to share their stories of rape, sexual assault and harassment. "#IAmVanessaGuillen. They wonder why we don't tell! I told & expected justice. I was so young &

dumb. The prosecutor said to me ... "Lisa, I can prove he raped you, but the rape wasn't violent enough for him to get any real jail time." Government Property," Wilken tweeted.

She first spoke publicly about her rape in 2012 at a conference for female veterans in Indiana. In 2013, The Indianapolis Star reported a detailed account of the rape, the botched investigation and how her attacker essentially walked away. The same story appeared in USA Today. She testified on Capitol Hill in 2013. She also told her story in "Finding the Words: Stories and Poems of Women Veterans," a 2016 book about 10 female veterans. [Source: Stars & Stripes | Steve Beynon | August 12, 2020 ++]

Navy Terminology, Jargon & Slang 'Midwatch thru 'Mustang"

Every profession has its own jargon and the Navy is no exception. Since days of yore the military in general, and sailors in particular, have often had a rather pithy (dare say 'tasteless'?) manner of speech. That may be changing somewhat in these politically correct times, but to Bowdlerize the sailor's language represented here would be to deny its rich history. The traditions and origins remain. While it attempted to present things with a bit of humor, if you are easily offended this may not be for you. You have been warned.

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

Midwatch - A watch stood from midnight (2400) until 4 a.m. (0400). aka "Midbitch," "Midshitter," "Balls to Four," etc.

Mike Mike - Phonetic for 'millimeter.'

Military Power - Aviation term for maximum 'dry' power, i.e. without afterburner.

Milk Bottle Shoulders – Refers to someone who is unwilling or unable to shoulder responsibility.

Mind Your Ps and Qs – In the past, when sailors were paid and went ashore for liberty, the tavern keepers knew how much they were paid. They'd keep tally of a sailor's beer consumption by marking up 'P' for pints and 'Q' for quarts, then settling up with the sailor at the end of the evening. If a sailor failed to 'mind his Ps and Qs,' he'd come up short (or perhaps be cut off by the bartender).

MMR - Main Machinery Room.

Monkey dicks -(1) Sausages, aka "poodle peckers", "puppy peters", etc. (2) The "rubber ducky" antenna of a handheld radio.

Monkey on a stick - Derisive term for dish similar to satay chicken, served on skewers, by street vendors in any port of call. In third-world countries, only consumed by drunk sailors and Marines, due to questionable sanitation practices.

Monkey Fist - The complex knot surrounding (sometimes taking the place of) the weight on the end of a heaving line.

Monkey Shit - Room-temperature-vulcanizing packing material (caulking) used for stuffing tubes, etc.

Mooring Line – Lines used to tie the ship to the pier or to another ship. Mooring lines are numbered from forward aft; the direction they tend (lead) is also sometimes given. 'Number one mooring line' typically is made fast at the bow, and tends straight across to the pier or other ship. Spring lines tend forward or aft of their attachment point.

MPA - Main Propulsion Assistant. Division Officer for MP Division, the group that operates and maintains the ship's main engines.

MSL - (Aviation) Mean Sea Level. Altitude expressed with respect to sea level (i.e. pressure altitude). Used to ensure common reference points for aircraft operating in a common area. Altitudes expressed as MSL have no meaning as far as ground clearance is concerned. See also AGL.

Mud - Coffee.

Mud Duck - Shallow water sailor, e.g. Coast Guard. See also BROWN WATER.

Mud Mover – An aircraft used for support of ground forces, or the pilot of same.

Muscle Bosun - Physical Training rating.

Mustang – (USN) An officer who has 'come up through the ranks', i.e. started out as an enlisted man and earned a commission.

[Source: http://hazegray.org/faq/slang1.htm | August 15, 2020 ++]



WWII Hiroshima Bombing 75th Anniversary

Enola Gay carried 12 men, hope and the world's deadliest weapon. On Aug. 6, 1945, 75 years ago, no one was sure how Special Bombing Mission No. 13, the world's first atomic attack, would go. Would it end in disaster for the crew in Japan? Eight downed American airmen had been beheaded by the Japanese a few weeks before. Would it end in the obliteration of Hiroshima? Would the overweight airplane with the crazy call sign even get off the runway? Would the crew have need for the cyanide? The giant silver bomber roared along the runway on Tinian Island in the darkness, passing the firetrucks and ambulances parked every 50 feet, struggling to pick up speed. "Dimples Eight Two" weighed 150,000 pounds, and with fuel for the long flight to Hiroshima, 12 men on board, and a five-ton uranium bomb in the bay, the B-29 was 15,000 pounds overweight. The pilot, Col. Paul W. Tibbets Jr., 30, had handpicked the airplane on the assembly line in Nebraska three months before and had just had his mother's name, "Enola Gay," painted in black letters on the nose. To read how the mission went check out the attachment to this Bulletin titled, "Enola Gay's Flight". [Source: The Washington Post | Michael E. Ruane | August 6, 2020 ++]

WWII Superfortresses

Role in Ending the Pacific War

Day after day, the planes took off. Sometimes one minute apart, the shiny new "Superfortresses" humming through the sky over the vast Pacific to strike at the heart of the enemy and end World War II. Maj. Jack Koser took to the skies on those never-ending flights. So did 1st Lts. Ed Vincent and Warren Higgins. Fresh-faced they flew. Some, teenagers barely out of high school. Now one has passed the century mark and others are not far behind. Their planes had painted pictures and names like "Flak Alley Sally" and "Lucky Strike" and "Here's Lucky." They hit the Japanese

homeland hard. Fires raged. Mines they dropped dotted the harbors and bays, stalling supplies and choking the country's navy.

Aug. 6, 2020 marked the 75th anniversary of the day that the United States dropped the first atomic bomb, hitting Hiroshima, Japan, and three days later another bomb for Nagasaki. Those historic, cataclysmic events sped up the end of the war and set the stage for the nuclear arms race and subsequent Cold War. The single bomb dropped this day in 1945 killed an estimated 140,000 people from both the blast and aftereffects. But those monumental events have overshadowed harrowing, death-defying and incredible work done by soldiers, sailors and Marines who took blood-soaked islands in the Pacific in the long slog toward Tokyo. And the air and ground crews flying off that hard-won soil to finally reach the heart of the enemy that dared attack the United States at Pearl Harbor.



WWII veterans recall the tough missions leading up to Hiroshima and the efforts to hide the Enola Gay, seen here returning from dropping the atomic bomb on that city 75 years ago

And there was another piece of military technological history that some argue had a larger hand in ending the war than it gets credit for — the B29 Superfortress. Though Tinian was where the famed "Enola Gay" launched its fateful mission to deliver the first A-bomb, it was also home to the 6th Bomb Group, which served as cover for the super-secret mission. The unit also hid the "Enola Gay" for a time, before it loaded its infamous payload "Little Boy" the first Atomic Bomb dropped in war — on Hiroshima, Japan on August 6, 1945.

The 6th Bomb Group, part of the Army Air Corps' 313th Bomb Wing, 20th Air Force, made it to Tinian, one of the last Pacific islands in a chain leading to mainland Japan, months after Allied forces took the island in a battle that lasted just a few days but claimed more than 5,000 Japanese forces and more than 300 U.S. Marines. Koser, Vincent and Higgins served on different crews, but all had similar experiences. They'd signed up with the new Army Air Corps to fly. At first, they'd been trained on the B-17 "Flying Fortress," which was helping win the war in Europe. But that aircraft, as good as it was, couldn't compare to the B-29. And the B-17 just couldn't make the distances needed in this combat theater.

The older bomber could carry a crew of 10, flying up to 287 mph for a maximum range of about 2,000 miles. That might get a crew to Japan. It wouldn't get them back. The new B-29, however, carried an 11-person crew and could go 357 mph for a range of 3,250 mph. The B-29 featured the first ever fully pressurized nose and cockpit in a bomber; an aft area for the crew was also pressurized, making it far more comfortable to fly. And it could carry a lot more bombs. Which is exactly what it did over Japan. Though the first A-bomb changed warfare forever, the bombing runs on Tokyo, some experts argue, may have done as much or more to devastate the Japanese military's will to fight. They claimed as many or more casualties and laid waste to as much territory in an even larger city.

Vincent, 97, was only 19 years old when he flew as a co-pilot on early missions out of Tinian to Japan. He remembers seeing flashes of light from Iwo Jima as Marines took the island to provide bombers a refueling and stopover on their missions to the mainland. Though the tide had turned, ground troops and aircrews had no illusions that the Japanese military would simply surrender. Despite months of sustained bombing and island after island falling, they continued to fight. Retired Marine Maj. John Haynes, 90, was only 15 years old when he landed on Okinawa. He

missed the taking of the island but was likely one of the bodies to be flung ashore on mainland Japan in the seemingly inevitable invasion.

Unknown to the Tinian crews or the Marines slogging through the island campaign, a new weapon was on its way. A few weeks before Aug. 6, 1945, Koser was leading flights over Tinian as they prepped for more missions when he noticed more planes than usual in the 6th Bomb Group formation. Seemed funny, but he didn't take much notice. Higgins and Vincent heard rumors about this new group and noticed that they'd painted the same unit design on the tail of their planes, even though they weren't part of the 6th. They asked, but the new guys were kept off at a distance and didn't really talk much with the other crews.

"When they first came, we wondered what in the world were those guys doing," Vincent said. "They weren't going on any missions. We were going on missions and getting shot at." But, as good soldiers do, these Air Corps members continued on the mission. "I don't think anybody talked about it, we were all scared," Vincent said. His plane alone, "Flak Alley Sally" tallied 141 bullet holes in it from the anti-aircraft fire his crew took over Japan. They flew one mission that was 19 hours 40 minutes long, likely the longest in the history of the war and covered 4,400 miles to reach and mine a harbor in Korea that still had Japanese forces.

Maybe the biggest news of the war came to the soldiers on Tinian almost as an afterthought. "We found out after they dropped it," Higgins, 96, said. "We were there, on the same airfield. They took off from Tinian, but until they bombed, we didn't know anything. We weren't even allowed to talk about atoms, didn't even know what they were." For Haynes and others like him, mopping up continued. He and other Marines were sent to China to accept the surrender of masses of Japanese troops after the surrender.

David Wilson, a co-historian of the 6th Group and son of one of its members, maintains a lifelong personal connection to it through his late father, Staff Sgt. Bernard Wilson. Wilson said that his father was most proud of three things during the war — that he was on the longest bombing mission, that he flew over the USS Missouri as the Japanese high command surrendered, ending the war, and that he was on a mission to bomb the main railroad access that would have helped stall the Japanese should there have been a land invasion by the United States. And it is that mission and the code words that never came to abort a strike on the Marifu Railroad Yards at Iwakuni, Japan, that emerged when memory failed his aging father. "I could go to my dad and ask him 'Daddy what did you have for breakfast yesterday?" Wilson said. "He couldn't remember." But if he asked him about a special code used on that last mission, the response was always there, even at the end of his life. "Daddy, you also told me about that code …" Wilson would begin. "Break, Utah, Utah, Break," his father would respond.

Even though the bombings stopped soon after the atomic weapons were employed, other missions continued. Cpl. Wallace Gake, 94, served on a ground crew and arrived on the island right after the bomb. Many crews went home to leave the Army and start new lives. The rest of the unit was sent to the Philippines. But planes still had to fly, deliver supplies, transport people. And Gake was there for months after, keeping planes running with other maintenance crews. "A lot of times the ground crews get forgotten. We don't drop any bombs and we don't shoot enemy fighters," he said. But for him not much changed. A very noisy life, planes continued to buzz off the island day and night.

It was one of those post-combat missions that remain Koser's lasting memory, 75 years later. "One of the first things I remember is seeing the Great Wall of China," he recounted. Inside his plane, the bomb bays were chock full of food, medicine, even bicycles. All of that with one destination — POW camps that still held Allied prisoners who hadn't yet been reached by ground forces in China. He still remembers flying low, maybe 500 feet off the ground, opening the first bomb bay to drop parachute-rigged supplies. Then circling the camp to see cheering survivors before dropping the second load. "It was a wonderful time," Koser said. [Source: ArmyTimes | Todd South | August 6, 2020 ++]

Historic Soviet Sub Chase

USS Grenadier Chase of 28 May, 1959



The former commanding officer of the Tench-class diesel submarine USS Grenadier (SS-525) recounted the experience of his crew 50 years ago; the events of 28 May, 1959, impacted submarine warfare, especially during the Cold War era. Capt. Ted Davis, a native of Gloversville, NY, who now makes his home in Virginia Beach, Va., was commanding officer of Grenadier that day and can still recall the events as if they happened only five years ago. After 18 hours of tracking a contact through the icy waters of the Northern Atlantic Ocean, the captain and crew of the Grenadier would force the surfacing of a Russian Zulu-class missile-firing submarine. It marked the first time visual and photographic proof of the presence of Soviet submarines in the Atlantic was able to be captured.

Grenadier left its homeport of Key West, Fla., in April 1959, along with USS Amberjack (SS 522), USS Atule (SS 403), and USS Grampus (SS 523), to conduct special anti-submarine exercises in the Northern Atlantic Ocean. Their mission was to patrol the "GIUK gap," a chokepoint from Greenland to Iceland to the United Kingdom. However, their unofficial goal was much different. During Grenadier's overhaul in the Philadelphia Navy Yard, Davis learned of a proclamation from Adm. Jerauld Wright, then commander-in-chief of the Atlantic Fleet. The proclamation was more of a challenge in the form of an award to the first naval unit in the fleet that could prove the presence of a "non-US or known friendly" submarine. The first to do so would be presented an award that was undoubtedly a sign of the times - "one case of Jack Daniels Old No. 7 black label Tennessee sour mash whiskey."

When word came down that Grenadier and three other submarines would conduct operations in the Northern Atlantic after her homeport shift from New London, Conn., to Key West, Davis informed his crew of the added incentive for the deployment. "I put out at quarters, 'Hey guys, there's a case of Jack Daniels involved,'' said Davis, who was 36-years old at the time. "It was a challenge, but I knew the odds of us running into a Russian submarine were about one in a million." Grenadier was on station for several days when Davis received word from his messenger that a contact was nearby. "The messenger came in and told me that sonar had a Soviet submarine," said Davis. "The first thought that came to my mind was that the crew was so good that if they said it was a Soviet submarine, it was a Soviet submarine."

Davis, however, wasn't about to take it for granted. He asked his crew how they were so sure the contact was Russian. "They said they'd been listening to submarines for a long time, and they knew this guy didn't fit any other pattern we had," said Davis. "No American submarines, no British submarines - this was it." Then the contact disappeared only moments after Davis had been convinced by his sonar operators the contact was Soviet. The sonar crew estimated the course of the contact, believing the submarine was heading home to a port in the Soviet Union. Its range was about 20,000 yards and speed about five knots. Davis, a 1947 graduate of the US Naval Academy, instructed his crew to set up two plotting teams, one in control and one in the wardroom, to plan to intercept the contact.

At the time, Grenadier's battery was strong, having charged all night, but later in the day, the air inside Grenadier became a little foul. Technology that would provide submarines the ability to clean the air inside the submarine had

yet to be invented, so submarines would have to surface to vent the sub and take in clean air. Additionally, smoking cigarettes aboard the boat was common and not restricted to the engine room. "A strong battery was more important than anything else," said Davis, allowing his crew to plot a course to intercept the Soviet sub at a speed of approximately eight knots.

"The waiting went on into the early afternoon, when all of a sudden, sonar hollers, 'Contact! Close aboard! Portbow!" said Davis. "To this day, I couldn't tell you if that guy knew where we were, but we could hear him." The Soviet sub immediately "came roaring down at us," said Davis. It reminded him of a recent incident during which a Soviet submarine fired a torpedo deep under a US submarine. The torpedo was intentionally fired deep, but the action achieved the intended effect - the US boat was forced to take evasive action. At the same time, the Soviet sub was able to sneak off in the confusion and noise from the torpedo, effectively breaking the contact. Davis believed the actions by the Soviet sub commander this day might have the same intentions, including forcing the Grenadier to identify it's presence by going to full speed to evade the oncoming Russian sub. He also felt the Soviet commander might try to clip Grenadier's screws, stern planes, or rudder, leaving the boat helpless to continue the pursuit but not in a life-or-death situation.

Grenadier didn't back down, however, maintaining position and, most importantly, stealth. Davis instructed two of his officers who were manning passive and active sonars to maneuver the ship using the sonars' info. But there was one specific instruction - always turn into the contact to avoid presenting the stern to the other submarine. Davis didn't want to present his rudder or screw to the other ship because doing so would leave him vulnerable to a "bump" from the Soviet sub that could damage Grenadier's screw or rudder. Damage to either would force Grenadier to abandon the pursuit, letting the Soviet sub slip away.

"He came within 400 and 800 yards of us, which is awfully close" said Davis. "When I thought that it was about time to turn, I heard, 'Left full rudder! All ahead flank!' The officers in conn were on top of the problem. As he went down our port side, we just curved right in behind him. "He thought he heard something behind him, but he wasn't sure, so he turned around and did it again," said Davis. "Then we did the same thing and fell right in behind him again. Then he took a course for home." The Soviet sub was deep at a speed of five knots; Grenadier trailed 2,000 yards astern. Davis decided to surface. Not only was the air fouled, but it was getting hard to light a cigarette, demonstrating the increasing amount of carbon dioxide in the boat.

While surfaced, he sent a message to Commander Submarine Force Atlantic Fleet: "Have contact on Soviet submarine, can track indefinitely." Davis also requested support from a P-2V anti-submarine patrol aircraft from Patrol Squadron 5 (VP-5) at Naval Air Station Keflavik, Iceland. According to a report, Davis wrote later; he decided to then remain surfaced as long as possible, creating a more significant advantage for himself over the Soviet submarine. Topside watches were organized, and Executive Officer Lt. Cmdr. Ed Welsh took over as a plot coordinator. "We were ready to hold contact for as long as it took to exhaust the adversary," wrote Davis in his report.

Shortly after the P-2V was vectored in, sonar reported the Soviet sub coming up, probably to take a look. One of Davis' junior officers, Lt. Dave McClary, wanted to be a pilot when he first entered the Navy, but poor eyesight prevented further pilot training. He took this opportunity to vector the P-2V over the Soviet sub and was manning the con when the sub's periscope broke the surface. He then expertly directed the P-2V right over the Russian, performing the task to perfection. Flares dropped from the P-2V landed in the water right beside Ivan's periscope. Davis still laughs when he thinks about it. "I swear, that periscope came up, and the flare went 'boomp' right beside it," said Davis. "I said to myself, T'd like to see the look on his face, whoever was looking up through that periscope."

Several more flares were dropped over the next few hours. Davis knew without a doubt the Russian sub was aware of the plane and most likely was now fully aware they were being tracked by a submarine as well. "I thought that was good because if he had any ideas about trying to sink us, we've got a witness in the air," said Davis. After several hours of tracking the Soviet sub from the surface, sonar lost contact. Davis immediately brought Grenadier to all stop. "I passed the word that if you're smoking, dump your ashes in your hand, don't let your ashes hit the deck," said Davis. "That's how quiet I wanted the boat to be."

Davis' sonar officer suggested they go active on sonar. Still, Davis felt the other sub was deep and hovering, and going active would only help him verify Grenadier's position in one last attempt to escape. "We were both dead in the water, so we were just going to let him sit," said Davis. At the same time, the P-2V was running out of fuel and was replaced by another P-2V out of Keflavik. "The second guy was dropping sonar buoys all over the place," said Davis. "I needed that like a hole in the head." By this time, it was almost midnight on 28 May. And Davis knew the time was near. "I thought, this guy was out of air; he's out of battery, he's running out of everything, and he's going to surface at the darkest part of the night," said Davis.

Davis had his sound-powered phone talker pass the word through the ship that the CO expected the submarine to surface a little after midnight. The XO laughed, saying, "There you go again!" "I thought, what the hell, we have to do something to keep (the crew) laughing," said Davis. "But sure enough, at 15 minutes past the hour, sonar hollers, 'He's surfacing! He's surfacing!' So we vectored the airplane over the top of their deck." The P-2V shined a light on the Soviet submarine and took dozens of photographs. Some of the photos showed Russian crewmembers trying to cover the sail area with canvas to hide two missile tubes. "It turned out that we found the first real evidence of a missile-firing Soviet submarine, something our intelligence community was trying hard to get the dope on," said Davis. "Here, we had all the information they needed. We not only satisfied Jerauld Wright. but this was a real break for the intelligence community as well."

The Russian sub stayed on the surface for more than 24 hours, and Grenadier's crew recorded as much information as possible. Once Grenadier had gathered enough information, they were ordered back to their station to continue their participation in the exercise. Once the exercise was over, and Grenadier returned to Key West, an awards ceremony was held, during which Wright presented a case of Jack Daniels Old No. 7 black label Tennessee sour mash whiskey to the crew. The crew of Grenadier would have to accept that as their reward for a job well done because no unit award was presented to the boat for surfacing the Soviet Zulu, but Davis believes the crew was just as happy with the success and the Jack Daniels.

"That whiskey was gone at the next crew party," said Davis, who still has a Jack Daniels bottle from the original case. Empty, of course. Along with the case of whiskey, Wright presented a proclamation to Davis and the crew. The proclamation stated that the presence of unidentified submarines had been reported in the sea lanes off the coast of the US, and those submarines were uncooperative in declaring their identity and intent. But ".through actions of USS Grenadier (SS-525) tangible evidence these surreptitious operations are being conducted has been produced." Davis gives credit for the success of this mission to his crew, many of whom were exceptionally well qualified. "They were truly a magnificent team," said Davis.

Although the significance of the incident can never be sufficiently credited to Grenadier's success, many changes in both navies followed soon after. The Navy commissioned America's first fleet ballistic missile submarine USS George Washington (SSBN 598) in December 1959, and the Russians soon scrapped their Zulu class of ballistic missile submarines. Davis is very proud of the accomplishment, and he fondly remembers 29 May '59" any time someone asks him about it. "We were in the right place at the right time with a great crew," said Davis. He also remembers how some senior officers tried to put the surfacing in a different light.

"The briefing for (the chief of naval operations) with all his staff was amusing in that the surface force admirals were trying to say that it wasn't a submarine that did it because Grenadier was on the surface when the Soviet surfaced," he said. "I just smiled and concluded my remarks emphasizing that it was submariners that did the job, not the submarine itself. In short, it was submariners who got the Jerauld Wright Award, which gave the sub force a great boost."

[Source: USSVI Tucson Base | Dean Lohmeyer | August 2, 2020 ++]

WWI Sgt. Gerald York

Update 01: Profile in Courage



Sergeant Alvin York was seemingly born to a hardscrabble existence and anonymity in death, but World War One changed that forever. The story of York is one that twists and turns like the Mississippi river as he went through redemption and battled personal demons. At the end of it, all was the story that could have secured fame, finance, and his future - but York turned his back on it all to go back to the simple life and try and make a positive impact on the community in which he lived. York's early upbringing laid the foundations for the heroic feats that he would perform later on in life. He was born in a log cabin in 1887 close to Pall Mall in Tennessee, the third of 11 children.

His upbringing was typical of the poor, subsistence farmers living in the area. Alvin was only sent to school for nine months as his father wanted him to help out on the farm and hunt to provide extra food on the table. This lack of schooling may have set York back in some ways, but it gave him the essential skills that he would later use to achieve his fame. When his father died in November 1911, Alvin took charge of supplementing the family income as he was the oldest sibling still living in the area. To do this, he took a job on the railways at Harriman, Tennessee. York was a skilled worker who always had the welfare of his family in his mind, but despite this was a raving alcoholic who loved nothing more than getting into drunken fights. This led the authorities to arrest him on several occasions.

His mother was a pacifist Protestant and tried to get her son and dominant breadwinner to change his ways - although he only did so after his close friend Everett Delk was beaten to death as a result of a saloon brawl. And so York went from one end of the spectrum to another as the former fighter and drinker became a member of the extreme pacifist sect called the Church of Christ in Christian Union - who forbade almost anything fun. As a fundamentalist sect, this church believed in a strict moral code that denied its followers were drinking and fighting. York had undergone a complete moral U-turn, and the consequences of that would trouble his conscious for his whole life in the Army. When York found out that World War One had broken out, it caused him immense trouble. In response to the news, he simply wrote: "I was worried clean through. I didn't want to go and kill. I believed in my Bible."

This conscientious stance to fighting continued into 1917 when he was required to register for the draft. Every man between the age of 21-year-old and 31 were required to do so - however, they could claim exemption from the draft on conscientious grounds. On his draft slip, he simply wrote, "Don't want to fight." As a result, his claim was denied. It's difficult to say what would have happened if York had undergone more than nine months of schooling - had he been able to put his thought down more eloquently, there is every chance his story would never have happened.

In November 1917, York was drafted and sent to Camp Gordon in Georgia to begin his Army service. It was from there that he was drafted into the United States Army and assigned to Company G, 328th Infantry Regiment, 82nd Infantry Division. York remained at odds with his pacifist code and held in-depth discussions with his company commander and battalion commander, during which they quoted him biblical passages that condoned violence. After returning home for ten days to think, York returned to the Army convinced it was his duty to fight for the Lord - and that God would keep him safe. He was then sent to France and served in the St Mihiel Offensive. After the fighting was concluded, he was sent on to take part in the Meuse-Argonne offensive.

On the 8th of October, 1918, York and his unit received an order to capture German positions around Hill 223, which was along the Decauville rail line north of Chatel-Chehery in France. York was about to enter the fight that would earn him a Medal of Honor. Talking about the engagement, he said: "The Germans got us, and they got us right smart. Our boys just went down like the long grass before the mowing machine at home." In short, it was a terrible situation. The enemy held a ridge; they were pouring machine-gun fire into Allied men, and it was taking a horrible toll. They needed a hero, and in the form of an anti-war, deeply religious crack shot, they found one.

Sergeant Bernard Early, four non-commissioned officers including the then Corporal York and 13 privates, were sent to get behind German lines and take out the machine guns. The men worked their way behind the Germans and took the German headquarters in the area by surprise - capturing a large number of the enemy. As Early and his men worked to secure their new prisoners, the German guns on the hill turned their fire on the small group - killing six and wounding three others. Because of the loss, York was now in charge of the men. York then worked his way into position to target the machine guns, after leaving the rest of his squad behind to guard the prisoners.

Using all that knowledge from hunting as well as his incredible skill, York began firing at the guns. There were around 30. In his own words, all he could do was 'touch the Germans off as fast as possible.' But this brought about another moral dilemma for the soldier, who was also calling out for the enemy to surrender so he could stop killing them. At one point in the engagement, six Germans charged York's position - but the man calmly drew his pistol and shot them all down before they could reach him. Eventually, the German Commander First Lieutenant Paul Vollmer took into account his mounting losses and offered to surrender to York - who gleefully accepted. York and the remaining seven Americans then marched 132 prisoners back to friendly lines.

Upon being presented with this haul, York's brigade commander is said to have remarked: "Well York, I hear you have captured the whole damn German army." To which the hero responded: "No, sir. I got only 132." York was promoted to Sergeant and awarded the Distinguished Service Cross, which was swiftly upgraded to the Medal of Honor. France also decorated the man with the Croix de Guerre and the Legion of Honor. Back home in the States, York turned down several offers that would have secured his future - and instead fell into debt by 1921 after several well-meaning public schemes to provide for the hero fell flat.

He also founded the Alvin C. York Foundation, whose goal was to increase education for those in Tennessee, and in 1935 York began work with the Civilian Conservation Corps. During World War II, he tried to re-enlist in the Army but was denied because of his physical condition. York was, however, commissioned as a major in the Army Signal Corps. He had eight children with his wife Grace and died in 1964 in Nashville, Tennessee. [Source: Together We Served Newsletter | July 2020 ++]

French Foreign Legion

Susan Travers | Only Woman Ever to Join

The Legion Etrangere is better known as the French Foreign Legion - a military organization open to men who are foreign nationals. In 1945, however, the Legion made one exception (and so far, the only one) for a very deserving person. Susan Mary Gillian Travers was born in London on September 23, 1909, to a wealthy family. Her father was Francis Eaton Travers, a Royal Navy Admiral, who married the heiress Eleanor Catherine Turnbull for her money. Theirs was not a happy home, and Travers later claimed she was happier the further away she was from it. Susan made up for it by becoming a semi-professional tennis player, financed by a doting aunt who helped her become independent. When the Phony War (precursor of WWII) broke out in late 1939, Travers was living in the South of France and loving it. She joined the Croix Rouge -the French Red Cross. It was a decision she regretted immediately.

Having lived a pampered life, Susan had no stomach for sickness or blood. Instead, she joined the French Expeditionary Force as an ambulance driver. In November 1939, they set out for Finland to help the locals in their Winter War against the Soviet invasion. They were there until April 1940 when Germany invaded Denmark and Norway. The Force fled to Iceland, and from there, back to Britain. Across the English Channel, France had become a divided nation with half (the Vichy French) working with the German occupation and the other half (the Free French) opposing it. Travers opted to fight the Germans by joining General Charles de Gaulle's Free French Forces. She became an ambulance driver for the 13th Demi-Brigade of the French Foreign Legion.

In September 1940, Travers was with the Allies when they attacked the port of Dakar in French West Africa (now Senegal) to dislodge the Vichy forces. They failed and withdrew to North Africa through Dahomey and the Congo, where she continued her duties and lost her squeamishness over blood and gore. The former socialite had no qualms about sharing the same rough conditions, hardships, and risks as the other men - earning herself the affectionate and respectful nickname, "La Miss." Posted to Eritrea, she continued driving for senior officers - showing remarkable skill in avoiding landmines, rockets, and bullets. In June 1941, Travers became the driver for Colonel Marie-Pierre Koenig - her Commanding Officer in charge of the 1st Free French Brigade. Koenig was married, but that did not stop him from having an affair with his new driver and becoming the love of her life.

In May 1942, the couple was with the 8th Army at the Fort of Bir Hakeim in Libya. To one side was the Italian 132nd Armored Division, and on the other were the German 21st Panzer Division and the 15th Panzer Division under the command of General Field Marshall Johannes Erwin Eugen Rommel - the "Desert Fox." The Axis forces were trying to get to the town of El Adem, where the British Royal Air Force (RAF) had a base. Their ultimate goal was the Allied-held city of Tobruk - the most strategic port in North Africa. The reason Rommel was called the "Desert Fox" was that he had proven himself both wily and unstoppable on the African front.

Confronted by the French at Bir Hakeim, Rommel confidently told his men it would be theirs within 15 minutes, possibly less. On May 26, he ordered his fighter planes, tanks, and heavy artillery to attack. The French, however, did not fall within 15 minutes. By June 10, they were still at Bir Hakeim, and Rommel was no longer happy. Neither were the French. They had ordered all their female personnel to leave several days before, and all had - except Travers. She would not leave Koenig behind. With their food, water, ammo, and other vital supplies gone, Koenig had to bow to the inevitable - they all had to leave. To do so, they had to negotiate a minefield and three rings of Axis forces intent on blowing them to smithereens. Or they could surrender. Koenig was not about to do that.

Late at night, he asked Travers to lead the escape in his staff car. She later claimed it was "a delightful feeling, going as fast as you can in the dark. My main concern was that the engine would stall." Thankfully, it did not, but her concerns changed when a mine exploded. Seconds later, tracer fire lit up the skies, followed by tank shells and bullets from every direction. They had to keep going; the momentum could not be stopped. The others followed in their cars - even when she drove straight into a line of parked German tanks. They made it to British lines by 10:30 AM the following day. Travers realized then her car had been hit by eleven bullets, while her shock absorber was gone. Also, her brakes. Of the 3,700 Allied troops who fought at Bir Hakeim, some 2,400 made it out.

Koenig became a hero, and as heroes sometimes do, returned to his wife. Travers continued driving for him until she was injured when he decided to drive and went over a mine. They stopped seeing each other after that. In May 1945, she formally applied to join the Foreign Legion but did not mention her gender. They accepted her, and de Gaul

made her a General. Travers saw further service in Italy, France, and Germany, and later, in Vietnam during the First Indochina War.

She saw Koenig again in 1956 when he pinned the Medaille Militaire on her chest. All he said was, "Well done, La Miss," and that was that. She also got the Croix de Guerre and the Legion d'Honneur in 1996. Travers waited for Koenig and her husband to die before publishing her memoirs in 2000. Called Tomorrow to be Brave, she co-wrote it with Wendy Holden to let her grandchildren know just how "wicked" she had once been. [Source: Together We Served Newsletter | July 2020 ++]

American Revolution's Black Regiment



Acceptance and Impact

The Continental Army was camped for the 1777-78 winter at Valley Forge, twenty miles from Philadelphia, the Britishoccupied American capital. At least a third of the eleven thousand men were without shoes, coats, and blankets to protect them from the constant rain. They suffered from exposure, typhus, dysentery, and pneumonia. Food was running out. Men were starving, dying, the desertion rate was escalating, and the States were unable to meet their enlistment quotas. Able-bodied men were simply not willing to fight. Able-bodied white men that is. As they waited out the winter, General Washington had no plan to replace his dwindling manpower.

It was Rhode Island general James Varnum, who commanded the 1st Rhode Island Regiment at the outset of the war, who offered a solution that would not sit well with Washington. Combine Rhode Island's two depleted regiments into a single formation and send the extra officers home to recruit a new unit consisting of both slaves and free men.

In the early days of the war, free black men were serving as well as slaves who served in place of the men who 'owned' them. In many cases, their enlistment bonuses or even their pay went straight to their 'masters.' Even so, it was known that they fought bravely at Lexington and Concord and at the Battle of Bunker Hill. Perhaps because he was a prominent Virginia plantation owner and slaveholder, this information did not sufficiently impress the General. Soon after his appointment as Commander-in-Chief, Gen. Washington signed an order forbidding the recruitment of all black men. At the outset of the war, he spoke against using black freemen and slaves as soldiers, fearing armed slaves would lead to an armed slave rebellion. But by 1778, things had changed. After intense pressure from the Continental Congress and some of his own Officers, Washington grudgingly agreed to enlist black soldiers into the Continental Army to defend the colony of Rhode Island from the British occupying force. Col. Christopher Greene would remain as the commander of the 1st Rhode Island Regiment.

In February 1778, Rhode Island Gov. Nicholas Cooke and his legislature overrode the objections of slaveholders and passed The Slave Enlistment Act. The law allowed "every able-bodied negro, mulatto, or Indian man slave in this

state to enlist as regular soldiers into either of the Continental Battalions being raised." The law also included the promise that any man, even a slave, who chose to enlist, would be freed on their acceptance into the unit and completion of military service. Slave owners were promised 'compensation for the market value of the individual slave recruits.'

The new law had little effect on public opinion or white male enlistment for that matter, in spite of the fact that the British expeditionary forces and several Hessian regiments of foot soldiers had been an occupying force in Newport, Rhode Island since December 1776. Over the next couple of years, their suppression of trade and forays against the rest of the colony, including their later occupation of Aquidneck Island, was the source of increasing anger, hardship, and frustration among the general public.

One of the recruiting officers, Capt. Elijah Lewis, reported that local whites were warning slaves that those who enlisted would be given the most dangerous assignments and that if taken prisoner, they would be shipped off, "to the West Indies and sold as slaves," and sacrificed in battle by being used as breastworks. To be clear, using men as breastworks meant that these soldiers would face certain death serving as unarmed human shields for the white Continental Infantry soldiers. The six members of the General Assembly who voted against the law issued a formal protest. They argued there was an insufficient number of black men in the state with an inclination to enlist, that the measure would be too expensive, that slaveholders would not be satisfied with the amount of compensation, and that raising a unit of slaves was inconsistent with the principles of liberty that the United States was fighting for.

The majority support from the General Assembly was short-lived. In a statewide election held in April 1778, the voters of Rhode Island demonstrated their discontent by replacing over half of their legislators. One of the first acts of the new administration was to repeal the controversial law. A new edict issued in May declared that the freeing of slaves for military service had only been temporary and that after June 10, "no negro, mulatto and Indian slave, be permitted to enlist into said battalions." Yet during the months that the Slave Enlistment Act was in effect, Col. Greene and his fellow officers recruited over one hundred forty men who were slaves or freed black men. Many had no prior experience handling muskets or other weapons, but after six weeks of training, their commanding officers decided they were battle-ready.

On August 28, 1778, The Regiment saw its first combat at the Battle of Rhode Island. With a garrison of six thousand British and Hessian soldiers, the British army had secured a first-rate port and a strategic base to support its grand plan to split the northern colonies at the Hudson River and subdue an isolated New England. The Continental Army was in retreat as the British tried to trap them in New England. General John Sullivan, whose command included the First Rhode Island, ordered the men to take up positions on the hillsides around the town of Portsmouth located on Aquidneck Island. The British sent up the ships river to bombard the First Rhode Island. The assault from the river continued for hours as more British troops attacked the Continentals from the ground. Weather conditions stopped the expected support for the Continentals by newly arrived French naval forces. Finally, the British command sent in one of its most feared Hessian mercenary units, the Anspach Regiment.

The Hessians repeatedly attacked, but the First Rhode Island held their ground against a force of four thousand professional German soldiers. As night fell, the Hessians made a push that broke portions of the Continental line. The men of the 1st Rhode Island under Col. Greene held their line against three assaults by both British and Hessian troops on the west flank. The courageous fighting by the First allowed the remainder of the Continental Army to escape the British and regroup. The British had failed to overwhelm the American force. While the battle was considered a defeat for Continental forces under General John Sullivan, the Black Regiment's performance prevented a complete rout. Historian Samuel Greene Arnold, in his 1859 History of the State of Rhode Island, reported that the regiment: "distinguished itself in deeds of desperate valor. Posted behind a thicket in the valley, three times, they drove back the Hessians, who charged repeatedly down the hill to dislodge them."

Aquidneck Island remained in British hands for the time being, but thanks especially to the heroic efforts of Col. Christopher Greene's troops, Gen. Sullivan was able to complete an orderly withdrawal of his 5,000-man force to Bristol, RI, and Tiverton, RI. On September 15, 1778, the New Hampshire Gazette reported the retreat was made "in perfect order and safety, not leaving behind the smallest article of provision, camp equipage or military stores." In 1781,

Colonel Greene and many of his black soldiers were killed in a skirmish with American loyalists; Greene's body was reported mutilated. Many believed this was punishment for having led black soldiers.

As troop strength in General Washington's Continental Army diminished, the 1st and 2nd Rhode Island Regiments were joined to form The Rhode Island Regiment which participated at the Battle of Yorktown, Virginia, in 1781. It was the engagement that led to the British surrender and the end of the American Revolution. At Cornwallis's capitulation, the freemen and soon-to-be-freed slaves stood at attention alongside all the other Continental regiments - from Maryland, Virginia, North and South Carolina, and Georgia - and took the salute of the enemy, which until recently had almost destroyed them.

The colonies had won their independence. White soldiers were granted land and a pension. Black soldiers who had been slaves were granted their freedom. According to one historian, the discharged troops were "dumped back into civilian society," with only the white soldiers being guaranteed the one hundred acres of bounty land from the Federal Government, as well as a pension. Gen. Varnum and another white officer from the regiment, Col. Olney, campaigned unsuccessfully on their behalf. In 1794, thirteen of the veterans hired Samuel Emory to present their claims to the War Department in Washington. In 1818, the veterans of the Black Regiment were finally granted Federal pensions, as were all veterans who could prove their service.

Several black veterans of the Rhode Island Regiment are known to history. Ichabod Northup was born a slave around 1745. He enlisted in the 1st Rhode Island in 1778 and served as a fifer. Northrup was among those serving at Croton, New York when Col. Christopher Greene was killed. Northrup was captured, threatened with hanging for not divulging troop movements to the enemy, and spent the remainder of the war as a prisoner. He returned after the war to East Greenwich, purchasing a house that still stands on Division Street. In 1820 he testified that he relied on charity, was unable to work - his toes having frozen in the war, was "impoverished, could not support himself," and family and his house was "much out of repair." On the basis of some five years of service, he was granted a pension under an Act of Congress. He would have been seventy-three years old.

In 1792, Congress passed legislation that limited military service only to "free, able-bodied, white male citizens." [Source: Together We Served Newsletter | July 2020 ++]

WWII Photos

12th SS Panzer Division Normandy Tank



A PzKpfw V Panther Ausf A and crew of the 12th SS Panzer Division "Hitlerjugend" move through the Normandy landscape

VJ Day 15 August 1945 | The Rest of the Story

That is the day Japan surrendered and WWII ended (VJ=Victory over Japan). Here's an interesting piece of history about the actual surrender that took place in Tokyo Bay on the battleship USS Missouri.

Why did the US choose a US Navy Iowa-class battleship as the location for Japan's surrender in World War 2 even though they were in Tokyo Bay and could have used a building on land? Pure symbolism. Nothing says "you're utterly defeated" than having to board the enemy's massive battleship in the waters of your own capital city. A naval vessel is considered sovereign territory for the purposes of accepting a surrender. You just don't get that if you borrow a ceremonial space from the host country. In addition, the Navy originally wanted the USS South Dakota to be the surrender site. It was President Truman who changed it to USS Missouri, Missouri being Truman's home state. The Japanese delegation had to travel across water to the Missouri, which sat at the center of a huge US fleet. It's a bit like those movie scenes where someone enters a big-wig's office, and the big-wig sits silhouetted at the end of a long room, behind a massive desk. The appellant has to walk all the way to that desk along a featureless space, feeling small, exposed, vulnerable and comparatively worthless before the mogul enthroned in dramatic lighting before him. By the time he gets there the great speech he had prepared is reduced to a muttered sentence or two.

In addition, the USS Missouri flew the flag of Commodore Perry's 19th century gun-boat diplomacy mission that opened the closeted Edo-era Japan to the world and forced upon them the Meiji restoration which ended the rule of the samurai class. The symbolism here is pretty clear - "this is how we want you to be, and remember what happens to countries that defy us." It was particularly humiliating for a proud country like Japan, and that was entirely the point. The symbolism of the ceremony was even greater than that. The ship was anchored at the precise latitude/longitude recorded in Perry's log during his 1845 visit, symbolizing the purpose of both visits to open Japan to the West. Perry's original flag was also present, having been flown all the way from the Naval Academy for the ceremony. When the Japanese delegation came aboard, they were forced to use an accommodation way (stairs) situated just forward of turret #1. The freeboard (distance between the ship's deck and the water line) there makes the climb about twice as long as if it had been set up farther aft, where the freeboard of the ship is less.

NOTE: This was even more of an issue for the Japanese surrender party as the senior member, Foreign Affairs Minister Shigemitsu, was crippled by an assassination attempt in 1932, losing his right leg in the process. The #1 and #2 turrets had been traversed about 20 degrees to starboard. The ostensible reason for this was to get the turret overhangs out of the way to create more room for the ceremony on the starboard veranda deck, but in fact this would have only required traversing turret #2 had it been the real reason. In reality, the turret position also put the gun barrels directly over the heads of the Japanese. They were literally standing "under the gun." The honor guard of US sailors (side boys) were all hand-picked to be over six feet tall, a further intimidation of the short-statured Japanese. The surrender documents themselves, one copy for the Allies and one for the Japanese contained identical English-language texts, but the Allied copy was bound in good quality leather, while the Japanese copy was bound with light canvas whose stitching looked like it had been done by a drunken tailor using kite string.

After the signing ceremony, the Japanese delegation was not invited for tea and cookies; they were shuffled off the ship as an Allied air armada of over 400 aircraft flew overhead as a final reminder that American forces still had the ability to continue fighting should the Japanese have second thoughts on surrender.

And now you know the rest of the story ...

[Source: Frontlines of Freedom Newsletter | 14 Aug 2020

My WWII Story

James W. Neel, M-2/302 Inf, 94th Division



Born in dry Central California farm and orchard lands, Jim Neel grew up in Turlock and Modesto, Calif. Jim graduated from Modesto High School at age 17, applied for admission to The University of California's first summer term and was accepted. High school graduation was in June 1943 and Jim's summer term at Berkeley started right away. His 18th birthday was in July and, with less than a month as a collegian, Jim was drafted immediately. Jim responded to the induction center in San Francisco and was accepted into the Army. He was invited to join a program called the Army Specialized Training Program (ASTP), which he accepted. The Army gave him a few months' inactive leave to finish his first semester at Cal and, in December he was activated and on his way to Fort Benning, Ga.

In Georgia, most of his basic training company consisted of other young men who were participants in the ASTP. They all looked forward to completing basic training and going back to school until needed. That changed too. While in basic training (with just two weeks left) the ASTP, which involved over 100,000 other enrollees, was cancelled as the Army needed soldiers NOW! Jim was now going to be an Infantryman (he was already training at Fort Benning). When basic training ended, Jim was sent to Camp McCain, Miss., assigned to Company H, 302nd Infantry, 94th Division to be trained as a heavy machine gunner.

In July 1944, right around the time of Jim's 19th birthday, the 94th Division got its orders for Europe and traveled from Camp McCain to Camp Shanks in New York. From there they traveled to New York where they boarded the Queen Elizabeth for their trans-Atlantic trip (in a varied course to avoid enemy attack) to Scotland. When they boarded the Queen Elizabeth and while still in the port of New York, Jim got the word that M Company, 302nd Infantry had lost their artificer which created a vacancy. He filled the vacancy, not as an artificer, but as a heavy machine gun crewman.

Machine gunners, as independent crews, provided direct support firepower for the rifle companies and were assigned by teams as needed. That meant that the machine gun crews went into combat with people they didn't really know. With this transfer, Jim was now amongst fellow crewmen he had to get to know in a hurry. Training in England continued once they got down to the south of England from their landing port in Scotland. Their training continued until Sept. 8, 1944, when they were ordered across the English Channel to France to replace the 6th Armored Division. The Germans had left behind two large and dangerous pockets of troops along the Brittany coast. American strategy after the initial June invasion was to rapidly pursue German formations and clear them out of western France. This strategy called for bypassing and isolating the German troops at St. Nazaire and Lorient. The 6th Armored had held them in place and now it was the first combat task of the 94th Division to maintain that containment.

According to the U.S. Army Center for Military History, "Following a brief stay in England, the 94th landed on Utah Beach on D plus 94, 8 September 1944, and moved into Brittany to assume responsibility for containing some 60,000 German troops besieged in the Channel ports of Lorient and St. Nazaire. The 94th inflicted over 2,700 casualties on the enemy and took 566 prisoners before being relieved on New Year's Day 1945." The sector Jim was in was pretty quiet – boring, in fact. He never saw the enemy or fired his weapon. The 94th maintained that containment until the end of December when they were ordered east in response to the massive German offensive which history has come to call "The Battle of the Bulge."

The men of the 94th Division got into boxcars and left the Lorient-St. Nazaire sector by rail, heading east. When they got out of the boxcars, they got into military transportation (trucks) which took them to their destination, the Saar-Moselle triangle, facing the Siegfried Switch Line. Although it was the dead of winter and they expected it to be cold, they were surprised by how cold it was and the amount of snow on the ground. Snow was still a novelty to Jim, coming from the hot and dry Central California area, and not a pleasant one. Although they knew they were on the Saar, they didn't know much more, for, as Jim says, "They didn't give maps to privates." Although not briefed in detail it seemed that their mission was to hold the area where they had been dropped off. They spent about two weeks in reserve not seeing any action. Jim had seen large numbers of U.S. tanks along the roads as they approached their area of operation, but to his knowledge they were not committed.

Referring again to U.S. Army's Center for Military History information, "...the Division took positions in the Saar-Moselle Triangle, facing the Siegfried Switch Line, 7 January 1945, and shifted to the offensive, 14 January, seizing Tettingen and Butzdorf that day. The following day, the NennigBerg-Wies area was wrested from the enemy, but severe counterattacks followed, and Butzdorf, Berg, and most of Nennig changed hands several times before being finally secured. On the 20th, an unsuccessful battalion attack against Orscholz, eastern terminus of the switch position, resulted in loss of most of two companies." Although this is an important part of the 94th Division's history, Jim's unit was not involved.

The company Jim's heavy weapons company supported had occupied some buildings that seemed to have been built for troops occupying the enemy's Siegfried line. The rifle company personnel were in a building about 100 yards away from the building that Jim was in as an outpost. The company's building was one story and had a basement. Jim's was a 2-story affair that had wide windows in the second story with no glass left in them, apparently having been blown out before they got there and with as clear a view looking out as the enemy had looking in.

Sometime about the 20th of January, he awoke to see that there were German tanks just on the hill opposite the company position, with German infantry in amongst the tanks. They were quite close. Jim, initially alone in this lookout position, was joined that day by one rifleman who suggested that one of the tanks was close enough that they could probably get him with a bazooka, then left. Another rifleman soon showed up with said bazooka and ammunition. He joined Jim on the 2nd floor and, from their vantage point, took aim at the tank that seemed to be within range.

Jim, acting as loader, put his knee into the back of the gunner to stabilize him. He urged his gunner to hurry up as the tank's main gun was traversing onto them, but he was slower than the tank gunner was. The tank traversed and fired, killing the gunner, knocking Jim to the floor and embedding shrapnel in his leg. The anticipated 2nd round from the tank followed the first, so he flattened out on the floor, waiting for the percussion round's effect. The round came as anticipated and pushed him hard into the floor, knocking the breath out of him. When he recovered enough to move, he found that he could move although with a limp. Jim went downstairs. There, he saw a lone captain (whom he assumed was the rifle company commander) who told him to stay and fight, then left. With that directive and a fresh wound to his right leg, he went back upstairs to spot Germans. This occurred in the morning, and he spent the rest of day on guard.

The Germans seemed to be engaged in a containment operation as no further tank attacks were made until later in the day. While in this outpost with his still untreated wound, he heard the German tanks fire a couple of rounds, presumably into the building where the supported company was located. He then saw that the company was surrendering to the Germans. Jim decided that there wasn't much he could do by himself limping around, so he joined them. The Germans asked for wounded to step forward, and, apparently, he was the only one wounded in this group.

His captors took him away and, after an interview by a German officer, Jim was sent to a German hospital with quarters for American POWs. There were about a half-dozen wounded American POWs there. A British doctor, who had probably been captured in Africa treated his wounded leg, leaving some of the shrapnel in his knee. This hospital stay lasted several weeks before he was moved to the vast German POW camp near Hammelburg. You've all heard of the depredations that existed in German POW camps, and they were all present at Hammelburg. While Jim was there,

contraband radios in camp followed the progress of an American attack group that was coming to their camp on a raid. It was anticipated by the American and Allied prisoners that the raid was intended to free all of the prisoners, but the attacking American elements went only to the officer's compound where Gen. George Patton's son-in-law was held. The prisoners only learned of the failure of the attack the next day when they saw the Germans driving American vehicles around the compound.

As the end of the war neared, American and other prisoners were marched out of their camps, moving continually southeast, living off the land as they walked. This accommodation was better than the accommodations provided by the German camps, where available food and lack of food caused a good deal of illness among the troops. After marching several weeks, the prisoners arrived at the German prison camp at Moosburg. Several days after their arrival, they awoke to find that their guards had disappeared during the night. That same day, American troops came and the repatriation process of rebuilding the men and acclimating them to the soldier's life and routine began. After the repatriation process and a 30-day leave at home, Jim reported to the training base established in Santa Barbara where former POWs were being prepared for the home invasion of Japan. As we all know, that eventuality was not seen due to the deployment of atomic bombs on Japan, and Jim was transferred to Fort Ord, where he served until his discharge. [Source: Legiontown | Mike Morrison | April 18, 2020 ++]

Military History Anniversaries 16 thru 31 AUG

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 AUG". [Source: This Day in History <u>www.history.com/this-day-in-history</u> | July 2020 ++]

WWII Bomber Nose Art [57] Angel's Claymore



Conscription Timelines in U.S. History of Mandatory Military Enlistments

Colonial Period 1600s, 1700s - Each colony forms a militia made up of all adult male citizens.

Revolutionary War (1775 - 1783)- A regular army is raised by offering enlisted men cash bonuses and a promise of free western land after the war is over. When this system does not attract enough soldiers, General George Washington calls on state militias. However these local armies are made up of poorly trained citizens who often have to return home to tend to their farms. Once he becomes president, Washington tries to register all men for service. Congress does not pass his legislation or others proposed by Presidents Adams, Jefferson, and Madison.

War of 1812 - Recruitment efforts include thirteen-month enlistment periods, a sixteen-dollar signup bonus and the promise of three months' pay and one hundred sixty acres of land after service. The Congress authorizes President James Monroe to call up one hundred thousand state militia. Some states refuse.

Mexican War (1846 - 1848) - The one-year enlistment of many troops expires. Military action must wait until replacement troops arrive.

Civil War (1861 - 1865) - The Confederate Army enlists volunteer troops for one-year periods while troops for the North enlist for periods of three or nine months. Eventually, each side turns to conscription as a means of keeping its armies in place after enlistment periods end.

- North In March 1863, Congress gives President Lincoln the authority to require draft registration by all able-bodied men between the ages of 20 and 45, regardless of their marital status or profession. Substitute soldiers are permitted to be hired and for \$300.Many northern businessmen resist service and the Governor of New York, Horatio Seymour, declares the conscription act unconstitutional.
- On July 13, 1863, an angry mob sets off the four-day New York City Draft Riots by seizing the 2nd Avenue Armory and interrupting the selection of registrants' names. Abolitionists' homes, conscription offices and city buildings are burned, shops are looted, and blacks, along with anyone refusing to join the protest, are tortured. About one thousand people die. New York troops are called back from Gettysburg to quell the riot and Gov. Seymour finally urges compliance with the draft.
- South The Confederacy passes their conscription law in April 1862. Three years of military service is required from all white men between the ages of 18 and 35. Substitutes are hired, resulting in poor morale and insufficient numbers of troops. Later, the age limitis extended to include men between 17 and 50, and in 1865 the Confederate Army begins to conscript slaves.

1898 (Spanish-American War) - Congress declares that all males between 18 and 45 are subject to military duty. May 1917 - Congress passes the Selective Service Act, establishing local, district, state, and territorial civilian boards to register men between the ages of 21 and 30 for service in World War One. There is much opposition. During the first drawing, 50,000 men apply for

exemptions and over 250,000 fail to register at all. In one round-up held in New York City in 1918 to catch those who failed to report, 16,000 men are arrested. After the war ends, efforts to set up standard military training and service are defeated in Congress.

1920 - The National Defense Act establishes a system of voluntary recruitment.

- Congress enacts the Selective Training and Service Act. All males between the ages of 21 and 35 are ordered to register for the draft and the first national lottery is held. As World War II progresses, the draft age is lowered to 18 and men are called to service not by lottery number but by age, with the oldest going first.

- Following the attack on Pearl Harbor, Congress gives the president power to send draftees anywhere in the world, removing the distinctions between draftees, regulars, National Guardsmen and Reservists, and creating one army made up of all.

- President Harry S. Truman recommends to Congress that the 1940 Selective Training and Service Act expire and that the level of required military forces be maintained by means of voluntary enlistments.

1948 - The level of military forces falls below necessary numbers just as the Cold War heats up. President Truman asks that the draft be reinstated. The new Selective Service Act provides for the drafting of men between 19 and 26 for twelve months of active service.

- The Korean War draft calls up men between the ages of eighteen-and-a-half and 35 for terms of duty averaging two years. Men who served in World War II do not have to sign up.

- The Universal Military Training and Service Act is passed, requiring males between 18and 26 to register.

- Congress enacts the Reserve Forces Act, compelling every man who is drafted or enlisted to an eight-year obligation to military service. After a term of active duty is completed, one is assigned to standby reserve and can be called back to active duty upon a declaration of war or national emergency.

- Opposition to the war in Vietnam leads to protests against the draft. For the first time since the Civil War, there are anti-draft demonstrations, particularly on college campuses and at www.pbs.org/newshour/extra3military centers. In its U.S. v. Seeger decision, the Supreme Court broadens the definition of conscientious objection to include religious beliefs outside the Christian, Jewish or Muslimtraditions.1966 - In response to anti-war sentiment, President Lyndon Johnson appoints a special study commission to recommend changes in the Selective Service structure.

1967 to 70 - Thousands of young men either destroy their draft cards or leave the country to avoid the draft.

- President Nixon orders the "19-year-old draft": if a young man is not drafted at age 19, he will be exempt from future military service except in the event of war or national emergency. Deferrals are allowed for hardship cases, certain occupations, conscientious objectors, clergymen,

and high school and college students. One year later Nixon will argue in favor of ending student deferments.

1969 - President Nixon orders a "random selection" lottery system for selecting men to serve in the war in Vietnam, changing the previous system of drafting according to age.

1970 - In U.S. v. Welsh, the Supreme Court adds sincerely held ethical and moral beliefs to the definition of allowable grounds for conscientious draft objection.

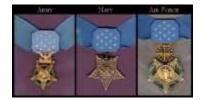
1973 - The 1967 Selective Service Act, extended through an act of Congress in 1971, expires, ending the authority to induct draft registrants. 1980 - The Selective Service System becomes active again.

Present - The U.S. currently operates under an all-volunteer armed forces policy. All male citizens between the ages of 18 and 26 are required to register for the draft and are liable for training and service until the age of 35

[Source: <u>https://www.pbs.org/newshour/extra/app/uploads/2014/03/Timeline-of-of-</u> conscription.pdf | August 2020 ++]

Medal of Honor Citations

Gary Gordon | Somalia



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

То

Gary I. Gordon

Rank and organization: M/Sgt U.S. Army Task Force Ranger, Special Operations Cmd
 Place and date: Mogadishu, Somalia, October 3, 1993
 Entered service: Lincoln, Maine Dec 4, 1978
 Born: August 30, 1960, Lincoln, Penobscot County, ME

Citation

M/Sgt. Gary I. Gordon, United States Army, distinguished himself by action above and beyond the call of duty on 3 October 1993, while serving as a Sniper Team Leader, United States Army Special Operations Command with Task Force Ranger in Mogadishu, Somalia. M/Sgt. Gordon's sniper team provided precision fires from the lead helicopter during an assault, and at two helicopter crash sites, while subjected to intense automatic weapons and rocket propelled grenade fires. When M/Sgt. Gordon learned that ground forces were not immediately available to secure the crash site,

he and another sniper unhesitatingly volunteered to be inserted to protect the four critically wounded personnel, despite being well aware of the growing number of enemy personnel closing in on the site. After his third request to be inserted, M/Sgt. Gordon received permission to perform his volunteer mission. When debris and enemy ground fires at the site caused him to abort the first attempt, M/Sgt. Gordon was inserted one hundred meters south of the crash site. Equipped with only his sniper rifle and pistol, M/Sgt. Gordon and his fellow sniper, while under intense small arms fire from the enemy, fought their way through a dense maze of shanties and shacks to reach the critically injured crew members. M/Sgt. Gordon immediately pulled the pilot and other crew members from the aircraft, establishing a perimeter which placed him and his fellow sniper in the most vulnerable position. M/Sgt. Gordon used his long range rifle and side arm to kill an undetermined number of attackers until he depleted his ammunition. M/Sgt. Gordon then went back to the wreckage, recovering some of the crew's weapons and ammunition. Despite the fact that he was critically low on ammunition he provided some of it to the dazed pilot and then radioed for help. M/Sgt. Gordon continued to travel the perimeter, protecting the downed crew. After his team member was fatally wounded, and his own rifle ammunition exhausted, M/Sgt. Gordon returned to the wreckage, recovering a rifle with the last five rounds of ammunition and gave it to the pilot with the words "Good Luck." Then, armed only with his pistol, MSgt. Gordon continued to fight until he was fatally wounded. His actions saved the pilot's life. M/Sgt. Gordon's extraordinary heroism and devotion to duty were in keeping with the highest standards of military service and reflect great credit on him, his unit, and the United States Army.



Gordon was deployed to Mogadishu, Somalia, with other Delta members in the summer of 1993 as part of Task Force Ranger. On 3 October 1993 Gordon was Sniper Team Leader during Operation Gothic Serpent, a joint-force assault mission to apprehend key advisers to Somali warlord Mohamed Farrah Aidid. During the assault, Super Six One, one of the Army's Black Hawk helicopters providing insertion and air support to the assault team, was shot down and crashed in the city. A Combat Search and Rescue team was dispatched to the first crash site to secure it and a short time later a second Black Hawk, Super Six Four, was shot down as well. Ranger forces on the ground were not able to assist the downed helicopter crew of the second crash site as they were already engaged in heavy combat with Aidid's militia and making their way to the first crash site.

Gordon and his Delta Force sniper teammates Sergeant First Class Randall Shughart and Sergeant First Class Brad Halling, who were providing sniper cover from the air, wanted to be dropped at the second crash site in order to protect the four critically wounded crew, despite the fact that large numbers of armed, hostile Somalis were converging on the area. Mission commanders denied Gordon's request, saying that the situation was already too dangerous for the three Delta snipers to effectively protect the Black Hawk crew from the ground. Command's position was that the snipers could be of more assistance by continuing to provide air cover. Gordon, however, concluded that there was no way the Black Hawk crew could survive on their own, and repeated his request twice until he finally received permission. Sergeant First Class Brad Hallings had assumed control of a minigun after a crew chief was injured and was not inserted with Shughart and Gordon. Once on the ground, Gordon and Shughart, armed with only their personal weapons and sidearms, fought their way to the downed Black Hawk. By this time more Somalis were arriving who were intent on either capturing or killing the American servicemen. When they reached Super Six Four, Gordon and Shughart extracted the pilot, Chief Warrant Officer Mike Durant, Bill Cleveland, Ray Frank, and Tommy Field from the aircraft, and established defensive positions around the crash site. Despite having inflicted heavy casualties on the Somalis, the two Delta snipers were outnumbered and outgunned. Their ammunition nearly depleted, Gordon and Shughart were killed by Somali gunfire. It is believed that Gordon was the first to be killed. Shughart retrieved Gordon's CAR-15 and gave it to Durant to use. Shortly after, Shughart was killed and Durant was taken alive. Immediately after the battle, the Somalis counted 25 of their own men dead with many more severely wounded. According to "America and Iraq: Policy-making, Intervention and Regional Politics" edited by David Ryan, Patrick Kiely, "his half-naked body was dragged horrifically through the streets of Mogadishu". Gordon's body was eventually recovered and is buried in Lincoln Cemetery, Penobscot County, Maine.

There was some confusion in the aftermath of the action as to who had been killed first. The official citation states that it was Shughart, but Mark Bowden, author of Black Hawk Down: A Story of Modern War, a book about the October 1993 events, relates an account by Sergeant Paul Howe, another Delta operator participating in the battle. Howe said that he heard Shughart call for help on the radio and that the weapon handed to Durant was not the distinctive M14 used by Shughart. Furthermore, Howe said that Gordon would never have given his own weapon to another soldier to use while he was still able to fight. In Durant's book, In the Company of Heroes, he states that Gordon was on the left side of the Black Hawk, after both he and Shughart moved Durant to a safer location, and only heard Gordon say, "Damn, I'm hit." Afterwards Shughart came from the left side of the Black Hawk with the CAR-15.

After the 911 attack on the United States, Special Forces units were inserted into Afghanistan to assist the Northern Alliance forces in overthrowing the Taliban and al-Qaeda terrorists. Following an intense mountain battle known as Operation Anaconda in March 2002, U.S. troops complex found a GPS unit and holding pouch labeled "G. Gordon". Intelligence analysts believed at first this was Sergeant Gordon's GPS unit that he purchased on the private market and used in Somalia. The Gordon family was notified immediately of the find prior to the information being released to the public. It ultimately turned out that it was not Gordon's GPS but one of a helicopter pilot lost in an earlier fight during Operation Anaconda.

During his military career Gordon earned the following military decorations: Medal of Honor, Purple Heart, Meritorious Service Medal, Army Commendation Medal, Joint Service Achievement Medals (x2), Army Achievement Medal (x2), Good Conduct Medal (x4), Combat Infantryman Badge, Master Parachutist Badge, Military Freefall Parachutist Badge, Expert Marksmanship Qualification Badge, Ranger Tab, Special Forces Tab, French Army Mountaineering Badge, the Royal Danish Parachutist Badge and the Joint Meritorious Unit Award.[2]

The U.S. Navy officially named a roll-on/roll-off ship USNS Gordon in a ceremony 4 July 1996, at Newport News, Virginia. Congressman John Murtha (D) of Pennsylvania, was the ceremony's principal speaker and serving as the ship's sponsor was Carmen Gordon, widow of the ship's namesake. Gordon was the second ship to undergo conversion from a commercial container vessel to a Large Medium Speed Roll On/Roll Off (LMSR) sealift ship and is operated by the U.S. Navy's Military Sealift Command, Washington, D.C.

Many things have been named after Gordon. Gordon Elementary School in Linden Oaks, Harnett County, North Carolina, which opened in January 2009, was named in his honor. The school is near Fort Bragg, where Gordon was stationed before being deployed to Somalia. In the Joint Readiness Training Center, LA, the main mock city is named Shughart-Gordon.

[Source: <u>https://www.cmohs.org/recipients/gary-i-gordon</u> & https://en.wikipedia.org/wiki/Gary_Gordon | August 2020 ++]

* Health Care *

Flu Shots

Update 13: Getting These 2 Shots Could Reduce Your Risk of Dementia



Getting a flu shot is always wise, but especially so this year. The vaccine helps protect against influenza, which can be dangerous and even deadly. Getting more people vaccinated against flu should mean fewer patients in hospitals, which is crucial during a time when the coronavirus pandemic continues to rage. Now, another reason has emerged to get the flu shot: Doing so may reduce your risk of being diagnosed with Alzheimer's disease. Three separate studies presented at the <u>Alzheimer's Association International Conference</u> in late July all point in that direction. According to these studies:

- Getting at least one flu vaccination drops the risk of Alzheimer's by 17%. Additional, frequent vaccinations drop the risk by another 13%.
- Being vaccinated for pneumonia when you are between ages 65 and 75 lowers Alzheimer's risk by up to 40%. However, the impact here depends on an individual's genetic makeup.

These vaccinations also can protect people who already have dementia, because those with dementia have a six-fold higher risk of dying after contracting an infection such as influenza or pneumonia. The Alzheimer's Association notes that earlier, smaller studies also had found links between vaccinations and reduced risk of cognitive decline. But the research presented at this year's conference involved larger studies.

One study — out of the McGovern Medical School at the University of Texas Health Science Center at Houston — involved an analysis of a large dataset of American health records. It found that people who consistently got their annual flu shot had an almost 6% reduced risk of Alzheimer's disease when they were between the ages of 75 and 84. Being vaccinated at an earlier age — for example, getting one's first flu shot at age 60 rather than age 70 — lowered the risk of developing Alzheimer's even more, the researchers note. Another study — out of the Duke University Social Science Research Institute — found that people who had pneumonia vaccination between the ages of 65 and 75 reduced their risk of developing Alzheimer's by between 25% and 30%, after adjusting for a known genetic risk factor for Alzheimer's and other characteristics. This reduction was as high as 40% among the people who do not have the gene associated with Alzheimer's risk.

The Alzheimer's Association adds: "Total number of vaccinations against pneumonia and the flu between ages 65 and 75 was also associated with a lower risk of Alzheimer's; however, the effect was not evident for the flu shot alone." For more on preventing dementia, check out:

- "7 Lifestyle Changes That May Help Prevent Dementia"
- "Eating This Food Can Reduce Your Risk of Alzheimer's Disease"

[Source: MoneyTalksNews | Chris Kissell | August 3, 2020++]

Back-to-School Vaccinations

Q&A in the Age of Covid-19

As the COVID-19 pandemic continues to disrupt everyday routines, including attending school in-person, parents may have questions about their children's back-to-school vaccination requirements. The following Q/A is adapted from a TRICARE Facebook chat with experts in the Defense Health Agency's Immunization Healthcare Division:

Q. Will my children need their immunizations even if school buildings don't reopen?

Children need to be protected against vaccine-preventable diseases. Well-child visits and vaccinations are essential services to help ensure children are protected. Children who are not protected by vaccines may be more likely to get diseases such as measles and whooping cough.

Q. Should they still get immunizations if they've been infected with COVID-19?

Routine vaccination should be deferred for those with suspected or confirmed COVID-19, regardless of symptoms, until they've met criteria to discontinue isolation. This will help protect health care personnel and other patients to the virus that causes COVID-19.

Q. Will COVID-19 precautions also protect against vaccine-preventable diseases?

Social distancing does not guarantee protection against vaccine-preventable diseases. The risk may be lower, but the viruses are still circulating and can infect children.

Q. Is it safe to take my child to a medical office for a well-child visit?

Call the provider's office and ask about ways they safely offer well-child visits during this time. Many medical offices are taking extra steps to make sure that visits can happen safely during the COVID-19 outbreak, including scheduling sick visits and well-child visits during different times of the day; asking patients to remain outside until it's time for their appointment to reduce the number of people in waiting rooms; and offering sick visits and well-child visits in different locations.

Q. What should I do if I can't go to a military medical treatment facility?

If you're enrolled in TRICARE Prime and your provider can't provide the care you need, you will be referred to a TRICARE network provider. For all other plans, you can get covered vaccines from any TRICARE-authorized provider. TRICARE covers <u>covered vaccines</u> at no cost. But when you get the vaccine from your provider, you may have to pay co-payments or cost-shares for the office visit or for other services received during the office visit. You can get some covered vaccines at no cost at participating network pharmacies. To find a pharmacy that participates in the vaccine program, <u>search online at the TRICARE website</u>.

Q. Is being up to date on immunizations more important for children of a certain age?

Children younger than age 2 have more frequent appointments and typically receive more vaccines, so they may have fallen further behind during the pandemic than children in other age groups. However, it's important to realize that vaccines require a certain amount of time between doses, called minimum intervals, so it may take multiple visits to get back on track. Work with the child's health care provider to develop a plan that accounts for both missed doses and appropriate intervals between doses, so that your child is caught up as soon as possible.

Q. If my children are healthy, why do they need vaccines?

If children aren't vaccinated, they can spread disease to other children who are too young to be vaccinated or to people with weakened immune systems, such as transplant recipients and cancer patients. This could result in long-term complications and even death for these vulnerable people.

Q. What is the harm of separating, spacing out or withholding vaccines?

Delaying vaccines can be risky. It increases the timeframe that children are susceptible to certain diseases, some of which are still fairly common.

Q. Why are so many doses needed for each vaccine?

Getting every recommended dose of each vaccine provides the best protection possible. Depending on the vaccine, your child will need more than one dose to build high enough immunity to prevent disease or to boost immunity that fades over time. Your child may also receive more than one dose to make sure they are protected if they did not get immunity from a first dose, or to protect them against germs that change over time, like flu. Every dose is important because each protects against infectious diseases that can be especially serious for infants and very young children.

[Source: Health.mil | August 12, 2020 ++]

Prescription Drug Costs

Update 60: Pandemic Closed the Window for Fixing Them in 2020

It was supposed to be the year of fixing the U.S. drug pricing system. Instead, the novel coronavirus pandemic is preoccupying Congress, making it nearly impossible for even President Trump to force attention on the issue ahead of the November election. Congress is negotiating another massive coronavirus relief bill, yet it's devoid of any broad measures to lower prescription drug prices. Lobbyists and advocates acknowledge drug pricing legislation has sunk low on the list of priorities for lawmakers, even after the powerful Senate Finance Committee and the House passed in 2019 measures aimed at reducing drug prices and momentum seemed to be building during this election year toward a deal with the White House.

Lawmakers are distracted – understandably so. They're scrambling to respond to the pandemic's economic devastation, which has left 34 million Americans out of work. On 28 JUL, the death toll in the United States passed 150,000, punctuating the country's failure to contain the virus despite widespread shutdowns throughout the spring. "The signals we have received from Capitol Hill seem to say Congress will unfortunately punt this issue to 2021," said Ben Wakana, executive director of Patients for Affordable Drugs, a nonpartisan group that advocates lowering drug prices. It's a deep disappointment to lawmakers and advocates who had hoped 2020 would be the year to take on the pharmaceutical industry. They've argued the pandemic only reinforces the need to give Americans relief from steep pharmaceutical costs. "Covid did not make the problem of high drug prices go away; it made it worse," Wakana said. "Millions of people are losing their jobs, millions of people are losing their health insurance."

Sen. Charles E. Grassley (R-IA), co-author of legislation regarded as the best chance for a bipartisan deal, noted in a Fox News op-ed that it's been one year since the Finance Committee passed his bill — and argued the pandemic makes such measures even more urgent. "It's inconceivable to delay commonsense drug pricing reform with covid-19 breathing down the neck of every American," Grassley wrote, along with Sen. Martha McSally (R-AZ). Even the president hasn't been able to spark much energy around the issue. Last Friday, Trump issued a series of executive orders aimed at nudging drug prices lower — a move that mostly just put more force behind initiatives his administration was already pursuing or had sought but then tabled. Then, in a pair of tweets on 28 JUL, he slammed the pharmaceutical industry for opposing most of the orders and claimed they would result in cutting drug prices by half (how he arrived at that claim is unclear).

Trump's orders are largely regarded as political messaging leading up to the November election and unlikely to result in any real changes anytime soon. The reaction from lawmakers was muted; Republicans are largely skeptical of

the approaches and Democrats are unwilling to give approval to virtually anything Trump does before the election. "I see no way drug pricing gets in [the coronavirus relief bill]," said Chris Condeluci, a health policy consultant. Plus, Trump's executive orders don't actually create new policies — they just direct federal agencies to move forward in the process of rulemaking. And the Trump administration may have only six more months, depending on the results of November's contests.

The two most consequential presidential orders have to do with an index tying some Medicare drug prices to prices in other countries and a ban on rebates paid by drugmakers to pharmacy middlemen. A long-awaited rule about how the index would work was repeatedly delayed last year, amid heavy opposition from the pharmaceutical industry. And the ban on rebates, while supported by drugmakers, was tabled after an analysis found it would result in somewhat higher premiums for seniors under Medicare. The rebate ban stands the best chance of movement before the November election, lobbyists say, but even that is a tall order. That's partly because Trump attached more conditions to it through his executive order, adding a clause saying the health and human services secretary must certify a rebate ban wouldn't result in any increased costs for seniors or federal spending. It's also a strange dynamic for Trump to slam drug companies even as he pleads with them to develop a coronavirus vaccine.

The government is giving several developers billions of dollars to work on a vaccine. And drugmakers, recently under fire for their approach to drug pricing, have been working to rehabilitate their public image after years of heavy criticism for their pricing practices. Drug company executives, who refused to attend a White House meeting on 28 JUL, have complained to the administration that it's pushing the executive orders even as it presses for developing and manufacturing vaccines, my colleagues Yasmeen Abutaleb and Josh Dawsey reported. "The research-based biopharmaceutical industry has been working around the clock to develop therapeutics and vaccines to treat and prevent covid-19," Steve Ubl, president and chief executive of PhRMA, the largest drug industry trade group, said in a statement. "The administration's proposal today is a reckless distraction that impedes our ability to respond to the current pandemic — and those we could face in the future." [Source: The Washington Post | Paige Winfield Cunningham | July 29, 2020 ++]

Prescription Drug Costs

Update 61: Congressional Report Card

While the coronavirus pandemic is the most pernicious public health crisis of our time, for decades now the crisis of high drug prices is a ubiquitous feature of the American healthcare landscape. Young adults dying because they can't afford insulin; people burdened with battling cancer facing bankruptcy due to the price of cancer drugs; patients going to the emergency rooms because they did not take heart medications due to cost; parents faced with the decision of whether or not they can afford a new Epipen, as their old one faces expiration, and the list goes on and on. We are outraged by the greed of the pharmaceutical industry, but we cannot vote in and out of office their CEOs and other executives. But we can do just that when it comes to Congress. To help, Prescription Justice has created the Drug Prices Congressional Report Card in which we have graded all members of the U.S. Congress, House and Senate, on their action or inaction on drug prices.

The public policy issue of high drug prices in America is unique in that Americans across the political spectrum, Republicans, Democrats, and Independents, agree that it's wrong and about the solutions needed. Whether it's guns, abortion, taxes, foreign policy, education, Obamacare, etc., Americans are too divided. In contrast, drug prices are a unifying issue! Let's come together on it. For example, a 2019 survey by the Kaiser Family Foundation showed that 92% of Democrats, 85% of Republicans, and 90% of Independents, want Medicare to be able to negotiate drug prices with pharmaceutical manufacturers. Is there any other issue with such intense unanimity? Despite what the voters want, the ban on Medicare negotiating drug prices remains part of federal law. Drug companies can't change that. Even the

president can't change that. It's up to Congress, which means it's up to us to vote for politicians who will end this egregious ban.

The Drug Prices Congressional Report Card (the "Prescription Justice Grade") is different than most other Congressional scorecards. You may be familiar with the congressional scorecards of organizations such as Planned Parenthood, the American Civil Liberties Union, or, on the other side of the political fence, the National Rifle Association and Club for Growth. Traditionally, congressional scorecards tally the votes of members of Congress on a given issue or subject area defined by an organization focused on a specific category of public policy (abortion, freedom of speech, guns, and taxes). Members are scored on their yea or nay votes. With the huge expenditures it spends on lobbying, the pharmaceutical industry is often able to stop votes on bills from coming to the floor that, if passed, would lower drug prices. By huge, we're talking about hundreds of millions of dollars a year, about \$3 billion lobbying over the past 20 years. Without votes how do you grade?

The Prescription Justice Grade uses four factors to score a member of Congress: 1) votes; 2) sponsorship and cosponsorship of bills on drug prices; 3) campaign donations from pharmaceutical manufacturers; and 4) soft data, specifically drug price positions articulated on members' websites. Using this multi-factor approach we have created a methodology to grade Congress on drug prices. The methodologies are very similar for each chamber but have needed differences to reflect differing terms and election cycles among other variables. To understand the details, read the House methodology and the <u>Senate methodology</u>.

The Point Breakdown

- Votes 30 points. In the methodology, congressional voting is assigned the greatest number of points because, in the final analysis, it is lawmaking that will actually stop the price gouging and endless price increases from the drug companies.
- Drug price bill sponsorship and co-sponsorship 25 points. Members of Congress should be rewarded for taking the initiative to sponsor and co-sponsor bills that will end the crisis of high drug prices. They received points for sponsoring or co-sponsoring such bills and there were many (of course most didn't come to a vote). Some members sponsored or co-sponsored almost all bills that would lower drug prices, others none.
- Pharma campaign contributions (25 points). As noted above, one of the biggest obstacles to bringing about serious legislative and regulatory reforms to lower drug prices is money in politics: the more money a candidate receives from the pharmaceutical industry, the more likely their vote will favor the industry. Our methodology rewards members of Congress for not taking money from drug companies and vice versa. To bring more rigor to this factor than just total dollar numbers, members were scored on campaign contributions from pharmaceutical companies based on 1) amounts received proportionate to contributions from other sources and 2) relative to each other members.

Sometimes Congressional members don't get around to co-sponsoring bills that they like. Others might not even vote for bills that contain some policies they strongly support. Why? Because the bill might enact other policies that they do not support. Or certain bills may not go far enough in support of a certain policy and a member places a protest vote against it. In considering the above and enriching our drug price report card, we wanted to find other ways to reward members for going on the record. Going on the record helps build momentum in favor of a policy. Many members list the legislative and policy issues of greatest importance to them on their websites. We reviewed them all for policy positions related to lowering drug prices.

Prescription Justice's mission is not just one of reporting about how Congress is doing on drug prices but of advocacy to get them moving. To motivate members and get them on the record, we created a questionnaire, which we call the <u>Prescription Justice Pledge</u>. The pledge is based on the policy priorities of Prescription Justice, which advocates for drug price negotiations, ending patent games, reforming importation laws to allow parallel imports, and expressly allowing individuals to import for personal medication as a lifeline if they need it. Members of Congress can improve

their grades by filling out the Prescription Justice Questionnaire. For each "Yes" answer, members will increase their raw scores by two points. Those members who fill out every question with a Yes answer will move up a full grade and are considered Prescription Justice Pledgers.

The grade can be used to name and shame, laud and applaud Members of Congress. Those with high grades will have bragging rights and can use the grades to communicate with their voters or in campaign ads. Campaigns can also highlight the poor grades earned by competitors. Advocacy groups focused on lowering drug prices can use the card to highlight good and bad grades. If you are part of an advocacy network or community organization committed to lowering drug prices, please share it far and wide. The grades are easily shared using social media: Twitter, Facebook and LinkedIn – and of course by email.

For those readers working to re-elect a member of Congress who received a high grade then share it. If your chosen candidate is a challenger to an incumbent, then encourage them to fill out the Prescription Justice Policy Questionnaire so they can go on the record in favor of lower drug prices. Congress needs to be held accountable for the astronomical costs of prescription drugs in America. The Prescription Justice Drug Price Report can help! Watch the presentation at <u>https://www.youtube.com/watch?v=2Jxy32vvT2U&feature=youtu.be</u> to learn all about the Prescription Justice Congressional Drug Price Report Card. [Source: Prescription Justice | (Opinion) | August 4, 2020 ++]

Prescription Drug Costs

Update 62: Trump's 'Buy American' Order



President Trump signed an executive order 6 AUG directing the federal government to buy certain drugs solely from American factories. The so-called "Buy American" order could represent a seismic shakeup of the drug industry: No one knows exactly how much of the American drug supply chain is produced abroad, but <u>some</u> experts insist up to 90% of critical generic drugs are made at least partially abroad. It remains unclear, however, how broadly the order will be implemented — the executive order does not specify what drugs it covers. Instead, the order directs the Food and Drug Administration to decide which medicines will be subject to the new requirements. Certain drugs can also be exempted from the executive order if they're too expensive to make in the U.S. or the U.S. isn't already making them.

Government officials, like the head of the Department of Veterans Affairs, can opt out of buying American drugs if the product is not produced "in sufficient and reasonably available commercial quantities" in the United States or buying the product in America would raise procurement costs by 25 percent. White House trade advisor Peter Navarro told reporters, that those caveats were "standard waivers that you have in all 'Buy American' orders." The order covers certain medical supplies that are deemed essential, as well.

The coronavirus pandemic has fanned anxieties in Washington over America's dependence on India and China for certain critical drugs. In recent weeks, both Democrats and Republicans in Congress have <u>penned legislation</u> attempting to retool America's drug supply chain. But Trump's proposal is the most dramatic action to date. "If we learned anything from the [coronavirus] pandemic, it is simply that we are dangerously overdependent on foreign nations for

our essential medicines, for medical supplies — like masks, gloves, goggles and the like — and medical equipment, like ventilators," Navarro said.

Trump's proposal is likely to increase the already-escalating tension between the drug industry and his administration. The new order comes on the heels of <u>four</u> sweeping drug pricing executive orders that Trump released two weeks ago. Drug makers, major business groups, economists, and conservative organizations have already made it clear they oppose the idea; many have publicly urged the White House to rethink the policy idea since Navarro began talking up the policy in March. They have warned that a "Buy American" order could raise domestic drug prices, since both labor and materials are much more expensive in the U.S. — which could cut against one of Trump's signature health care planks going into the November election. "Taxpayers and patients will pay more for drugs and medical supplies," a group of more than 250 economists warned in a letter to the White House earlier this year.

The order, however, includes some benefits for industry, too. The order includes a directive to HHS to accelerate approval of FDA applications for drugs developed in the U.S., as well as a directive for government agencies to pen lucrative long-term contracts with domestic manufacturers. It also includes provisions directing the Environmental Protection Agency to relax certain environmental restrictions that some say make it difficult to invest in new types of drug manufacturing in the U.S. Navarro insisted that deregulation of industry and incentives for new forms of manufacturing would help keep drug prices down. [Source: <u>www.statnews.com</u> | Nicholas Florko | August 6, 2020 ++]

Alzheimer Disease

Update 19: New Blood Test finds it 20 Years before Symptoms Appear

As we grow older, many of us worry about developing dementia. Now, a new blood test may detect if you are at risk for the disease 20 years before symptoms appear. On 28 JUL, researchers at the Alzheimer's Association International Conference unveiled the results of a study, published in the medical journal JAMA, that found a blood test can identify Alzheimer's disease — the most common form of dementia — in people with a rare genetic mutation, and do so two decades before cognitive issues develop. Currently, memory and thinking tests often are used to diagnose Alzheimer's. But blood testing offers more accuracy and is less expensive than other methods, such as spinal taps and brain scans, USA Today notes.

The blood test looks for an abnormal version of the tau protein found in brain cells — p-tau217 — which "seems to be the most specific to Alzheimer's and the earliest to show measurable changes," says the Alzheimer's Association. It adds: Changes in brain proteins amyloid and tau, and their formation into clumps known as plaques and tangles, respectively, are defining physical features of Alzheimer's disease in the brain. Buildup of tau tangles is thought to correlate closely with cognitive decline. In these newly reported results, blood/plasma levels of p-tau 217, one of the forms of tau found in tangles, also seem to correlate closely with buildup of amyloid."

The association notes that the new testing technologies can help experts better identify the right people for clinical trials, which could spur the development of drugs to treat dementia. Maria C. Carrillo, the Alzheimer's Association chief science officer, says the possibility of being able to detect and treat Alzheimer's early in the disease progression could be "game-changing for individuals, families and our health care system." However, Carrillo also cautions that the findings are "early results," and it is not known how long it will be before the blood tests are available for clinical use. The next step is to test the new findings in long-term, large-scale studies, she says.

How to fight dementia

Dementia is a devastating disease. While there is no surefire way to prevent it — and no way to cure it — there are steps you can take to lower your risk of being diagnosed with dementia. For example, research has shown that following the Mediterranean diet can cut your risk of cognitive impairment by more than one-third. For more tips, read "7

Lifestyle Changes That May Help Prevent Dementia." [Source: MoneyTalksNews | Chris Kissell | July 30, 2020 ++]

Prescription Drug Spravato

First FDA Approved Antidepressant for Actively Suicidal People

Johnson & Johnson's Spravato has been approved as the first antidepressant for actively suicidal people, as doctors are becoming increasingly concerned about Covid-19's effect on the mental health of Americans. The Food and Drug Administration approval means the quick-acting nasal spray will be available to people with suicidal thoughts and a plan to put them into action, said Michelle Kramer, vice president of J&J's U.S. neuroscience medical-affairs unit. That constitutes 11% to 12% of as many as 17 million Americans who have major depressive disorder.

Spravato has been used by about 6,000 people for treatment-resistant depression since its approval in March 2019, Kramer said. J&J's decision to study it in depressed people actively contemplating suicide bucks a trend among drugmakers who routinely exclude such patients from trials. Part of the thinking behind the decision was that Spravato's ability to act quickly could mean it works differently than older antidepressants that can take weeks to kick in, Kramer said. In its studies, J&J found those who got the drug had a rapid reduction in the severity of their thinking, although the results didn't differ in a statistically significant way from patients given a placebo.

The data from studies of the drug shows it "may offer clinicians a new way to provide support to patients quickly in the midst of an urgent depressive episode and help set them on the path to remission," said director of Yale's Depression Research Program and trial investigator Gerard Sanacora,. America has been in the throes of a suicide crisis even before the pandemic, with the rate rising 30% from 1999 to 2016. Covid-19 closures limited the number of people given the spray as a depression treatment in-person at specified centers. Ultimately, though, the numbers improved as patients and centers adapted and concerns grew within the mental health community that physical distancing and social isolation of quarantine may exacerbate people's existing problems or introduce new ones.

"Relatively rapidly within a few weeks we saw the numbers stabilize, which was pretty interesting for us and validating in the sense that clinic and patients alike were continuing to make this available," Kramer said. "We certainly see more and more sites sign on and more and more patients are treated." Spravato is a close chemical cousin of the anesthetic ketamine, which differs from existing antidepressants because it acts on the glutamate system in the brain rather than on seratonin or norepinepherine. Scientists have been working to better understand how the drug helps patients and why it works so quickly. The drug's approval last year marked the first major breakthrough for depression since 1987. President Donald Trump has since trumpeted the drug. [Source: Bloomberg | Cynthia Koons | August 3, 2020 ++]

TRICARE Select

Update 06: Retires Must Take Action to Pay Enrollment Fees

The Department of Defense 5 AUG announced TRICARE Select Group A retirees will be required to pay enrollment fees beginning on Jan. 1, 2021. Effective Jan. 1, 2018, Congress directed the DHA to implement TRICARE Select retiree enrollment fees in the National Defense Authorization Act of 2017 (NDAA-17), but delayed implementation of fees until Jan. 1, 2021 for Group A retirees. If the sponsor's initial enlistment or appointment occurred before Jan. 1, 2018, they and their family members are in Group A.

This fee also applies to TRICARE Overseas Program Select Group A retired beneficiaries. Enrollment fees are waived for Chapter 61 retirees and their family members and survivors of deceased active duty service members. All

active duty family members, regardless of Group A or B, do not pay TRICARE Select enrollment fees. There is no change for TRICARE Select Group B beneficiaries. They currently pay enrollment fees. If the sponsor's initial enlistment or appointment occurred on or after Jan. 1, 2018, they and their family members are in Group B.

In order to maintain health coverage unless waived by law, TRICARE Select Group A retired beneficiaries must take action and pay their TRICARE Select enrollment fees. During TRICARE Open Season, beneficiaries can set up an allotment for enrollment fees with their regional contractor (Humana Military in the east; HealthNet Federal Services in the west; and International SOS Government Services overseas). Beneficiaries will set up an allotment, where feasible, for contractors to begin collecting enrollment fees from Jan. 1, 2021 forward. Actual payment of enrollment fees will be charged/deducted effective Jan. 1, 2021.

If sponsors do not receive pay through a defense pay center, they can schedule fees to be paid through electronic fund transfer, debit or credit card account. Beneficiaries who do not set up their TRICARE Select enrollment fee payment by Jan. 1, 2021 will be disenrolled from TRICARE Select due to non-payment. Beneficiaries will have 90 days from termination date to request reinstatement. New fees beginning Jan. 1, 2021 –

- Individual: Enrollment fee: Monthly \$12.50 or Annual \$150.
- Family: Enrollment fee: Monthly \$25 or Annual \$300.

[Source: Defense Health Agency Health Advisory | Patrick Tucker | August 5, 2020 ++]

Coronavirus SITREP 12

Most People Who Become Infected Will Recover

With the year more than half over, many people remain concerned about catching the respiratory virus COVID-19. The number of confirmed cases worldwide has increased from about 3 million at the end of April to more than 20 million as of Aug. 12. In the United States alone, the total number of cases during this time period grew from 981,000 to approximately 5.1 million, according to the Centers for Disease Control and Prevention. The good news: Most people who become infected with COVID-19 will recover, according to the CDC, and without needing special medical treatment. So there's no need to panic if you get sick.

What's important is knowing what to do next to help ensure a full recovery and avoid infecting someone else.

- The <u>main symptoms of COVID-19</u> include fever at or above 100.4 degrees Fahrenheit, cough, and shortness of breath. The CDC says these symptoms can occur anywhere from two days to two weeks after becoming infected. Other symptoms may include muscle or body aches, fatigue, headache, chills, sore throat, congestion or runny nose, nausea or vomiting, diarrhea, and new loss of taste or smell.
- Emergency warning signs that require immediate medical attention include trouble breathing, chest pain or pressure, and bluish lips or face. The CDC advises anyone experiencing these symptoms to call 911. If possible, put on a face covering before medical help arrives.
- Some people may become seriously ill from COVID-19 and have difficulty breathing. The virus may be especially dangerous for people who have chronic or long-term health conditions that affect the immune system. Those conditions include heart or lung disease, diabetes, treatment for cancer, and HIV/AIDS.

- For cases that are not emergencies, experts advise people to stay home. Don't go to a
 military medical treatment facility or urgent care clinic because that may expose others to
 the virus. Instead, contact the <u>MHS Nurse Advice Line</u>. Registered nurses will screen for
 COVID-19 exposure or infection. They also will offer advice for self-care and, if
 appropriate, coordinate virtual appointments with health care providers.
- "Virtual care has proven to be a valuable tool for health care providers and patients during the coronavirus pandemic," said U.S. Public Health Service Lt. Bobby Taylor, program manager for the MHS Nurse Advice Line. "This resource allows you to practice social distancing and still get the answers to your health questions and concerns," he said.
- The CDC offers <u>advice for managing COVID-19</u> symptoms at home. It includes resting, staying hydrated, and monitoring symptoms to make sure they don't get worse. Sick people also should isolate themselves from others, including family members. That may require staying in separate rooms of the house and using a separate bathroom, if possible.
- Health care providers can offer advice for when sick people can stop isolating. <u>The most</u> recent CDC guidance notes that isolation and other precautions generally can be discontinued 10 days after symptom onset, 24 hours of no fever without the use of fever-reducing medications, and improvement of other symptoms.
- TRICARE beneficiaries can <u>sign up for email updates and get the latest information on</u> <u>COVID-19</u>, including emergency and urgent care options and pharmacy home deliveries.
- Health care providers and military families can learn about CDC-based guidance on COVID-19 through a <u>Spotlight page on defense.gov</u>. The page also offers force health protection guidance.

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Army Col. (Dr.) Jennifer Kishimori, director of chemical, biological, radiological, and nuclear medical countermeasures policy in the Office of the Assistant Secretary of Defense for Health Affairs said, "We are working to communicate current CDC guidance for public health, hospital preparedness, patient evaluation, infection control, laboratory testing, and health risk communication, in coordination with the Joint Staff." This guidance ensures any patient with a risk of infection receives the proper care and testing, and that public health authorities are notified of all cases. [Source: Health.mil | MHS Comm Office | August 14, 2020

Coronavirus Vaccine

Update 09: Might Not Work for the 42% of Obese Adults

Obesity has been a national epidemic for decades. But the coronavirus may have ratcheted up the danger. Some experts worry that any COVID-19 vaccine that emerges may not work in people who are obese. Raza Shaikh, an associate professor of nutrition at the University of North Carolina-Chapel Hill, spoke to Kaiser Health News, and had a stark message about a potential vaccine: "Will it still work in the obese? Our prediction is no." History gives Shaikh good reason to harbor such fears. Experts long have known that vaccines — such as those used to protect against influenza, hepatitis B, tetanus and rabies — are not always as effective in obese adults as they are for others.

Obesity contributes to health conditions such as cardiovascular disease and even cancer. Now, research in an emerging science known as immunometabolism suggests that obesity hampers the body's immune response, making

people more vulnerable to infection from pathogens. According to Kaiser Health News: "A healthy immune system turns inflammation on and off as needed, calling on white blood cells and sending out proteins to fight infection. Vaccines harness that inflammatory response. But blood tests show that obese people and people with related metabolic risk factors such as high blood pressure and elevated blood sugar levels experience a state of chronic mild inflammation; the inflammation turns on and stays on."

If the coronavirus vaccine is ineffective in obese people, millions of Americans will be at risk. The obesity rate among American adults has soared to 42.4% as of 2018, according to the Centers for Disease Control and Prevention. In 2000, the rate was 30.5%. The CDC defines "obesity" — as well as "severe obesity" — based on body mass index. BMI is measure of weight that takes a person's height into consideration. The CDC classifies adults as obese if their BMI is 30 or more, and severely obese if their BMI is 40 or more. Body mass index (BMI) is a person's weight in kilograms divided by the square of height in meters. BMI is an inexpensive and easy screening method for weight category—underweight, healthy weight, overweight, and obesity. Wondering what your BMI is? The CDC's website offers BMI calculators for <u>adults</u> as well as <u>children</u>. I did and my 163lb weight at 66 inches indicated I was overweight vice obese.

[Source: MoneyTalksNews | Chris Kissell | August 11, 2020 ++]

Coronavirus Vaccine

Update 11: Decisions on Who Gets it First Yet to be Made

Critical decisions on who will be first to get a possible COVID-19 vaccine have yet to be made, according to the director of Operation Warp Speed, the whole-of-government effort to develop and distribute a safe and effective immunization. Despite early indications from government officials that the military, the elderly and other groups would get priority, Dr. Moncef Slaoui said he is in the opening stages of organizing an "independent scientific summit" to make recommendations on vaccine distribution, with the goal of keeping politics out of decisions.

In a 6 AUG American Enterprise Institute podcast, Slaoui said he has been in discussions with Dr. Francis Collins, head of the National Institutes of Health, on arranging a scientific summit. "It's a super important question. It's a critical question. And I can tell you: First, we decided who should not do it," Slaoui said of decisions on vaccination priorities. "That's very important. I think this should not be politically motivated." He said Collins suggested having the National Academies of Sciences, Engineering and Medicine lead a summit on the "ethical, epidemiology, and virological vaccinologist discussions around how to best serve the population, with all its diversity, with a new vaccine or new vaccines against COVID-19."

"We are helping to generate the independent information to inform, and the science to inform, those important decisions" on distribution, said Slaoui, the former head of GlaxoSmithKline's vaccines department. The summit's purpose would be to discuss "how to best introduce new vaccines, who to immunize first, what kind of performance of vaccine is best suited to what kind of population with what we know," he said. Senior administration officials, speaking on background, have said that Operation Warp Speed would likely give priority to the elderly, those with underlying health conditions, workers in essential businesses and the military. "Our role, as the federal government, is to ensure anyone who is vulnerable, [who] cannot afford it and desire it, can get it. Those critical to infrastructure get it, essential workers get it, and those associated with national defense get it. That's our obligation," a senior administration official, speaking on condition of anonymity, said in June.

"I hope we will have enough doses of [safe, Food and Drug Administration-approved] vaccines in the first two months of 2021 to immunize the at-risk populations in the U.S.," Slaoui said, though he could not rule out having it sooner. "So the data will dictate, the facts will dictate" when a vaccine is ready, he added. "We may have the end point

in October. We may have it 4 NOV -- who knows? We may have it 15 DEC. ... That's the answer and to be honest, on a personal basis, I would resign instantly if I was forced to do something that I thought would be inappropriate."

At a White House event in May, President Donald Trump named Slaoui to head up Operation Warp Speed and Army Gen. Gus Perna, a logistics expert and head of Army Materiel Command, to be its chief operating officer. The task of overseeing the packaging, distribution and delivery of possibly 300 million doses of vaccine by early next year is enormous, but Perna has expressed confidence that the job can be done. When his appointment was announced in May, he said, "Winning matters, and we will deliver by the end of this year a vaccine at scale to treat the American people and our partners abroad."

[Source: Military.com | Richard Sisk | August 10, 2020 ++]

Covid-19 Testing





Cars lineup as they wait for COVID-19 testing by the Army National Guard at the americn Back Center in Corpus Christi, TX on 19 JUL

The Food and Drug Administration on 29 JUL opened the door to COVID-19 testing that could be fast, cheap and handled entirely at home – if companies don't find the rules too burdensome. Routine screening of people who don't know they have COVID-19 could transform the fight against the disease. "These types of tests will be a game-changer in our fight against COVID-19 and will be crucial as the nation looks toward reopening," FDA Commissioner Dr. Stephen Hahn said in a statement announcing how the agency will approve at-home tests. So far, the FDA hasn't allowed anyone to sell tests for at-home use.

Lab tests to detect the coronavirus are accurate, but they're often restricted to people who have COVID-19 symptoms. It often takes days to get results – by which point the person may have already infected others. Other tests are fast, but they're so expensive they're unlikely to be used regularly. A clinic in Massachusetts, for example, charges \$160 per rapid test; it's not covered by insurance. With COVID-19, people are most contagious in the few days before they develop symptoms and as symptoms first develop. Screening at home, maybe once or twice a week, would allow people to test themselves before going to work or school, getting on an airplane, attending an event or visiting an elderly

relative. Letting people know they are infectious in real-time would enable them to self-quarantine, and it would allow others to go about day-to-day life without risk of infecting others.

Will FDA rules encourage or discourage companies to create at-home tests?

Several testing experts, including Dan Larremore of the University of Colorado, said the FDA's move is a step in the right direction and could encourage companies to pursue inexpensive, rapid, at-home tests. But Dr. Michael Mina, an infectious disease epidemiologist at the Harvard T.H. Chan School of Public Health, said the way the FDA's guidance template is written makes it less likely that such crucial tests will reach the general public. The template spells out how a sample is to be collected and analyzed and how results are to be shown to a user without the need to send a sample to a lab for analysis. The template also outlines how accurate the tests must be, with slightly lower standards than labbased tests.

"The (required) software alone will pose an incredibly large hurdle for many," Mina said via email. "Unfortunately the template does not offer this type of 'new' avenue that I think is going to be necessary if we want to see truly \$1 daily tests become a reality." Mina said the standards should be lowered further. People are contagious only when there's an extremely high virus level in their body, which can be detected by a less sensitive test. An infection that goes undetected by a less-sensitive test would be caught a few days later when the person is tested again, he said. Or the person would already be on the way to recovery and probably wouldn't be contagious.

Similar rapid tests used to diagnose strep throat miss as many as one in five people who are infected, so physicians normally send a throat culture to a lab to confirm the diagnosis, said Dr. Emily Volk, president-elect of the College of American Pathologists. Such confirmatory testing usually takes several days. If that were done with COVID-19, it could add to the delays of traditional testing rather than relieve them.

A race to create a fast, cheap COVID-19 test

There are several tests close to market that are fast and relatively cheap, but none meets Mina's vision: a rapid test that costs as little as \$1 and can provide an answer before someone leaves the house in the morning. The XPRIZE, a nonprofit that designs and hosts public competitions, announced 28 JUL that it would split a \$5 million prize among five winners who can produce a test that delivers results in as little as 15 minutes and costs less than \$15. Another \$50 million is available to scale up manufacturing and could be distributed to any contestant during the competition, said Jeff Huber, president and co-founder of OpenCovidScreen, whose company is launching the competition in collaboration with XPRIZE. The competition is open until the end of August. About 200 semifinalists will be selected. They'll be winnowed to 20 finalists and then five winners. Contenders will have to meet criteria that will speed up FDA approval. They'll get expert advice from large-scale testing companies, Huber said. The five winners will be ready to scale up manufacturing by the end of the year, he said.

Fertility doctors develop test for coronavirus

In another approach to innovative testing, Sorrento Therapeutics of San Diego has licensed technology developed at Columbia University in New York City. Dr. Zev Williams, director of the Columbia University Fertility Center, has spent years developing tests to help couples with genetic diseases or repeat miscarriages have healthy babies. Early in the pandemic, Williams said his team concluded that finding the genetic signature of the virus that causes COVID-19 wasn't all that different. The technology the team has developed essentially looks for that genetic signature in a saliva sample. The sample is put into a container with enzymes that, when heated, turn the liquid red to indicate no virus present or yellow to show an infection. The test is as accurate as the current standard, called a PCR test, which relies on expensive, lab-based machines, said Henry Ji, Sorrento's CEO and cofounder. The company expects the test, which has not yet received FDA approval, to cost about \$10, said Mark Brunswick, the company's senior vice president of regulatory affairs.

Test company official: FDA has 'moved the goalposts'

In a third approach, Intrivo Diagnostics of Santa Monica, California, and Access Bio of Somerset, New Jersey, are collaborating to design and distribute a rapid at-home test. Dr. Michael Harbour, chief medical officer of Intrivo, said

he expects to complete the FDA approval process in the next 90 days. Their test provides a finger-pricking device and analyzes a drop of blood. A blue line would indicate a positive for the virus; no line would be an all-clear. The test should be accurate enough to meet the FDA guidelines, Harbour said. The companies are prepared to conduct trials, as required by the FDA, to make sure the test is easy enough for most people to use. He said he did not know how much it would cost. The FDA, Harbour said, has "moved the goalposts" several times, requiring testing companies to follow one protocol and then another. But he's hopeful it's now clear how important this type of test will be to keep the virus under control "If the FDA is smart," he said, "they are going to work quickly to make these available."

[Source: USA TODAY | Karen Weintraub | July 30, 2020 ++]

Covid-19 Testing

Update 03: DOD Announces \$42M Contract for 250,000 Test Kits

On 31 JUL, the Department of Defense awarded a \$42 million contract to Curative Inc. to provide 250,000 Curative Inc. oral fluid swab test kits to military treatment facilities, thus expanding the department's COVID-19 testing capability. In addition to test kits, the CARES Act-funded contract with Curative Inc. provides for end-to-end testing operations. This includes testing at Curative's high throughput lab, laboratory validation studies, personnel training, custom software integrations with electronic health records, shipping, and test results.

"This is an important capability that will strengthen our medical professionals' ability to detect, isolate and defeat the spread of COVID-19 across the military," said Maj. Gen. Lee Payne, the DOD's COVID-19 Lab Testing Task Force lead. "The ability to reliably test service members and their families is critical towards securing our forces' health and readiness." Under the contract, test kits and associated support will be provided to more than 100 military treatment facilities across the DOD in a manner that addresses medically urgent and emergent needs. "It's no coincidence we had the right innovation network in place to source and scale this test at battlefield speeds," said Dr. Will Roper, Assistant Secretary of the Air Force for Acquisition, Technology, and Logistics. "Evolving national security challenges require new and enduring partnerships with commercial innovators. We had the right people and mechanisms in place to move out on this exceptional testing capability for the Department of Defense."

Curative's oral fluid sample collection method is less invasive than other methods of COVID-19 testing, which require the insertion of a cotton swab far into the nasal passage. The test is also self-administered, meaning healthcare workers observe and guide patients through the sample collection process from a distance. This significantly decreases both the demand placed on frontline staff and the need for frequent changing of personal protective equipment. To collect a sample for testing, the patient is first instructed to cough three times, releasing particles from the upper and lower respiratory tract into the patient's saliva. The patient then swabs the inside of the mouth and seals the swab in a secure container for laboratory processing. Results are made available to patients via an electronic medical record within 2-3 calendar days.

The contract, executed by the Department of the Air Force Rapid Capabilities Office and coordinated through the Office of the Under Secretary of Defense for Acquisition and Sustainment's Joint Acquisition Task Force (JATF), follows a demonstration of Curative's testing method at Joint Base Langley-Eustis, where approximately 7,800 joint active duty personnel were tested over a three-day period in June. "Our acquisition professionals have been instrumental in scaling this capability from the Air Force to the DOD," said Maj. Gen. Cameron Holt, director of the Department of the Air Force Acquisition COVID-19 Task Force (DAF ACT). "I'm proud of the speed and agility by which they've matched capabilities with requirements every step of the way, securing solutions for our nation." [Source: DoD News Release | July 31, 2020 ++]

COVID-19 Sanitation

Update 07: Hand Sanitizer Use Safety

With the increased use of hand sanitizers, the Safety Office at Fort Jackson, South Carolina is urging the community to be safe when using hand sanitizers. Gel hand sanitizers are flammable and consumers must be aware of their surroundings when using them. According to a Federal Drug Administration bulletin distributed by the safety office, "an employee at Department of Energy Federal Contractors Group used an alcohol-based hand sanitizer as advised by hygiene recommendations. Shortly after the application to his hands, but before the liquid disinfectant had evaporated and completely dried, the employee touched a metal surface which accumulated a static electrical charge, resulting in an ignition source. The ethyl-alcohol based disinfectant flashed, resulting in an almost invisible blue flame on both hands."

Ron Ross, safety manager with Fort Jackon's Installation Safety Office urged the community to take extra care because "any incident is one too many." "We can never be too cautious, please exercise vigilance when using these gel sanitizers to ensure it is completely evaporated before touching any metal object and or other items that often harbor static electricity," he said. The FDA also reiterated in a July 23 news release its warning against using certain hand sanitizers that contain methanol. The release states the FDA "continues to warn consumers and health care professionals not to use certain alcohol-based hand sanitizers due to the dangerous presence of methanol, or wood alcohol – a substance often used to create fuel and antifreeze that can be toxic when absorbed through the skin as well as life-threatening when ingested." Methanol exposure can result in nausea, vomiting, headache, blurred vision, permanent blindness, seizures, coma, and permanent damage to the nervous system or death.

- The full FDA release can be found at: <u>https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-reiterates-warning-about-dangerous-alcohol-based-hand-sanitizers.</u>
- The latest FDA hand sanitizer update can be found at: <u>https://www.fda.gov/drugs/drug-safety-and-availability/fda-updates-hand-sanitizers-consumers-should-not-use</u>.

[Source: Health.mil | Fort Jackson Public Affairs Office | August 11, 2020 ++]

Covid-19 Headgear

Update 07: Bandanas or Neck Gaiters

Wearing bandanas or neck gaiters as face coverings to protect against COVID-19 may actually do more harm than not wearing a mask at all, a <u>study</u> published in *Science Advances* found. Researchers at Durham, N.C.-based Duke University <u>analyzed</u> the effectiveness of 14 face coverings ranging from bandanas to N95 masks. They created a simple device involving a laser and cellphone camera to track individual particles emitted from a person's mouth when speaking. Researchers had trial participants say the same phrase with and without wearing each mask 10 times. N95 masks proved the most effective, allowing no droplets to escape. Handmade cotton masks were about as effective as surgical masks, both blocking a substantial amount of droplets. Bandanas and breathable neck gaiters ranked least effective, emitting a higher droplet count than control tests involving no masks.

Bandanas and neck gaiters have more porous fabric, which may break up bigger particles into smaller ones that are more likely to float in the air, hence the higher droplet count, Martin Fischer, PhD, a chemist and physicist who developed the testing device, explained in a <u>video</u> created by Duke and cited by <u>The Washington Post</u>. Dr. Fischer said these types of coverings are a popular choice among Americans because they are convenient to wear and don't restrict air, which is also why they're not offering much protection. "It's not the case that any mask is better than nothing," he

said in the video. "There are some masks that actually hurt rather than do good." To view the full study, <u>click here.</u> [Source: Becker's Hospital Review | Mackenzie Bean | August 11, 2020 ++]

Covid-19 Headgear Update 08: Three Most Effective



https://advances.sciencemag.org/content/advances/early/2020/08/07/sciadv.abd3083/F2.large.jpg

Wearing a face mask might be among the best ways to prevent the spread of the coronavirus. But some types of masks are significantly more protective than others. Recently, Duke University put more than a dozen types of masks through their paces. To test the masks, researchers used a setup that included a box containing a laser and a lens, which turns the laser into a sheet of light. Along with a cellphone camera, this setup allowed researchers to visually inspect which masks were best in reducing droplet emissions during normal wear.

According to Martin Fischer, a chemist and physicist and the director of Duke's Advanced Light Imaging and Spectroscopy facility: "We confirmed that when people speak, small droplets get expelled, so disease can be spread by talking, without coughing or sneezing. We could also see that some face coverings performed much better than others in blocking expelled particles." The researchers say the most effective masks for protecting you from the coronavirus are:

- A fitted N95 mask with no exhalation valve (mask No. 14 in the above photo collage from the study)
- A three-layer surgical mask (mask No. 1 in the photo)
- A polypropylene/cotton mask (mask No. 5 in the photo)

By contrast, two other types of masks — bandanas and neck fleeces such as balaclavas — hardly blocked droplets at all, the researchers found. (They are masks No. 12 and No. 11, respectively, in the photo.)

Dr. Eric Westman, a Duke University physician who has championed the widespread use of masks, says the study underscores how effective masks are in preventing the spread of COVID-19, the disease caused by the new coronavirus: "If everyone wore a mask, we could stop up to 99% of these droplets before they reach someone else. In the absence of a vaccine or antiviral medicine, it's the one proven way to protect others as well as yourself." The Duke University findings were published in early August in the journal Science Advances.

Back in April, the American Chemical Society reported that a combination of two fabrics — cotton and either natural silk or chiffon — are especially good at filtering out the aerosol coronavirus particles. Whatever material you choose, make sure the mask fits properly. As we reported in April, just a 1% gap reduces the filtering efficiency of all masks by half or more, according to the ACS. [Source: MoneyTalksNews | Chris Kissell | August 13, 2020 ++]

COVID-19 Analytics

Update 01: New Tally Shows 922 Healthcare Workers have Likely Died

Kaiser Family Foundation's *Kaiser Health News*, in a project with *The Guardian*, has identified 922 U.S. healthcare workers who have likely died of COVID-19 and its complications during the pandemic, according to a new <u>interactive</u> database from the news organizations. The count represents healthcare worker deaths under investigation by the news organizations as part of their "Lost on the Frontline" project. As part of the project, the news organizations have published profiles of 167 of those healthcare workers whose deaths have been independently confirmed. The "Lost on the Frontline" project tracks healthcare worker deaths during the pandemic using data collected from family members, friends and colleagues of those who died, unions, media reports and other sources. It also memorializes healthcare workers who die of COVID-19. Of the 167 workers in the news organizations' database so far, 62 percent were identified as people of color, and 31 percent were reported to have inadequate personal protective equipment, according to *KHN* and *The Guardian*. The news organizations also found ages of the 167 workers ranged from 20 to 80, with 13 percent under 40 and 46 percent 60 or older. Thirty-two percent of the workers were born outside the U.S. Read more about the project here. [Source: Beckers Hospital Review | Kelly Gooch | August 11, 2020 ++]



College Tuition Costs State Comparisons

Most of us need no reminder that between tuition and books and room and board, the price of a college degree is high. And let's face it: while we'd all like to attend our dream college, the numbers often get in the way and force us to narrow down our options. So where are the cheapest schools? And the most expensive? New England wins (ahem, loses) with some of the highest college costs. Meanwhile, the Southwest and mountain states boast the lowest tuition in the country. Before you step into the world of all-nighters and frat parties, see where college is most affordable and where it'll bust your bank account.

Our ranking criteria

To get the rankings, all public and private colleges in each state that offer bachelor's degrees and higher were looked at. Each state's average in-state tuition with its average out-of-state tuition were compared. It was found that, in general, the states with high in-state costs also have high out-of-state costs—so the final ranking was based solely on the average in-state tuition. For more context net cost by state, which includes in-state tuition for first-time students plus living expenses, books, and supplies (and minus scholarships and aid) was also looked at. In some states, students receive enough financial aid to actually nudge that net cost lower than the annual cost of tuition. Basically, the net cost is the

total cost to attend college for a year after all is said and done. (Well, almost: it doesn't include the late-night fast food fund you'll likely dip into more than once during your college career.) The 10 states with the most and least expensive college tuition were:

- Most: Rhode Island, Vermont, Massachusetts, Washington, DC, Pennsylvania, Indiana, New Hampshire, Connecticut, Iowa, and New York.
- Least: Wyoming, New Mexico, North Dakota, Montana, Mississippi, Arkansas, Alaska, Hawaii, Arizona, and Alabama.

To view all state's average cost in dollars and rankings go to <u>https://www.move.org/college-tuition-costs-by-state</u> and/or <u>https://www.moneytalksnews.com/slideshows/most-and-least-expensive-college-tuition-by-state/?all</u>. [Source: MoneyTalksNews | Trevor Wheelwright | July 31, 2020| ++]

Will

Update 05: Doing Your Own Guidelines

A Last Will and Testament allows you to control what happens to your estate (your money, property, and other assets) after your death. In a will, you can define assets, name beneficiaries, assign guardians for your minor children, and appoint an executor to carry out your wishes. If you die without a valid will, the fate of your estate is put into the hands of the probate court. Once you make your will, you can make it legal by signing it with your witnesses. State laws vary with respect to how many witnesses are required, whether oral wills are considered valid, and other such details.

How do I write a will?

If you have questions before getting started, ask a lawyer. You will have more success making your Last Will and Testament if you consider the following questions beforehand:

- What assets will you include?
- Do you have any debt?
- Who will be your beneficiaries?
- Who will be your executor?
- If you have minor children, who will be their guardian?

How much does a will cost?

On average, you will pay an estate planning lawyer anywhere between \$250 and \$350 per hour (depending on the state), while some lawyers charge a flat fee averaging about \$1,000. Services are available online at various legal service sites which provide preformatted forms to fill-in online and download for around \$50.

Which is better, a will or a trust?

Both a Last Will and Testament and a <u>Living Trust</u> possess advantages and disadvantages, although the one you choose will depend on your goals and where you are in your life. Generally, neither one is "better" than the other. It simply depends on your specific preferences and circumstances. You can also make both to accommodate separate needs. To determine whether to use a will or a trust, you must understand the key differences between these two estate planning devices.

A will:

- Does not take effect until you die
- Covers any property that is only in your name when you die
- Allows you to name a guardian for children and to specify funeral arrangements
- Passes through probate
- Is public record and any transactions are also public record

A trust:

- Takes effect once created—if you fall ill or become incapacitated your trustee can control your estate
- Only covers property that has been transferred into the trust
- Passes outside of probate, saving time and costs of probate
- Can be used to plan for disability or to provide savings on taxes
- Has an added benefit of privacy, as trusts are not public record

What makes a will invalid?

A will can be considered invalid by your state for a number of reasons, including (but not limited to) Mental incompetence Most states typically require that the person making the will is mentally competent during the time of creation. The competency standard can be met in many states if you possess an understanding of the following:

- The property you own
- Who your relatives are
- What the will says and means
- Your relationship with the beneficiaries you have designated

In other states, there is additional guidance around mental illness. For example, in California, an individual with hallucinations or delusions resulting from a mental illness may not be considered to have the capacity to make a valid will, if their decision-making with regard to the will and the distribution of their property is impacted. If you have questions about making a legally valid will, talk to a lawyer.

Previous wills

To avoid confusion and ensure that the most recent will is followed, it is important to destroy every copy of any previous, outdated will. That said, it is possible to have multiple valid wills for dealing with property in multiple states, if one will is a supplement to another, or for other limited reasons.

Improper witnesses

Many states require that a will be witnessed by at least two people over the age of 18. Witnesses will observe the signing of the will and confirm mental competence at the time of the signing.

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If you need more guidance before getting started on your Last Will and Testament, ask a lawyer or check out more <u>estate planning documents</u>. [Source: Rocket Lawyer | August 3, 2020 ++]

Social Security Spouse Benefit

Update 01: When Can I Collect on My Spouse's Record?

You may be able to do this in the form of spousal benefits, or as survivor benefits if you are a widow or widower. Depending on your age upon claiming, spousal benefits can range from 32.5 percent to 50 percent of your husband's or wife's primary insurance amount (the retirement benefit to which he or she is entitled at full retirement age, or FRA). Regardless of the amount of the spousal benefit, it does not affect the amount of your mate's retirement payment. You qualify for spousal benefits if:

- Your spouse is already collecting retirement benefits.
- You have been married for at least a year.
- You are at least 62 (unless you are caring for a child who is under 16 or disabled, in which case the age rule does not apply).
- You can collect benefits on a spouse's work record regardless of whether you also worked. If your own retirement benefit is lower than your spousal benefit, Social Security will pay you the higher amount.

To qualify for survivor benefits, you must have been:

- Married to the deceased for at least nine months (unless the death is accidental or occurs in the line of military duty, in which case there is no minimum time period).
- At least age 60, unless you are disabled (then it's 50) or caring for a child of the deceased who is under 16 or disabled (no age minimum).

In most cases, survivor benefits are based on the benefit amount the late spouse was receiving, or was eligible to receive, when he or she died. How much of that amount you are entitled to depends on the age when you file. The proportion rises from 71.5 percent if you claim survivor benefits at 60 (50 if disabled) to 100 percent if you wait until your full retirement age (which is currently 66 but is gradually rising to 67). If the survivor benefit is based on your caring for a child, you receive 75 percent of the deceased's benefit, regardless of your own age when you file. Keep in mind

- Your spousal benefit is not affected by the age at which your husband or wife claimed Social Security benefits. It will always be based on your mate's primary insurance amount.
- With survivor benefits, if your late spouse boosted his or her Social Security payment by waiting past FRA to file, your survivor benefit would also increase.
- Your spousal or survivor benefits may be reduced, however, if you are under full retirement age and continue to work.
- Social Security is phasing in the FRA increase differently for different types of benefits. For retirement and spousal benefits, full retirement age will reach 67 for people born in 1960 and after. For survivor benefits, it's 1962 and after.

[Source: https://www.aarp.org/work/social-security/social-security-question-and-answer-tool | August 2020 ++]

VA Home Loans

Update 73: Help is Available if You Are Having Trouble Making Payments

If you are having trouble making mortgage payments on your VA loan because of the pandemic, you have special help available to you as a veteran. The Coronavirus Aid, Relief, and Economic Security Act (CARES Act) provides a mortgage payment forbearance option for all borrowers who are suffering financial hardship due to the COVID-19 national emergency. Forbearance is just a fancy word for an agreement between you and your lender that modifies your existing payment schedule, either by suspending or reducing payments for a certain length of time. Forbearance lets you deal with short-term financial problems by delaying or lowering your monthly mortgage payments until you get back on your feet and bring your mortgage payments up to date.

Since a VA loan is backed by the federal government, the company that issued the loan MUST grant you forbearance if you request it. No proof of your financial hardship is required, other than your statement. Federal Housing Administration, U.S. Department of Agriculture and all other federally backed loans are also covered under this rule. If you are having trouble making your mortgage payments, you should immediately contact your lender and explain your situation to it to try to work out a payment plan that suits you both. As with anything involving money, make sure you get everything in writing. For instance, if you call your mortgage company and it agrees to a six-month suspension of payments with no penalty, make sure you get an email or a letter from it stating this fact. Otherwise, you may be on the hook for late payments or, even worse, have your mortgage go into foreclosure.

Under the CARES Act, you are allowed to request an initial forbearance of monthly mortgage payments for up to 180 days, and may request up to an additional 180 days after the first period expires. The lender must approve the forbearance for the amount and time that you request. Remember, forbearance doesn't get you out of paying your mortgage -- it just delays it. So you really shouldn't request a longer forbearance than is necessary. Also, the CARES Act doesn't change your credit record. If you were delinquent on your mortgage before you request forbearance, you will remain delinquent until you get your payments current.

The Department of Veterans Affairs is expecting a large number of veterans to become delinquent on their mortgage payments and has recently updated its computer systems to handle up to 5,000 foreclosures a day. Avoiding foreclosure should always be your goal. To that end, the VA has plenty of help available. This assistance is available to all veterans and their surviving spouses, even if they don't have a VA-backed loan. The VA provides financial counseling and will even serve as a liaison between you and your mortgage company to work out a fair deal. The VA can also help you avoid financial scams, some of which may offer to make mortgage payments for you, but could end up costing you more in the long run or even trick you into signing away your house.

If you have questions about the credibility of such offers, or are having issues making your payments and don't want to contact your lender, the VA wants you to call it for help as soon as possible. You should contact the VA at 877-827-3702 for more information.

[Source: Military.com | Jim Absher | 11 Aug 2020 ++]

VA Home Loans

Update 74: 'Most Powerful Mortgage Option'

Fifteen percent of veterans work in an industry that has been seriously affected by the coronavirus pandemic, and by early summer 2020, the unemployment rate for veterans was about 9%. Many financial assistance programs have been made available to veterans impacted by COVID-19, several of which were just created this year in response to the pandemic. Other veterans programs have been on the scene for a long time: VA loans, for example, backed by the Department of Veterans Affairs, have helped veterans pursue homeownership for more than 70 years.

"Veterans and service members have earned access to what's arguably the most powerful mortgage option on the market today," says Chris Birk, director of education for Veterans United Home Loans, a dedicated VA mortgage provider based in Missouri. "VA loans have some truly unmatched benefits for qualified homebuyers. They also have more flexible and forgiving credit guidelines than many conventional loans." In contrast to conventional mortgages, veteran home loan qualifications have undergone fewer changes in recent months. This can offer a path to homeownership for service members who might otherwise be shut out of home financing in this age of historically low rates.

What is a VA Loan?

VA loans have been around since 1944 when the GI Bill of Rights was passed toward the end of World War II. The goal was simple: to provide veterans with better access to homeownership. The fundamentals of the VA loan program remain in place today: veterans who qualify can access mortgages with no money down, competitive interest rates, and extremely low closing costs. There are four types of home loans available through the U.S. Department of Veterans Affairs. The first is a direct loan in which the VA acts as your mortgage lender, although this loan type is only available to Native American veterans. The other three are VA-backed loans, which means an approved private lender issues you a mortgage guaranteed by the VA. These include purchase loans, interest rate reduction refinance loans, and cash-out refinance loans.

Why Use a VA Loan?

Veterans who qualify for a VA loan can benefit from many advantageous terms. For one, no down payment is required, and buyers who go this route are not required to purchase mortgage insurance (PMI) as they normally would. Interest rates also trend lower than conventional mortgage rates, which can lead to thousands saved over the life of the loan. Instead of a down payment and other upfront costs paid by those getting a mortgage, VA loans come with a one-time funding fee. This fee is charged based on a percentage of the total loan amount, which varies by loan type. "The funding fee protects taxpayers in the event a VA loan goes into default, since VA loans don't come with a mortgage insurance requirement," explains Kevin Crooks, Jr., a branch manager with AAFMAA Mortgage Services, a Virginia nonprofit

that provides financial support to military families. "Disabled veterans and servicemembers can be exempt from the funding fee."

VA Pros & Cons

- No down payment needed Only available to veterans
- Low interest rates Involves a funding fee
- Reduced closing costs Can be subject to price limits
- Mortgage insurance not required No standardized financial requirements

How to Qualify for a VA Mortgage Loan

There are a few different qualifications for a VA loan, but the main one is you must be a current or former member of the military, or a surviving spouse of someone who served. Active duty members can qualify for a VA loan after 90 days. Conditions for former military personnel depend on the years during which you were on active duty; wartime veterans generally have shorter minimum service requirements. If you're not sure whether you qualify, you can refer to the VA home loan eligibility list.

While the VA does not publish official credit score guidelines and leaves these requirements up to each lender, the consensus among experts is that it's easier to get approved for VA loans compared to a traditional mortgage. "Credit score requirements can vary by lender and other factors, but the minimum score veterans need for a VA loan is often lower than conventional benchmarks," says Birk. "VA loans also allow veterans to bounce back faster after derogatory credit events like a bankruptcy or foreclosure."

All things considered, VA home loan eligibility has remained relatively stable as mortgage availability plummeted in response to the pandemic. "Credit score minimums went up slightly, but they still remained a very flexible option for individuals who might not qualify for conventional loans," says Crooks, Jr. "The VA also helped facilitate transactions in several ways, including allowing exterior-only appraisals and waiving termite inspections in moderate to heavy areas."

Is a VA Loan Best for You?

Veterans are free to choose between a VA loan and a conventional mortgage, and the best option isn't always obvious. "VA loans tend to have a few more pieces of red tape tied to the loan process, and may not be as attractive to a seller in an apples-to-apples comparison with someone bringing a conventional loan to the table," says Nathaniel Hovsepian, a Marine Corps veteran and owner of The Expert Home Buyers, a real estate investment firm in Georgia. Bureaucracy notwithstanding, Hovsepian views VA loans as the best long-term option for veterans. "We always recommend using a VA loan if you are able to qualify. This is especially true if you don't have enough of a down payment to qualify for a conventional loan."

The best way to decide whether a VA loan is the right option for you is to apply. Meanwhile, you can also talk with lenders about conventional mortgages. By comparing rates and terms of different available options, you can make an informed decision on which type of mortgage makes the most sense for your personal situation. For assistance, contact your <u>regional loan center</u> to speak with a VA home loan representative.

[Source: Next Advisor | Lisa Bernardi | August 13, 2020 ++]

Rental Scams

Update 03: Those Targeting Military Personnel on the Rise

The U.S. Army Criminal Investigation Command is warning soldiers to be wary of potential housing rental scams. CID reports that rental scams are on the rise, with millions of fake housing rentals on otherwise reputable sites advertising properties that are not available for rent or do not exist. These scammers often target military personnel looking for

rental properties around bases, and lure them with false promises of military discounts, amenities and low rent, according to the report. CID officials could not say how many troops have been scammed. A 2019 report from Apartment List found that an estimated 5.2 million renters in the U.S. have lost money on a rental scam, one-third of whom lost over \$1,000. The Federal Trade Commission offers further information about how to identify and report these scams.

Military members may be especially <u>vulnerable</u> to these scams due to frequent movement between bases, as well as competitive rental markets and the possibility that they may not be able to physically tour the property before paying, according to Edward Labarge, the director of CID's Major Cybercrime Unit. "A typical rental scam works by a property being listed at a low price, usually below market rate, to get the attention of potential renters," Labarge said in a statement. "Then the scammers will pressure the renters to pay a deposit and the first and last month's rent to secure the rental."

CID reports that hijacked ads, which use real photos and addresses of properties but change contact information, and phantom rentals, which are not for sale or do not exist, are common tactics for scammers. The command urges renters to look out for a number of warning signs, including the owner asking for money before the lease is signed or property is toured, not asking for background information, and asking for payment through money wiring or payment apps. To prevent becoming a rental scam victim, CID urges renters to take precautions including doing more research into the company property, asking to see more photos and reviewing contracts before giving the owner money or personal information, among others listed in the report.

Those who suspect or have fallen victim to a housing rental scam should report it to the FBI <u>Internet Crime</u> <u>Complaint Center</u> or the <u>Federal Trade Commission</u>. Renters can also use <u>homes.mil</u>, which is sponsored by the Department of Defense, to search for rental properties. [Source: ArmyTimes | Hannah Graf | August 4, 2020 ++]

Visa Scams

Confusion Around Visa Laws Gives Rise

This spring, the United States restricted visa applications due to COVID-19. Unfortunately, the situation has created plenty of opportunity for scammers. With many people confused by the changing laws, con artists prey on those who urgently need a visa to continue their studies or work in the U.S. Scammers pose as the US government officials and promise visas in exchange for a fee.

How the Scam Works:

- You visit a website or receive an email that looks like it's from a U.S. immigration service or agency. It includes pictures of the president, the American flag, the U.S. seal, and other patriotic emblems. As you explore the website, you find other convincing terms, such as "official green card lottery" or "government visa applications," which seems to assure that you're going through the proper channels. The "green card lottery," officially known as the Diversity Visa Program, is a U.S. government program that grants 50,000 visas a year to individuals from selected countries.
- However, these websites are not official and often make false claims. For example, many websites set up to "assist" immigrants in applying for the Diversity Visa Program promise that if you hire them, your chances of receiving a visa improve. This claim is completely untrue. Often, the only way these services "improve" your chances is by including false information in your application. This practice will immediately disqualify you from the program.
- What's worse, these scam services can open you up to identity theft. You'll be asked to provide detailed personal information, such as your name, birth date, birth country, address, marital status, and phone

number. You'll also need to share your work history and passport photos. Getting this information and your money is the end goal of many scammers. They have no intention of ever helping you apply for a visa.

Tips to Protect Yourself from Visa Scams

- Only apply for a visa through official websites. The only official place to get information about the DV program and immigration visas is through U.S. government websites that end in ".gov," such as travel.state.gov or dvlottery.state.gov. You should apply directly for the Diversity Visa Program through the official U.S. Department of State website during the specified and limited registration period.
- Be wary of people who assist with immigration visa applications. The U.S. Department of State does not recommend you get outside assistance and makes it clear that outside help will NOT improve your chances of being selected or approved. If you must get assistance, be sure you only work with reputable persons and double-check that all the information they put on your application is 100% accurate.
- Check for lookalikes. A website may appear to be official by using patriotic images, but proceed with caution if the website does not end with ".gov." The same goes for emails. All official visa-related correspondence will come from a ".gov" email address.
- Get to know scammers' tactics. The Department of State has posted a warning about fraud related to the Diversity Visa Program. Read up on scammers' tricks to protect yourself from fraudulent offers.

For More Information

Stay alert to potential scams by visiting BBB.org/AvoidScams. Read more about impostor scams – including con artists who impersonate government agencies – in this BBB tip. If you've been the victim of a visa scam, be sure to report it at BBB.org/ScamTracker. Your report can help expose scammers and protect other consumers.

[Source: BBB Scam Alerts | July 31, 2020 ++]

Government Aid Program Scams

Free Government Aid Help

As the COVID-19 outbreak continues, many government agencies are providing money and other support to help with pandemic-related hardships. Scammers, always ready to take advantage of people in crisis, have been stepping in with a new con. Watch out for con consultants claiming to "help" you get free government aid.

How the Scam Works

- A website search, social media ad, or even an unwitting friend or family member directs you to a website of a new service claiming to help you get free money from government aid programs. These "consultants" say they can get you money from unadvertised government programs or programs where your application was previously denied. For example, scammers may assert that they can get you a personal loan from the <u>U.S.</u> <u>Small Business Association</u>, a government agency specifically for businesses.
- To get started, all you have to do is fill out some paperwork. This typically requires sharing sensitive, personal information, such as your full name, home address, and government ID numbers. Next, the "consultant" will ask you for an upfront payment for their services. You may also be required to pay a portion of the government aid funds you receive directly to the company, which they will likely ask for up front.
- Most of the time, these "consultants" don't really have any special information on government aid programs. Instead, they are simply hoping to get your personal information and an initial payment. Once you've paid, the consultant will disappear and the company will become unreachable. Your money may be lost for good and your personal information could be compromised, putting you at risk for identity theft.

Tips to Protect Yourself from These Scams

- Research government aid programs through official channels. Visit websites that end in .gov or .ca for official information about government aid programs. Remember, government agencies don't typically call, text, or send social media direct message without you opting into these channels.
- Never give your personal information to strangers. Even if their story is convincing, it's never wise to share your personal information with an individual or organization you hardly know.
- Get to know a company before doing business with them. Before handing over money or your personal information, research a company and its claims. Ask yourself: Does this company have a good reputation? Are they BBB accredited and if so, what is their business rating? Does this government aid program actually exist? If a company representative gets defensive or aggressive when you ask questions to verify their claims, don't do business with that company.
- Beware of promises that sound too good to be true. Scammers are experts at pitching services and products that will miraculously solve all of your problems, be skeptical. Double check their claims before you agree to pay for their services or share your personal details.

For More Information

To learn more about common COVID-19 scams and how to avoid them, visit <u>BBB's COVID-19 resources</u>. If you've been approached by scammers who claimed to be financial aid consultants, report your experience on the <u>BBB.org/ScamTracker</u>. Your report will help other consumers to stay alert and avoid falling prey to scammers. [Source: BBB Scam Alerts | August 7, 2020 ++]

Retiree Finances

Update 01: Uncommon Ways to Cut Costs

These money-saving strategies might not be the first that come to mind, but they will help ensure you don't outlive your savings. Making ends meet during retirement can be a challenge. But there are many ways to reduce your expenses without sacrificing your quality of life. Once you stop working, it can be difficult to generate extra income. If you can reduce your spending, however, you won't need to withdraw as much money from retirement funds. That helps make sure you aren't forced to alter your lifestyle to pay bills — not to mention lessen the chances of outliving your retirement savings. What follows are some atypical ways to lower your expenses in retirement.

1. Move in with adult kids

Children these days often remain at home until they're well into their 20s. They can return the favor by allowing retired parents to live with them after they have formed their own households. Parents living with their adult children is a growing trend, according to the Pew Research Center. The nonprofit reports that as of 2017, 14% of adults living in someone else's home were parents of the head of the household. That's up from 7% in 1995. Further, housing-related costs are by far the largest type of expense for the average U.S. household led by someone who is 65 or older, as detailed in ""How Much Does a Typical Retiree Household Spend in a Year?" Before you share a home with your children, though, make sure you reach an agreement about whether you'll help out with household expenses. To avoid conflict, you may need a plan for contributing to such expenses as utility bills, groceries and mortgage payments.

2. Rent out a room

If you have empty bedrooms in your house because your kids have grown up and moved away, why not rent one out? Services such as <u>Roommates4Boomers</u> and <u>Silvernest</u> help older people rent out extra space in their homes or find an older roommate to move in with. Other options include going through a larger or more generalized service like <u>Airbnb</u> or <u>Vrbo</u>. Be aware that being a landlord of sorts requires some effort. You'll need to carefully screen tenants, collect damage deposits and collect the rent unless you use a company that handles that for you. Of course, you should wait until the coronavirus pandemic passes to pursue this route.

3. Grow your own vegetables

During the First and Second World Wars, the federal government encouraged people to grow their own produce in "victory gardens" at home to relieve pressure on public food supplies. The same principle can work today for retirees who are looking for ways to reduce grocery bills. You can maximize your savings if you grow vegetables that can be easily stored or preserved, according to the <u>Iowa State University Extension and Outreach</u>. For example, potatoes, onions and winter squash can be stored for several months. Beans, tomatoes, cucumbers, beets and sweet corn can be preserved by freezing or canning.

4. Downsize your fleet

When you were working, you and your significant other may have had to drive each day to separate job locations. Once you retire, you may be able to share a single vehicle. That would spare your budget from the expenses associated with owning and operating a second car — which might be more than you realize. Transportation-related costs are the <u>second-largest type of expense</u> for the average household led by someone who is 65 or older, after housing. Be aware that having only one car may require you to occasionally rely on public transportation or ride-sharing services. But if you live in a community with good access to public transportation, it may be possible to get by without owning a car at all.

5. Drop unhealthy habits

You can reduce your medical costs in retirement if you make a greater effort to stay healthy. One way to do this is to stay fit and active, as we detail in "<u>7 Surprising Benefits of Staying in Shape After Age 50</u>." Another way is to avoid unhealthy habits, such as smoking or drinking alcohol to excess. Smoking-related illnesses in the United States cost more than \$300 billion each year, including nearly \$170 billion for direct medical care for adults. People who stop smoking greatly reduce their risk of related diseases and early death, according to the Centers for Disease Control and Prevention. The health benefits are greater for people who stop smoking at earlier ages, but there are benefits at any age.

According to the National Institute on Aging, drinking too much alcohol over a long period may cause cancer, immune system disorders, and brain and liver damage. It also may worsen some health conditions such as osteoporosis, diabetes, high blood pressure, stroke, ulcers, memory loss and certain mental illnesses.

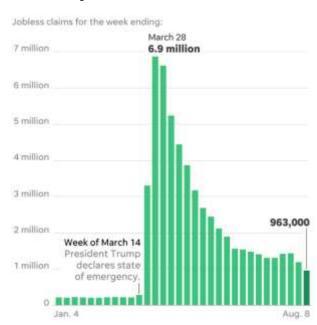
6. Consider canceling your life insurance

The purpose of life insurance is to replace the income of household earners, providing for dependents in the event of a breadwinner's untimely death. But when you're retired, the chances are good that your children are grown and supporting themselves. If you no longer have dependents, the money you're spending on life insurance might be better spent on meeting your daily needs. Canceling a term or a whole life policy could be to your advantage. "If you plan appropriately, it can make a lot of sense to drop your life insurance," <u>Brandon Renfro</u>, a financial adviser and an assistant professor of finance at East Texas Baptist University, tells Money Talks News.

7. Make plans to age in place

A 2018 AARP survey found that 76% of Americans age 50 and older prefer to remain in their current homes as long as possible, but only 46% expect to be able to do so. If you take steps now to make your home safe and accessible as you age, however, you might improve your odds of staying in your home longer. And if you're able to "age in place," rather than moving into an assisted-living facility or nursing home, you'll likely also save money. So, take a look at your home and consider changes that would help you as you age. For example, carpeting hard floors can reduce the chances or injuries from falls. Adding grab bars and safety mats in the shower can reduce the chance of losing your footing.

[Source: MoneyTalksNews | Emmet Pierce | August 13, 2020++]



Unemployment Claims Slip below 1M for First Time since March

The number of Americans applying for unemployment dropped last week, slipping below 1 million for the first time since the economic shutdown sparked by the coronavirus pandemic began in the spring. The number of new applications for benefits, a rough gauge of layoffs, declined to 963,000, the Labor Department said 13 AUG. It was the second straight drop, from 1.2 million the previous week. And it's the first time weekly claims have dipped below 1 million since the week ending March 14, with the figure sharply below the 1.25 million some economists expected

But while the downward slide is a welcome trend, it doesn't mean the economy has rebounded. "Another largerthan-expected decline in jobless claims suggests that the jobs recovery is regaining some momentum," Oxford Economics said in an investors note. "But with a staggering 28 million workers still claiming some form of jobless benefits, much labor market progress remains to be done." The latest stream of applications is still historic, dwarfing the previous all-time weekly high of 695,000 during another economic downturn in 1982. And the latest tally means a stunning 56.2 million Americans sought unemployment aid in just 21 weeks.

The number of claims has ebbed and flowed in recent weeks, but stubbornly remained above 1 million until now, painting a stark picture of the financial toll the coronavirus pandemic has taken as businesses cut staff and consumers warily watch their spending. While the lower number of first-time jobless claims last week may signal that more Americans are finding work or being rehired, it might also reflect fewer people applying for assistance now that an extra weekly federal benefit of \$600 has ended. "The expiration of the \$600/week supplement to unemployment benefits ... at the end of July may have made filing for benefits less attractive, leading to reduced filings," Daniel Silver of J.P. Morgan said in an investors note. Continuing unemployment claims shrank to 15.5 million in the week ending 1 AUG, their lowest level since the start of April, but that is still "historically high ... underscoring the painfully slow recovery in the labor market," Oxford said.

Unemployment hits Sunbelt

Unemployment slipped to 10.2% in July, down from 11.1% in June. But the economy continues to stumble through fits and starts, with hard-hit industries like hospitality and retail companies bolstering their staff in some parts of the country, while businesses in the Sunbelt cut jobs as the coronavirus spikes there. It's far too early to declare "mission accomplished," Bankrate.com senior economic analyst Mark Hamrick said in an interview. "What we're really doing is recovering some of the jobs lost." Hospitals appear to be stabilizing after shedding jobs earlier in the pandemic due

to a postponement of elective procedures, he noted. Dentist offices have also reopened after temporary closures, fueling some job gains. But travel businesses like airlines and hotel companies are still sluggish, with business travel in particular slow to bounce back, he said.

Early signs that the outbreak is ebbing in key hot spots might also have partially fueled the improved numbers, Hamrick said. "All told, I think people are trying to walk a delicate balancing act here between resuming as much of their economic activity as they feel is safe and warranted," Hamrick said. And the amount of shifts Americans are working is increasing just 0.5% a week on average in August. says Dave Gilbertson, vice president of strategy and operations for Kronos, a workforce management software company. "This indicates that while businesses may be recalling some furloughed employees, they continue to struggle to generate enough activity to return to full staffing capacity," Gilbertson said in an emailed statement, "hindered by a combination of summer seasonality, statewide reopening pauses or reversals, and, in some sectors, below-average consumer demand."

Congress stalled over \$600 benefit

Meanwhile, the extra financial aid and protections extended to help out-of-work Americans weather the economic downturn remains in limbo, with Congress unable to sign off on a new aid package. And the encouraging jobless claims report could make more federal aid appear less necessary. "If it was going to take a sense of urgency to get Democrats and Republicans to come to an agreement, the stock market trading right near record highs and jobless claims back below a million aren't providing any ammunition," Bespoke Investment Group analyst Paul Hickey wrote in an analysis 13 AUG.

Democrats want to reinstate the extra \$600 through the end of the year while Republicans want to reduce it to \$200 a week. President Donald Trump issued a memorandum that would provide unemployed Americans with an additional \$400 per week. But that will likely be pared back to \$300 after states balked at the requirement that they kick in a quarter of the funding, a contribution they say they can't afford as they deal with their own budget shortfalls. White House economic adviser Larry Kudlow said 11 AUG that the states won't have to pay the additional \$100 if they already provide at least that amount in jobless benefits, which most states do. Kudlow added that the checks should start going out in the next two weeks, but critics of the memorandum say that it may not be legal or even constitutional for Trump to bypass Congress and take such a step by executive action.

Could spending by shoppers slip?

Many businesses have also gone through the forgivable federal loans they received if they held onto or rehired their workers, leading to new rounds of layoffs. Because those funds are running out, and Congress has not passed another financial assistance package "we may see a reversal in the gains in August," Sophia Koropeckyj, an economist at Moody's Analytics, said in an investors note. "Without this extra support, consumer spending will certainly weaken." A deal will probably eventually be reached, she says. But it will take more than money to get the economy going again. "We are still confident that Congress and the White House will rally to provide about \$1.5 trillion in support," she said. "Yet, until a vaccine is widely available we do not expect the economy and labor market can climb completely out of the hole... Indeed we expect the economy to barely eke out any gains until 2021."

[Source: USA TODAY | Charisse Jones | August 13, 2020 ++]

Tax Burden for Georgia Retired Vets As of August 2020

Many people planning to retire use the presence or absence of a state income tax as a litmus test for a retirement destination. This is a serious miscalculation since higher sales and property taxes can more than offset the lack of a state income tax. The lack of a state income tax doesn't necessarily ensure a low total tax burden. States raise revenue

in many ways including sales taxes, excise taxes, license taxes, income taxes, intangible taxes, property taxes, estate taxes and inheritance taxes. Depending on where you live, you may end up paying all of them or just a few. Following are the taxes you can expect to pay if you retire in Florida. Following are the taxes you can expect to pay if you retire in Georgia:

Sales Taxes

State Sales Tax: The state sales tax rate is 4%, and the average GA sales tax after local surtaxes is 6.96%. Georgia has a lower state sales tax than 53.8% of states. Georgia has 961 special sales tax jurisdictions with local sales taxes in addition to the state sales tax.

- Georgia does not exempt any types of purchase from the state sales tax. Groceries are subject to special 3% sales tax rates under Georgia law. In most states, necessities such as groceries, clothes, and drugs are exempted from the sales tax or charged at a lower sales tax rate.
- Some items may not be eligible for these reduced sales tax rates, such as expensive clothing, unhealthy food or drinks like soda, and certain non-essential pharmaceuticals. Unlike many states, Georgia treats both candy and soda as groceries for sales tax purposes. Other items including gasoline, alcohol, and cigarettes are subject to various Georgia excise taxes in addition to the sales tax.
- If you buy goods and are not charged the Georgia Sales Tax by the retailer, such as with online and out-ofstate purchases, you are supposed to pay the 4% sales tax (less any foreign sales tax paid) for these items yourself as the Georgia Use Tax. You are expected to voluntarily list your liable purchases on a Georgia Use Tax Return, which should be attached with payment to your Georgia Income Tax Return. Historically, compliance rates with the Georgia Use Tax have been low.
- Georgia usually has two sales tax holidays throughout the year, one at the beginning of August meant for back-to-school shopping and one in October for Energy Star rated home appliances. These tax holidays must be authorized each year by the state government. Georgia has five sales tax holidays, during which certain items can be purchased sales-tax free. For more details, see the <u>Georgia sales tax holiday calendar</u>.

Excise Taxes

An excise tax is a tax directly levied on certain goods by a state or federal government. The most prominent excise taxes collected by the Georgia state government are the fuel tax on gasoline and the so-called "sin tax" collected on cigarettes and alcoholic beverages. Georgia collects an average of \$283 in yearly excise taxes per capita, one of the lowest average per capita excise taxes in the country. Georgia's excise taxes are flat per-unit taxes that must be paid directly to the Georgia government by the merchant before the goods can be sold. Merchants may be required to attach tax stamps to taxable merchandise to show that the excise tax was paid. Even though excise taxes are collected from businesses, virtually all Georgia merchants pass on the excise tax to the customer through higher prices for the taxed goods.

Alcohol: Liquor \$3.79 per gal | Wine: \$1.51 per gal | Beer: \$1.01 gal. Georgia's beer tax includes a local tax rate of \$0.53 per gallon, effective statewide. The Georgia beer tax is already added to the purchase price of all beer bought in Georgia, whether in kegs, bottles, or cans. Georgia state taxes on hard alcohol vary based on alcohol content, place of production, size of container, and place purchased. The Georgia liquor tax applies to all hard alcohol (alcoholic beverages other than beer and wine), and is already included in the purchase price by the retailer.

Cannabis Tax: N/A

Cellphone: The average tax collected on cell phone plans in Georgia is \$8.57 per phone service plan, lower than 58% of the other 50 states. Georgia's average cellphone tax is ranked #29 out of the 50 states. The Georgia cellphone tax is already included in the service plan price you pay to your service provider, and may be listed as "Misc. taxes and Fees" or "Other" on your monthly bill.

Cigarettes: \$0.37 per 20 cigarettes, one of the lowest cigarettes taxes in the country. Georgia's excise tax on cigarettes is ranked #47 out of the 50 states. The Georgia cigarette tax of \$0.37 is applied to every 20 cigarettes sold (the size of an average pack of cigarettes). If a pack contains more than 20 cigarettes, a higher excise tax will be collected.

Fuel: 27.9ϕ per gallon for gasoline and 31.3ϕ per gallon for diesel, higher than 50% of the other 50 states. This is in addition to the federal excise tax of 18.4ϕ per gallon on gasoline and 24.4ϕ per gallon, on diesel. The excise tax on gasoline is ranked #25 out of the 50 states. The tax is included in the pump price at all gas stations.

Vehicle: Florida collects a registration fee and a title fee on the sale or transfer of cars and motorcycles, which are essentially renamed excise taxes. Unlike standard excise taxes, however, the end consumer must pay the tax directly to the Georgia Department of Transportation and receive documentation (registration and title papers) proving the fees were paid.

Personal Income Tax

Tax Rate Range: Low – 1.0%; High – 5/75%

Income Brackets: Six. Technically, you don't have just one "tax bracket" - you pay all of the Georgia marginal tax rates from the lowest tax bracket to the tax bracket in which you earned your last dollar. For comparison purposes, however, your Georgia tax bracket is the tax bracket in which your last earned dollar in any given tax period falls.

- For earnings between \$0.00 and \$1,000 you'll pay 1%
- For earnings between \$1,000 and \$3,000 you'll pay 2% plus \$7.50 single or \$10 married
- For earnings between \$3,000 and \$5,000 you'll pay 3% plus \$37/50 single \$50 married.
- For earnings between \$5,000 and \$7,000 you'll pay 4% plus \$82.50 single or \$110 married.
- For earnings between \$7,000 and \$10,000 you'll pay 5% plus \$142.450 single or \$190 married.
- For earnings over \$10,000 you'll pay 5.75% plus \$230 single or \$340 married.

Personal Exemptions: Single - \$2,700; Married - \$7,400; Dependents - \$3,000 each

Standard Deduction: Single – \$4,600; Married filing joint return – \$6,000; Taxpayer over 65 – \$1,300 additional each.

Medical/Dental Deduction: Same as Federal taxes

Federal Income Tax Deduction: None

Retirement Income Taxes: Social Security is exempt. Taxpayers who are 62 years of age or older, or permanently and totally disabled regardless of age, may be eligible for a retirement income adjustment on their Georgia tax return. Retirement income includes income from pensions and annuities, interest income, dividend income, net income from rental property, capital gains income, and income from royalties. For married couples filing joint returns with both members receiving retirement income, the maximum adjustment for the applicable year may be up to twice the individual exclusion amount. Retirement income exceeding the maximum adjustable amount will be taxed at the normal rate.

Retired Military Pay: Same as above.

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

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

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

State Income Tax Website: https://dor.georgia.gov/taxes/individual-taxes

Property Taxes

Property taxes are collected on a county level, and each county in Georgia has its own method of assessing and collecting taxes.

• The median property tax in Georgia is \$1,346.00 per year for a home worth the median value of \$162,800.00. Counties in Georgia collect an average of 0.83% of a property's assessed fair market value as property tax per year.

- Georgia is ranked number thirty three out of the fifty states, in order of the average amount of property taxes collected.
- Georgia's median income is \$60,114 per year, so the median yearly property tax paid by Georgia residents amounts to approximately 2.2 % of their median yearly income. Georgia is ranked 31st of the 50 states for property taxes as a percentage of median income.
- The exact property tax levied depends on the county in Georgia the property is located in. Refer to http://www.tax-rates.org/georgia/property-tax#Counties for median property taxes by County. Your county's property tax assessor will send you a bill detailing the exact amount of property tax you owe every year

The State of Georgia offers homestead exemptions to all qualifying homeowners. In some counties they have increased the amounts of their homestead exemptions by local legislation above the amounts offered by the State. As a general rule the exemptions offered by the county are more beneficial to the homeowner.

<u>Standard Homestead Exemption</u>. The home of each resident of Georgia that is actually occupied and used as the primary residence by the owner may be granted a \$2,000 exemption from county and school taxes except for school taxes levied by municipalities and except to pay interest on and to retire bonded indebtedness. The \$2,000 is deducted from the 40% assessed value of the homestead. The owner of a dwelling house of a farm that is granted a homestead exemption may also claim a homestead exemption in participation with the program of rural housing under contract with the local housing authority. (O.C.G.A. § 48-5-44)

<u>Individuals 65 Years of Age and Older May Claim a \$4,000 Exemption</u>. Individuals 65 years of age or over may claim a \$4,000 exemption from all county ad valorem taxes if the income of that person and his spouse does not exceed \$10,000 for the prior year. Income from retirement sources, pensions, and disability income is excluded up to the maximum amount allowed to be paid to an individual and his spouse under the federal Social Security Act. The social security maximum benefit for 2019 is \$68,664. The owner must notify the county tax commissioner if for any reason they no longer meet the requirements for this exemption. (O.C.G.A. § 48-5-47)

For more about Georgia Property Tax refer to <u>https://dor.georgia.gov/local-government-services/digest-compliance-section/property-taxes-georgia</u>.

Inheritance & Estate Taxes

There is no inheritance tax or gift tax and only a limited estate tax which is an amount equal to the amount allowable as a credit for state death taxes under Section 2011 of the Internal Revenue Code. In effect, the estate taxes paid to Georgia may be used to reduce the estate taxes due the IRS.

Other State Tax Rates

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

- Sales Tax: <u>http://www.tax-rates.org/taxtables/sales-tax-by-state</u>.
- Excise Taxes (i.e. gasoline, cigarettes, cellphones, automobiles, beer, wine, and liquor: <u>http://www.tax-rates.org/taxtables/excise-tax-by-state</u>.
- Personal Income Tax: <u>http://www.tax-rates.org/taxtables/income-tax-by-state</u>.
- Property Tax: <u>http://www.tax-rates.org/taxtables/property-tax-by-state</u>.

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For further information call 404-417-4477 or visit the <u>Georgia Department of Revenue</u> site <u>http://dor.georgia.gov/search?query=georgia%20department%20revenue</u>.

[Source: https://dor.georgia.gov & http://www.tax-rates.org | JUN 2018 ++]

* G<mark>eneral Interest</mark> *



Notes of Interest August 01 thru 15, 2020

- Agent Orange Newsletter. VA's 2020 issue of the Agent Orange Newsletter covers Blue Water Navy Veterans and benefits; a revised list of Agent Orange testing and storage locations; intergenerational effects from Agent Orange; registry exams at the El Paso VA Health Care System; and more. To read go to https://www.publichealth.va.gov/docs/agentorange/reviews/ao-newsletter-2020.pdf..
- National Guard Coronavirus Mission. The White House announced 4 AUG that nearly 25,000 National Guard troops serving on missions throughout the country have had their deployments extended. The deadline for the deployments to end was 21 AUG but is now extended to 31 DEC for 49 states and territories. As of 3 AUG, more than 24,900 Air and Army National Guard members were deployed in 50 states, three territories, and the District of Columbia.
- VA Secretary Interview. ABC talks with U.S. Secretary of Veterans Affairs Robert Wilkie about veterans and the Coronavirus at www.waaytv.com/content/video/572002812.html (6-min video).
- Average Retirement Age. Go to <u>https://www.moneytalksnews.com/slideshows/the-average-retirement-age-in-every-state/?all</u> to see the age in your state and nationwide.
- Nursing Homes. If you are looking for one make sure you verify your selection is not listed in the Pennsylvania Senators Uncovering Poor Care In America's Nursing Home June 2019 Right To Know report at www.aging.senate.gov/imo/media/doc/Casey%20Toomey%20SFF%20Report%20June%202019.pdf.
- **Paying Scammers.** Scammers make up all kinds of stories to get your money, from telling you that you've won a prize, you owe a debt, or your family member is in an emergency. But some things stay the same: scammers want your money, they want it fast, and don't want you to be able to get it back. They'll ask you to pay in ways that make it hard to track them down and once you know what these are, you'll have one more clue to tell if you're dealing with a scammer. To view a short video on this go to https://www.consumer.ftc.gov/files/video-0161_howscammerstellyoutopay_640x360.jpg
- Navy E-4 Exams. The Navy has canceled petty officer 3rd class advancement exams for the second time this year to limit exposure to the coronavirus, a service statement said. Instead, sailors will be selected for advancement from E-3 to E-4 this fall based on a scoring formula that is heavily based on job performance but also looks at other criteria, the statement said.
- Virginia Tax Increase. Effective Oct.1, 2020, a new 0.7% regional retail sales and use tax will be levied in localities in Central Virginia. This includes the city of Richmond and the counties of Charles City, Chesterfield, Goochland, Hanover (including the town of Ashland), Henrico, New Kent and Powhatan. The sales and use tax levied in these localities will total 6%, comprised of the 4.3% state tax, the .7% regional state tax and the 1% percent local option tax.
- State Largest Vet Employers. Go to <u>https://www.blogs.va.gov/VAntage/76442/veterans-benefits-2020-largest-successful-state-employer-veterans</u> for a list of the largest or most successful state employer of Veterans in your state.
- National Anthem. Check out https://youtu.be/9ETrr-XHBjE. This is the NFL 2006 opening ceremony for Super Bowl 39. No kneeling, no hiding in locker rooms and no trashing America.

• **Draft.** A federal appeals court in New Orleans upheld the constitutionality of the all-male military draft system on 13 AUG, citing a 1981 U.S. Supreme Court decision.

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

Germany's U.S. Troops

Plan to Remove One-Third

Removing 12,000 troops from Germany will likely mean several base closures and cost billions of dollars for an operation that could begin in weeks but take years to complete. The realignment, triggered by President Donald Trump's call to move some of the roughly 36,000 troops out of the country, would require significant spending, military officials said. Along with 5,600 troops heading to other bases in Europe under the proposal and about 6,400 heading home, planners must determine how to move thousands more military family members and civilian workers, find them housing and expand Defense Department school capacities, among other challenges. They would also need to establish potentially costly new operations centers to allow U.S. European Command and other headquarters to seamlessly continue working.

Defense Secretary Mark Esper told reporters 29 JUL from the Pentagon that "probably the area most affected would be the Stuttgart area," where the U.S. military has been since defeating the Nazis in World War II. The plan proposes moving EUCOM and its component, U.S. Special Operations Command Europe, from Stuttgart to Mons, Belgium, to operate alongside NATO's command. U.S. Africa Command could also leave Stuttgart, but no decision has been made on where it would go, Esper said. EUCOM's Patch Barracks, U.S. Africa Command's Kelley Barracks and garrison headquarters in nearby Boeblingen, where a \$100 million school complex opened a few years ago, all could be vacated. The U.S. could also pull out from rural areas like Grafenwoehr, Ansbach and Vilseck in Bavaria. That would likely mean mothballing sites or turning them over to the Germans.

Some moves could begin in weeks, but it's unlikely the initial wave will involve EUCOM, said Capt. Wendy Snyder, the command's spokeswoman. "A lot of planning is needed for HQ moves, so we are a ways down the road," Snyder said in an email. Stuttgart Lord Mayor Fritz Kuhn called the proposed troop cuts "punitive action against an ally" that "upended decades of close cooperation" between Germany and the U.S. But he and other German politicians were hopeful that the plan would be reversed and the bases — and U.S. troops — would stay put. That remains a possibility, with bipartisan resistance to the idea in Congress and the U.S. presidential election less than 100 days away. Trump's rival for the presidency, Joe Biden, has been critical of the troop-cut plan.

The first moves

An engineering squadron at Spangdahlem Air Base could be the first to move. "Pending further planning and refinement, we anticipate the 52nd Civil Engineering Squadron could move soonest, at a time to be determined, from Germany to Italy," said Gen. Tod Wolters, who 30 JUL said the F-16 fighter squadron and other elements of the 52nd Fighter Wing at Spangdahelm are "reposturing to Italy," but that the German base will remain open to support other airlift missions. Two 173rd Airborne Brigade battalions could leave Grafenwoehr for Vicenza, Italy, "to reunite with their parent brigade headquarters, a move that will enhance unity of command," Wolters said. The Vilseck-based 2nd Cavalry Regiment's 4,500 soldiers would head back to the U.S., he said. That would be the largest of all the troop moves and would mean the departure of the last brigade-size ground combat force from Germany.

"This is a bitter loss," Vilseck Mayor Hans-Martin Schertl said. U.S. troops in Bavaria contribute nearly \$1 billion to the economy. Schertl said Vilseck will need state and federal government financial support. "I was surprised by the decision," Schertl said. "It was always said the training area here is like the crown jewel of the U.S. Army in Europe." Even though Esper said the pullout from Vilseck would be offset by more rotations to countries in the Black Sea region,

some analysts questioned the Pentagon's plan. The realignment was meant to "deter against Russia, assist NATO, strengthen the alliance ... all the while keeping a close eye on the care and feeding of our families," Wolters said

But at a time when the Pentagon has been focused on countering Russia by building up its force along NATO's eastern flank — in Poland and the Baltic states, for instance — the plan proposes sending U.S. troops south to Italy and west into Belgium. The military intends to reposition three brigade-sized headquarters, an air defense artillery battalion and an engineering battalion to Belgium from Germany, the Pentagon said. Esper and Wolters did not name the units, but since the cuts are concentrated in Bavaria, the likely targets are the 12th Combat Aviation Brigade and the 5th Battalion, 4th Air Defense Artillery at Ansbach, and the 41st Field Artillery Brigade and 18th Military Police Brigade at Grafenwoehr.

Old plans revived

An argument against the plan is that it doesn't support Trump's rationale that those who don't invest enough in defense should be punished by withdrawing U.S. troops. NATO data show that Italy and Belgium both spend a smaller percentage of their gross domestic product in national defense than Germany. Aspects of the plan have also been rejected in the past. In 2013, U.S. Army Europe shelved a proposal to move troops from Germany to Italy, arguing that units in Germany needed the training ranges at Grafenwoehr. The lack of training space in Italy has been a long-standing problem for the Army. USAREUR declined to state which bases could close or why moving battalions now makes sense, saying only that, "there is planning and coordination that need to be done in order to develop this concept into an actionable plan."

The plan would cut the long-time U.S. military presence near Grafenwoehr in Bavaria, where the Army has spent billions on bases over the years. Grafenwoehr Mayor Edgar Knobloch tried to put a positive spin on the plan's impact. At least, he said, the Army's training grounds "will continue to exist." "Nevertheless, it is sad to hear that America will remove some of its troops" after more than 70 years of an Army presence in the town, Knobloch said. "It would be a shame for the troops to leave. There is a great loyalty from the Germans toward the Americans here." [Source: Stars & Stripes | John Vandiver & Marcus Kloeckner | July 30, 2020 ++]

U.S. Flag Why Do We Stand



Why do Americans stand for the U.S. flag and the national anthem? In the midst of the NFL controversy over players who take a knee instead of standing for the national anthem, let us remember the many reasons why many of us stand for the flag and how it all began.

Americans have stood for the U.S. flag since June 14, 1777, the day the Continental Congress declared "that the flag of the (thirteen) United States be thirteen stripes, alternate red and white: that the union be thirteen stars, white in a blue field, representing a new constellation." Thirty-seven years later in Aug. 1814, the White House and U.S. Capitol lay in ashes after the British military burned the public buildings in Washington D.C. In the immediate aftermath, many Americans understandably feared that the Union Jack, the British flag, would soon fly over all of America again. Hence, three weeks after the sacking of Washington, Francis Scott Key, a Maryland attorney who politically oppose the current president, was so moved at seeing the U.S. flag flying victoriously at the end of the battle for Baltimore's Fort McHenry, that he wrote lyrics for The Star-Spangled Banner, the song we now call the national anthem.

1. We stand for the flag today, not to please ourselves but to honor those who paid the ultimate sacrifice for our freedom.

The more than 1.2 million Americans who have died because of war. We stand for soldiers who initially inspired our national anthem, such as William Williams, a runaway slave who later died after having his leg blown off as part of the 38th U.S. Infantry at the Battle of Fort McHenry. We also stand for more recent heroes, such as Robert Kelly, the son of White House Chief of Staff John Kelly, a marine lieutenant who died in a roadside bomb blast in Afghanistan in 2010.

"I believe every American, when the national anthem is played, should cover their hearts and think about all the men and women who have been maimed and killed. Every American should stand and think for three lousy minutes," John Kelly declared in response to the NFL controversy.

2. We stand for the flag not to focus on what divides us but on what unites us, which is being an American.

"The name of American, which belongs to you, in your national capacity, must always exalt the just pride of patriotism, more than any appellation derived from local discriminations. With slight shades of difference, you have the same religion, manners, habits, and political principles," George Washington, our first president, declared in his farewell address in 1796.

The same is true today. More than being a New Yorker or a Texan or being a Steelers fan or Rams fan, the name "American" deserves our highest respect and pride. Standing for the flag and anthem at a sports game or other public gatherings, symbolically shows that we are all Americans, no matter our race or religion, no matter our preferred sports team, and no matter our political differences. Standing is the ultimate salute to sportsmanship.

3. We stand for the flag not to pledge allegiance to a president, but to honor the reality that we have an elected president and not a lifetime king.

By standing, we honor the fact that our country has had 45 presidents. Our flag reflects our system of government, divided by 50 states, the stars on the flag, but united under a federal government. The national anthem controversy in the NFL started during the term of our previous president and continues during our current president's term.

4. We stand not because of past or present pain caused by injustice, but to salute the principle of justice.

This is one of the three definitions for the color blue that Congress gave us in 1782. "The colors of ... those used in the flag of the United States of America. White signifies purity and innocence. Red (signifies) hardiness and valor and blue ... signifies vigilance, perseverance and justice." Patriotism is not pride in the pain of our nation's past. Rather, patriotism is pride in the principles that paved the way for change, whether that change was trading royalty for representation in 1776 or exchanging enslavement for emancipation in 1863.

From John Adams and Thomas Jefferson to Martin Luther King, Jr., many Americans have stood for justice for a more perfect union. "When the architects of our republic wrote the magnificent words of the Constitution and the Declaration of Independence, they were signing a promissory note to which every American was to fall heir. This note was a promise that all men—yes, black men as well as white men—would be guaranteed the unalienable rights of life,

liberty, and the pursuit of happiness," King declared in his 1968 "I Have a Dream" speech. King tapped the principles created by our founders and applied them to make "justice a reality for all of God's children."

5. We stand for the flag not for our generation but to set an example for the next generation.

"If we do not advocate a love of country to our children and the generations to come, then why would our children grow up to fight for their countries, the founding principles and moral truths?" Melania Trump asked in a recent speech to the United Nations. Passing along patriotism is crucial to the future survival of America. The color of white in the flag symbolizes the purity and innocence of our children. When we stand for the flag and anthem, we are standing for our hopes for our children's future, that they will embrace the principles of patriotism and live out its moral truths of justice, perseverance and courage. We stand for the flag and anthem so they can stand for the flag and anthem.

[Source: The Hill | Jane Hampton Cook (Opinion) | September 29, 2017 ++]

U.S. Russia Tensions

Update 03: Russia Warns It Will See Any Incoming Missiles as Nuclear

Russia will perceive any ballistic missile launched at its territory as a nuclear attack that warrants a nuclear retaliation, the military warned in an article published Friday. The harsh warning in the official military newspaper Krasnaya Zvezda (Red Star) is directed at the United States, which has worked to develop long-range non-nuclear weapons. The article follows the publication in June of Russia's nuclear deterrent policy that envisages the use of atomic weapons in response to what could be a conventional strike targeting the nation's critical government and military infrastructure.

In the Krasnaya Zvezda article, senior officers of the Russian military's General Staff, Maj.-Gen. Andrei Sterlin and Col. Alexander Khryapin, noted that there will be no way to determine if an incoming ballistic missile is fitted with a nuclear or a conventional warhead, and so the military will see it as a nuclear attack. "Any attacking missile will be perceived as carrying a nuclear warhead," the article said. "The information about the missile launch will be automatically relayed to the Russian military-political leadership, which will determine the scope of retaliatory action by nuclear forces depending on the evolving situation." The argument reflects Russia's longtime concerns about the development of weapons that could give Washington the capability to knock out key military assets and government facilities without resorting to atomic weapons.

In line with Russian military doctrine, the new nuclear deterrent policy reaffirmed that the country could use nuclear weapons in response to a nuclear attack or an aggression involving conventional weapons that "threatens the very existence of the state." The policy document offered a detailed description of situations that could trigger the use of nuclear weapons, including the use of nuclear weapons or other weapons of mass destruction against Russia or its allies. In addition to that, the document states for the first time that Russia could use its nuclear arsenal if it receives "reliable information" about the launch of ballistic missiles targeting its territory or its allies and also in the case of "enemy impact on critically important government or military facilities of the Russian Federation, the incapacitation of which could result in the failure of retaliatory action of nuclear forces."

U.S.-Russia relations are at post-Cold War lows over the Ukrainian crisis, the accusations of Russian meddling in the U.S. 2016 presidential election and other differences. Russian officials have cast the U.S.-led missile defense program and its plans to put weapons in orbit as a top threat, arguing that the new capability could tempt Washington to strike Russia with impunity in the hope of fending off a retaliatory strike.

The Krasnaya Zvezda article emphasized that the publication of the new nuclear deterrent policy was intended to unambiguously explain what Russia sees as aggression. "Russia has designated the 'red lines' that we don't advise anyone to cross," it said. "If a potential adversary dares to do that, the answer will undoubtedly be devastating. The specifics of retaliatory action, such as where, when and how much will be determined by Russia's military-political leadership depending on the situation." [Source: Associated Press | Vladimir Isachenkov | August 7, 2020 ++]

Trump Border Wall

Update 07: Supreme Court Declines to Halt Construction



The Supreme Court declined by a 5-4 vote 31 JUL to halt the Trump administration's construction of portions of the border wall with Mexico following a recent lower court ruling that the administration improperly diverted money to the project. The court's four liberal justices dissented, saying they would have prohibited construction while a court challenge continues, after a federal appeals court ruled in June that the administration had illegally sidestepped Congress in transferring the Defense Department funds. "The Court's decision to let construction continue nevertheless I fear, may operate, in effect, as a final judgment," Justice Stephen Breyer wrote in a brief dissent for the four liberals.

The Friday order means the court is not likely even to consider the substance of the issue until after the November election, while work on the wall continues. Last summer, at an earlier stage in the case, the justices also split 5-4 along ideological lines to allow the administration to begin construction using \$2.5 billion in Defense Department funds. That allowed President Donald Trump to make progress on a major 2016 campaign promise heading into his race for a second term. The administration wanted to use the money to replace a total of 129 miles of rundown or outdated fencing in New Mexico, Arizona and California. As of mid-July, 92 miles have been completed according to U.S. Customs and Border Protection.

Following the latest appeals court ruling, the wall's challengers returned to the high court to ask that construction be halted. The Trump administration opposed the request and said it would file paperwork in August asking the Supreme Court to hear arguments in the case. The case has its origins in the 35-day partial government shutdown that started in December of 2018. Trump ended the shutdown after Congress gave him approximately \$1.4 billion in border wall funding, but that was far less than the \$5.7 billion he was seeking. Trump then declared a national emergency to take cash from other government accounts to use to construct sections of wall.

At the time, the money Trump identified included \$2.5 billion in Defense Department money, \$3.6 billion from military construction funds and \$600 million from the Treasury Department's asset forfeiture fund. The case before the Supreme Court involved just the \$2.5 billion in Defense Department funds. The American Civil Liberties Union, which sued the Trump administration on behalf of Sierra Club and Southern Border Communities Coalition, has said it will seek to tear down sections of the wall that were built with the money.

"Every lower court to consider the question has ruled President Trump's border wall illegal, and the Supreme Court's temporary order does not decide the case. We'll be back before the Supreme Court soon to put a stop to Trump's xenophobic border wall once and for all," Dror Ladin, staff attorney with the ACLU's National Security Project, said in a statement following the court's 31 JUL order. The Supreme Court is on break for the summer but does act on certain pressing items. It will begin hearing cases again in October. [Source: The Associated Press | August 2, 2020 ++]

RP-US Relations

Update 06: Duterte Will Not Allow U.S. Base in RP to Counter China

Philippine President Rodrigo Duterte doesn't want the U.S. military to establish a naval base in his country, saying that he fears the site would be a target in a future nuclear war between the United States and China. "You put up a base at this time? This will ensure that a war breaks out because there will be atomic arsenals brought in," Duterte told lawmakers Monday during a State of the State address. "This will ensure the extinction of the Filipino race."

Those comments cast Manila as an unwilling participant in the U.S.-China competition even as President Trump's administration seeks to enhance America's ability to honor a treaty obligation to protect the Philippines from Chinese threats. Secretary of State Mike Pompeo has amplified U.S. support for the Philippines in territorial disputes with Beijing, but Duterte struck a docile note when describing the controversy. "China has the arms. We do not. ... So it's simple as that," he said. "They are in possession of the property."

Defense analysts in Washington think that the Philippines could be a suitable base for U.S. forces that could counter China's growing military capabilities. Pompeo renewed the U.S. pledge to defend the Philippines from a Chinese attack during a visit to Manila last year. Duterte also called for the U.S. Navy to send a fleet to the islands — "I will ride on the boat with [the] admiral," he said — but it has been more common for Duterte to slap at Washington while currying favor with China. "I have nothing against America," he said during the speech. "I have nothing against China." [Source: Washington Examiner | Joel Gehrke| July 27, 2020 ++]

Overseas Absentee Voting

U.S. Voters in Philippines



United States Embassy Manila, Philippines

Message for U.S. Citizens: Returning Election Materials through the U.S. Embassy July 30, 2020

Cast your vote! Starting August 3, 2020, voters may drop-off **completed** voter forms and ballots at the U.S. Embassy in Manila, located at 1201 Roxas Boulevard, Ermita, Manila. The ballot box will be located in front of the public entrance at the embassy from **8:00 a.m. to 3:30 p.m., Monday through Friday, except on holidays**. Voters may also mail in **completed** forms and ballots to the address below, and the embassy will forward the items to the United States. Please make sure that your voter document is in a pre-paid envelope or that it has sufficient postage. Due to the COVID-19 pandemic, please expect delays with domestic and international mail.

American Citizen Services Unit (Consular) ATTN: Voter Information U.S. Embassy Manila 1201 Roxas Boulevard Ermita, Manila, Philippines 1000

In order to vote in the November 2020 elections, all overseas U.S. citizens need to have completed a Federal Post Card Application (FPCA) in 2020. Whether you are a first-time voter or have already received ballots and voted absentee in past elections, you must complete an FPCA each year to participate in elections as an overseas absentee voter.

Registering to Vote and submitting a ballot is fast, easy, and can be done from anywhere in the world! Follow a few simple steps to vote in the 2020 U.S. elections:

1. Register to vote: Start by confirming your voter registration with your state. Some states require absentee voters to register annually, so you may need to re-register. Go to FVAP.gov to connect to your state's voter portal to register to vote, request a ballot, and more.

2. Request Your Ballot: Most states provide the option to request ballots through their state election portals, which you can easily access via FVAP.gov. You can also choose to complete a Federal Post Card Application (FPCA). The completion of the FPCA allows you to request absentee ballots for all elections for federal offices (President, U.S. Senate, and U.S. House of Representatives), including primaries and special elections, during the calendar year in which it is submitted. FPCA forms that are correctly filled out and include a signature and date are accepted by all local election officials in every U.S. state and territory. FVAP's easy online assistant can assist you with completing the FPCA.

Whether you request your ballot through your state's portal or the FPCA, we encourage you to select the option to receive your ballot electronically (by email, internet download, or fax) when available. This is the fastest way to get your ballot and ensures you have it in time to return a completed form before your state's deadline.

3. Receive and Complete Your Ballot: States are required to send out ballots 45 days before a regular election for federal office, and states generally send out ballots at least 30 days before primary elections. Most states allow you to confirm your ballot delivery online.

4. Return Your Completed, Signed Ballot: Some states allow you to return your completed ballot electronically. If your state requires you to return paper voting forms or ballots to local election officials by mail, you can do so through international mail, professional courier service, or through U.S. Embassy Manila's diplomatic pouch. You will need to place your ballots in pre-paid return envelopes or in envelopes bearing sufficient U.S. postage, in order for them to be delivered to the proper local election authorities once received by the U.S. sorting facility. The Embassy does not sell U.S. postage.

You may drop off your completed ballots at the embassy's public entrance from **8am to 4pm**, **Monday through Friday, except on holidays.** It may take weeks for mail to reach its destination if sent by an embassy or consulate. All overseas U.S. citizens are advised to submit their forms and ballots accordingly. Ballots will be received and forwarded whenever submitted but you may want to consider using a courier service or other global shipping provider if submitting your ballot close to or after the stated delivery time for pouch mail.

Visit the FVAP website for helpful resources to aid your research of candidates and issues. For information about election dates and deadlines, subscribe to FVAP's Voting Alerts (vote@fvap.gov). FVAP also shares Voting Alerts via Facebook (@DODFVAP), Twitter (@FVAP), and Instagram (@fvapgov). Learn more at the Federal Voting Assistance Program's (FVAP) website, <u>FVAP.gov</u>. If you have any questions about registering to vote overseas, please contact U.S. Embassy Manila's American Citizen Services Unit at <u>acsinfomanila@state.gov</u>. Remember, your vote counts!

For further information:

• See the State Department's <u>travel website</u> for the Worldwide Caution, Travel Advisories, Alerts, and the <u>Philippines Country Specific Information</u>.

- Enroll in the <u>Smart Traveler Enrollment Program</u> (STEP) to receive Alerts and make it easier to locate you in an emergency.
- Contact the U.S. Embassy in Manila, Philippines, located at 1201 Roxas Boulevard, at +(63) (2) 301-2000, from 7:30 a.m. to 4:00 p.m. Monday through Friday. After-hours emergency number for U.S. citizens is +(63) (2) 301-2000.
- Call 1-888-407-4747 toll-free in the United States and Canada or 1-202-501-4444 from other countries from 8:00 a.m. to 8:00 p.m. Eastern Standard Time, Monday through Friday (except U.S. federal holidays).
- Follow us on <u>Twitter</u> and <u>Facebook</u>.

[Source: RAO Angeles City | Jim Boyd | August 2, 2020 ++]

Philippine Travel Advisory

U.S. Department of State Update August 7, 2020

The U.S. Department of State has updated its Philippines Travel Advisory. Reconsider travel to the Philippines due to **COVID-19**. Additionally, exercise increased caution in the Philippines due to crime, terrorism, civil unrest, a measles outbreak, and kidnapping. Some areas have increased risk. Read the Department of State's <u>COVID-19</u> page before you plan any international travel.

The Centers for Disease Control and Prevention (CDC) has issued a Level 3 Travel Health Notice for the Philippines due to COVID-19. The Philippines has resumed most transportation options, including airport operations and re-opening of borders and business operations (including day cares and schools). Other improved conditions have been reported within the Philippines. For more information on COVID-19 in the Philippines visit the Embassy's <u>COVID-19 page</u>:

Read the Country Information Page.

- Do Not Travel to the Sulu Archipelago, including the southern Sulu Sea, due to crime, terrorism, civil unrest, and kidnapping. Also, Marawi City in Mindanao due to terrorism and civil unrest.
- Reconsider Travel to other areas of Mindanao due to crime, terrorism, civil unrest, and kidnapping.
- Terrorist and armed groups continue plotting possible kidnappings, bombings, and other attacks in the Philippines. Terrorist and armed groups may attack with little or no warning, targeting tourist locations, markets/shopping malls, and local government facilities. The Philippine government has declared a "State of National Emergency on Account of Lawless Violence in Mindanao.
- There is an outbreak of measles in the Philippines. Philippine authorities have reported deaths in the National Capital Region, Central Luzon, and Davao. The Centers for Disease Control and Prevention (CDC) has <u>additional information</u> on the outbreak.

If you decide to travel to the Philippines:

- See the <u>U.S. Embassy's webpage</u> regarding COVID-19.
- Visit the CDC's webpage on <u>Travel and COVID-19</u>.
- Monitor local media for breaking events and adjust your plans based on new information.
- Avoid demonstrations.
- Enroll in the <u>Smart Traveler Enrollment Program</u> (<u>STEP</u>) to receive Alerts and make it easier to locate you in an emergency.
- Follow the Department of State on <u>Facebook</u> and <u>Twitter</u>.
- Review the <u>Crime and Safety Report</u> for the Philippines.

• U.S. citizens who travel abroad should always have a contingency plan for emergency situations. Review the <u>Traveler's Checklist</u>.

The Sulu Archipelago and Sulu Sea – Level 4: Do Not Travel

Terrorist and armed groups continue to conduct kidnappings on land and at sea for ransom, bombings, and other attacks targeting U.S. citizens, foreigners, civilians, local government institutions, and security forces. The U.S. government has limited ability to provide emergency services to U.S. citizens in the Sulu Archipelago and Sulu Sea as U.S. government employees must obtain special authorization to travel to those areas. Visit our website for <u>Travel to High-Risk Areas.</u>

Marawi City in Mindanao – Level 4: Do Not Travel

Civilians are at risk of death or injury due to conflict between remnants of terrorist groups and Philippine security forces in Marawi. The U.S. government has limited ability to provide emergency services to U.S. citizens in Mindanao as U.S. government employees must obtain special authorization to travel there. Visit our website for <u>Travel to High-Risk Areas</u>.

Mindanao – Level 3: Reconsider Travel

The Philippine government maintains a state of emergency and greater police presence in the Cotabato City area, and in the Maguindanao, North Cotabato, and Sultan Kudarat provinces. Terrorist and armed groups continue to conduct kidnappings, bombings, and other attacks targeting U.S. citizens, foreigners, civilians, local government institutions, and security forces. The U.S. government has limited ability to provide emergency services to U.S. citizens in Mindanao as U.S. government employees must obtain special authorization to travel there. Visit our website for <u>Travel to High-Risk Areas</u>.

Assistance:

- Phone U.S. Embassy in the Philippines +63 (2) 301-2000
- Email: ACSInfoManila@state.gov
- State Department Consular Affairs 888-407-4747 or 202-501-4444
- Philippines Country Information
- Enroll in the <u>Smart Traveler Enrollment Program</u> (STEP) to receive security updates
- Follow us on <u>Twitter</u> and <u>Facebook</u>

[Source: U.S. Embassy Manila Alert Update | August 7, 2020 ++]

Census 2020

Door to Door Visits Begin Nationwide



This week, the U.S. Census Bureau began following up with households nationwide that have not yet responded to the 2020 Census. Based on the current self-response rate of 63.3%, the Census Bureau estimates it will need to visit about 56 million addresses to collect responses in person. Up to 500,000 census takers across the country will go door to door to assist people in responding to the 2020 Census.

Census takers began following up with households on 16 JUL in a <u>limited number of areas</u> and added additional areas each week thereafter. Starting 9 AUG, all remaining offices began following up with households nationwide. Census takers have completed training on <u>social distancing and safety protocols</u>, will follow local public health guidelines, and will be required to wear a face mask when conducting follow-up visits. "America has answered the call and most households responded to the census online, by phone or by mail," said Census Bureau Director Dr. Steven Dillingham. "To ensure a complete and accurate count, we must now go door to door to count all of the households we have not heard back from. During this phase, you can still self-respond online (at <u>www.2020census.gov</u>), by phone (at 844-330-2020), or by mailing your completed questionnaire." Households can respond online or by phone in one of 13 languages and find assistance in many more. Those that respond will not need to be visited to obtain their census response.

What Households Can Expect

In most cases, census workers will make up to six attempts at each housing unit address to count possible residents. This includes leaving notification of the attempted visit on the door. The notification will include reminder information on how to respond online, by paper or by phone. In addition, census workers may try to reach the household by phone to conduct the interview. Census takers will go to great lengths to ensure that no one is missed in the census. After exhausting their efforts to do an in-person interview with a resident of an occupied housing unit, they will seek out proxy sources — a neighbor, a rental agent, a building manager or some other knowledgeable person familiar with the housing unit — to obtain as much basic information about the occupants as they can. Census takers are hired from local communities. All census takers speak English, and many are bilingual. If a census taker does not speak the householder's language, the household may request a return visit from a census taker who does. Census takers will also have materials on hand to help identify the household's language.

How to Identify Census Takers

Census takers can be <u>easily identified</u> by a valid government ID badge with their photograph, a U.S. Department of Commerce watermark, and an expiration date on the badge. To confirm a census taker's identity, the public may contact their <u>regional census center</u> to speak with a Census Bureau representative.

The Census Bureau Will Follow Up With Some Households by Phone

In order to minimize the need to send census takers to households in person, the Census Bureau is training census takers to follow up with households by phone. Using information provided to the Census Bureau and third-party purchased data, the Census Bureau has a strong contact list for both landlines and cellphones assigned to houses on the Census Bureau's address list. These phone calls will enable the Census Bureau to have maximum flexibility for conducting field operations, and is one more method that census takers can use to reach nonresponding households. Phone calls will be used on an as-needed basis and when in-person contact attempts have not resulted in an interview. If a voicemail is available, the census taker will leave a message asking the household to call one of the Census Bureau's call centers.

Census Response Representatives to Visit Low-Responding Areas

The Mobile Questionnaire Assistance (MQA) program will continue through Sept. 30. This is a separate activity from census takers going door to door. MQA representatives are in open, public places in the lowest-responding areas of the nation to encourage people to respond to the 2020 Census. These locations are where people naturally visit when leaving home and can be used to help increase self-response rates. MQA is part of the Census Bureau's final push to encourage people to complete the 2020 Census.

About the 2020 Census

The U.S. Constitution mandates a census of the population every 10 years. The goal of the 2020 Census is to count everyone who lives in the United States on April 1, 2020 (Census Day). Census statistics are used to determine the number of seats each state holds in the U.S. House of Representatives and inform how billions of dollars in federal funds will be allocated by state, local and federal lawmakers annually for the next 10 years. For more information, visit 2020census.gov.

[Source: U.S. Census Bureau | August 11, 2020 ++]

Coronavirus Vaccine

Update 08: Red Flags Soar as Big Pharma Will be Exempt



Towards the end of JUL some news media warned potential users to be cautious about new COVID-19 vaccines, highlighting how key parts of the clinical trials are being skipped as big pharma will not be held accountable for adverse side effects for administering the experimental drugs. A senior executive from AstraZeneca, Britain's second-largest drugmaker, told Reuters that his company was just granted protection from all legal action if the company's vaccine led to damaging side effects. "This is a unique situation where we as a company simply cannot take the risk if in ... four years the vaccine is showing side effects," said Ruud Dobber, a top exec at AstraZeneca.

"In the contracts we have in place, we are asking for indemnification. For most countries, it is acceptable to take that risk on their shoulders because it is in their national interest," said Dobber, adding that Astra and regulators were making safety and tolerability a top priority. AstraZeneca is one of the 25 pharmaceutical companies across the world, testing experimental drugs that could be used to combat the deadly virus. And, of course, if testing yields positive results, AstraZeneca could manufacture hundreds of millions of doses, with no legal recourse if side effects are seen. European officials told Reuters that product liability was a significant discussion to secure new vaccine drugs from Pfizer, Sanofi, and Johnson & Johnson.

As for the US, well, when it comes to the legal framework around vaccines, the US Food and Drug Administration (FDA) already has a law called the Public Readiness and Emergency Preparedness (PREP) Act, which provides immunity to vaccine companies if something goes wrong. With AstraZeneca, and many US big pharma companies rushing COVID-19 vaccines to market with governments granting them immunity if the vaccine has side effects, all suggest corporate elites and government regulators have very little faith in these drugs. For more color on leading vaccines in development that produce "severe" side effects, refer to the article "Moderna COVID-19 Vaccine Induced Adverse Reactions In More Than Half" Of Trial Participants."

Maybe these rushed vaccines are more for optics, get consumers back into airplanes, hotels, resorts, and malls. The major red flag is how governments are allowing big pharma to rush experimental vaccines, with no legal recourse if something goes terribly wrong. [Source: <u>https://www.zerohedge.com</u> | Tyler Durden (Opinion) | August 1, 2020 ++]

Coronavirus Vaccine

Update 10: Concerns Over Russia's New Vaccine



Russia on 11 AUG became the first country to approve a coronavirus vaccine, a move that was met with international skepticism and unease because the shots have only been studied in dozens of people. President Vladimir Putin announced the Health Ministry's approval and said one of his two adult daughters already was inoculated. He said the vaccine underwent the necessary tests and was shown to provide lasting immunity to the coronavirus, although Russian authorities have offered no proof to back up claims of safety or effectiveness. "I know it has proven efficient and forms a stable immunity," Putin said. "We must be grateful to those who made that first step very important for our country and the entire world."

However, scientists in Russia and other countries sounded an alarm, saying that rushing to offer the vaccine before final-stage testing could backfire. What's called a Phase 3 trial — which involves tens of thousands of people and can take months — is the only way to prove if an experimental vaccine is safe and really works. By comparison, vaccines entering final-stage testing in the U.S. require studies of 30,000 people each. Two vaccine candidates already have begun those huge studies, with three more set to get underway by fall. "Fast-tracked approval will not make Russia the leader in the race, it will just expose consumers of the vaccine to unnecessary danger," said Russia's Association of Clinical Trials Organizations, in urging government officials to postpone approving the vaccine without completed advanced trials.

While Russian officials have said large-scale production of the vaccine wasn't scheduled until September, Deputy Prime Minister Tatyana Golikova said vaccination of doctors could start as early as this month. Officials say they will be closely monitored after the injections. Mass vaccination may begin as early as October. "We expect tens of thousands of volunteers to be vaccinated within the next months," Kirill Dmitriev, chief executive of the Russian Direct Investment Fund that bankrolled the vaccine, told reporters. The vaccine developed by the Gamaleya Institute in Moscow with assistance from Russia's Defense Ministry uses a different virus -- the common cold-causing adenovirus -- that's been modified to carry genes for the "spike" protein that coats the coronavirus, as a way to prime the body to recognize if a real COVID-19 infection comes along. That's a similar technology as vaccines being developed by China's CanSino Biologics and Britain's Oxford University and AstraZeneca — but unlike those companies, Russian scientists haven't published any scientific information about how the vaccine has performed in animal tests or in early-stage human studies.

Dmitriev said even as Russian doctors and teachers start getting vaccinated, advanced trials were set to start 12 AUG that will involve "several thousand people" and span several countries, including the United Arab Emirates, Saudi Arabia, the Philippines and possibly Brazil. The Associated Press couldn't find documentation in the Russian Health Ministry's records indicating that permission to start the advanced trials was granted. The ministry has not responded to a request for comment. Putin said one of his daughters has received two doses, and had minor side effects

such as slight fever, and is now "feeling well and has a high number of antibodies." It wasn't clear if she was one of the study volunteers.

The Health Ministry said in a statement 11 AUG that the vaccine is expected to provide immunity from the coronavirus for up to two years, citing its experience with vaccines made with similar technology. However, scientists around the world have been cautioning that even if vaccine candidates are proven to work, it will take even more time to tell how long the protection will last. "The collateral damage from release of any vaccine that was less than safe and effective would exacerbate our current problems insurmountably," Imperial College London immunology professor Danny Altmann said in a statement 11 AUG. The World Health Organization said all vaccine candidates should go through full stages of testing before being rolled out. Experts have warned that vaccines that are not properly tested can cause harm in many ways — from harming health to creating a false sense of security or undermining trust in vaccinations.

Becoming the first country in the world to approve a vaccine was a matter of national prestige for the Kremlin as it tries to assert the image of Russia as a global power. Putin repeatedly praised Russia's effective response to the outbreak in televised addresses to the nation, while some of Moscow's top officials – including the country's prime minister and Putin's own spokesperson – became infected. And the U.S., Britain and Canada last month accused Russia of using hackers to steal vaccine research from Western labs. Russia has denied involvement. Russia has so far registered 897,599 coronavirus cases, including 15,131 deaths.

The Gamaleya Institute's director, Alexander Gintsburg, raised eyebrows in May when he said that he and other researchers tried the vaccine on themselves before the start of human studies. Those trials started 17 JUN with 76 volunteers. Half were injected with a vaccine in liquid form and the other half with a vaccine that came as soluble powder. Some in the first group were recruited from the military, which raised concerns that servicemen may have been pressured to participate. The test was declared completed earlier this month. "It's a too early stage to truly assess whether it's going to be effective, whether it's going to work or not," Dr. Michael Head, senior research fellow in global health at the University of Southampton.

It's not Russia's first controversial vaccine. Putin has bragged that Russian scientists delivered an Ebola vaccine that "proved to be the most effective in the world" and "made a real contribution to fighting the Ebola fever in Africa." However, there is little evidence either of the two Ebola vaccines approved in Russia was widely used in Africa. As of 2019, both of those vaccines were listed by the WHO as "candidate vaccines." [Source: Associated Press | Vladimir Isachenkov & Daria Litvinova | August 11, 2020 ++]

Have You Heard?

Senior Citizens 4 | Reasons Not to Mess with Children | Lessons Learned

Senior Citizens 4



An elderly couple had dinner at another couple's house, and after eating, the wives left the table and went into the kitchen.

The two gentlemen were talking, and one said, 'Last night we went out to a new restaurant and it was really great. I would recommend it very highly.'

The other man said, 'What is the name of the restaurant?'

The first man thought and thought and finally said, 'What's the name of that flower you give to someone you love? You know, the one that's red and has thorns.'

'Do you mean a rose?'

'Yes, that's the one,' replied the man. He then turned towards the kitchen and yelled, 'Rose, what's the name of that restaurant we went to last night?'

#########

Hospital regulations require a wheel chair for patients being discharged. However, while working as a student nurse, I found one elderly gentleman already dressed and sitting on the bed with a suitcase at his feet, who insisted he'd didn't need my help to leave the hospital.

After a chat about rules being rules, he reluctantly let me wheel him to the elevator.

On the way down I asked him if his wife was meeting him.

'I don't know,' he said. 'She's still upstairs in the bathroom changing out of her hospital gown.'

##########

A senior citizen said to his eighty-year old buddy:

'So I hear you're getting married?'
'Yep!'
'Do I know her?'
'Nope!'
'This woman, is she good looking?'
'Not really.'
'Is she a good cook?'
'Naw, she can't cook too well.'
'Does she have lots of money?'
'Nope! Poor as a church mouse.'
'Well, then, is she good in the house
'I don't know.'
'Why in the world do you want to marry her then?'

'Because she can still drive!'

#########

A man was telling his neighbor, 'I just bought a new hearing aid. It cost me four thousand dollars, but it's state of the art. It's perfect.'

'Really,' answered the neighbor. 'What kind is it?' 'Twelve thirty.'

#########

Morris, an 82 year-old man, went to the doctor to get a physical.

A few days later, the doctor saw Morris walking down the street with a gorgeous young woman on his arm. A couple of days later, the doctor spoke to Morris and said, 'You're really doing great, aren't you?' Morris replied, 'Just doing what you said, Doc: 'Get a hot mamma and be cheerful." The doctor said, 'I didn't say that.. I said, 'You've got a heart murmur; be careful.'

##########

A little old man shuffled slowly into an ice cream parlour and pulled himself slowly, painfully, up onto a stool... After catching his breath, he ordered a banana split.

The waitress asked kindly, 'Crushed nuts?'

'No,' he replied, 'Arthritis.'

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7 Reasons Not to Mess With Children

A little girl was talking to her teacher about whales.

The teacher said it was physically impossible for a whale to swallow a human because even though it was a very large mammal its throat was very small.

The little girl stated that Jonah was swallowed by a whale.

Irritated, the teacher reiterated that a whale could not swallow a human; it was physically impossible.

The little girl said, 'When I get to heaven I will ask Jonah'.

The teacher asked, 'What if Jonah went to hell?'

The little girl replied, 'Then you ask him'.

#########

Kindergarten teacher was observing her classroom of children while they were drawing. She would occasionally walk around to see each child's work.

As she got to one little girl who was working diligently, she asked what the drawing was.

The girl replied, 'I'm drawing God.'

The teacher paused and said, 'But no one knows what God looks like.'

Without missing a beat, or looking up from her drawing, the girl replied, 'They will in a minute.'

#########

A Sunday school teacher was discussing the Ten Commandments with her five and six year olds. After explaining the commandment to 'honor' thy Father and thy Mother, she asked, 'Is there a commandment that teaches us how to treat our brothers and sisters?'

From the back, one little boy (the oldest of a family) answered, 'Thou shall not kill.'

#########

One day a little girl was sitting and watching her mother do the dishes at the kitchen sink. She suddenly noticed that her mother had several strands of white hair sticking out in contrast on her brunette head.

She looked at her mother and inquisitively asked, 'Why are some of your hairs white, Mum?'

Her mother replied, 'Well, every time that you do something wrong and make me cry or unhappy, one of my hairs turns white.'

The little girl thought about this revelation for a while and then said, 'Mummy, how come ALL of grandma's hairs are white?'

##########

The children had all been photographed, and the teacher was trying to persuade them each to buy a copy of the group picture.

'Just think how nice it will be to look at it when you are all grown up and say, 'There's Jennifer, she's a lawyer,' or 'That's Michael, He's a doctor.'

A small voice at the back of the room rang out, 'And there's the teacher, she's dead.'

##########

A teacher was giving a lesson on the circulation of the blood. Trying to make the matter clearer, she said, 'Now, class, if I stood on my head, the blood, as you know, would run into it, and I would turn red in the face.' 'Yes,' the class said.

'Then why is it that while I am standing upright in the ordinary position the blood doesn't run into my feet?' A little fellow shouted,

'Cause your feet ain't empty.'

#########

The children were lined up in the cafeteria of a Catholic elementary school for lunch. At the head of the table was a large pile of apples. The nun made a note, and posted on the apple tray:

'Take only ONE . God is watching.'

Moving further along the lunch line, at the other end of the table was a large pile of chocolate chip cookies. A child had written a note, 'Take all you want. God is watching the apples..'

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Lessons learned during a long life:

I've learned that I like my teacher because she cries when we sing "Silent Night". Age 5

I've learned that our dog doesn't want to eat my broccoli either. Age 7

I've learned that when I wave to people in the country, they stop what they are doing and wave back. Age 9

I've learned that just when I get my room that way I like it, Mom makes me clean it up again. Age 12

I've learned that if you want to cheer yourself up, you should try cheering someone else up. Age 14

I've learned that although it's hard to admit it, I'm secretly glad my parents are strict with me. Age 15

I've learned that silent company is often more healing that words of advice. Age 24

I've learned that brushing my child's hair is one of life's great pleasures. Age 26

I've learned that wherever I go, the world's worst drivers have followed me there. Age 29

I've learned that if someone says something unkind about me, I must live so that no one will believe it. Age 30

I've learned that there are people who love you dearly but just don't know how to show it. Age 42

I've learned that you can make someone's day be simply sending them a little note. Age 44

I've learned that the greater a person's sense of guilt, the greater his or her need to cast blame on others. Age 46

I've learned that children and grandparents are natural allies. Age 47

I've learned that no matter what happens, or how bad it seems today, life does go on and it will be better tomorrow. Age 48

I've learned that singing "Amazing Grace" can lift my spirits for hours. Age 49

I've learned that motel mattresses are better on the side away from the phone. Age 50

I've learned that you can tell a lot about a man by the way he handles these three things: a rainy day, lost luggage, and tangled Christmas tree lights. Age 51

I've learned that keeping a vegetable garden is worth a medicine cabinet full of pills. Age 52

I've learned that regardless of your relationship with your parents, you miss them terribly after they die. Age 53

I've learned that making a living is not the same thing as making a life. Age 58

I've learned that life sometimes gives you a second chance. Age 62

I've learned that you shouldn't go through life with a catcher's mitt on both hands. You need to be able to throw something back. Age 64

I've learned that if you pursue happiness, it will elude you. But if you focus on your family, the needs of others, your work, meeting new people ... and doing the very best you can, happiness will find you. Age 65

I've learned that whenever I decide something with kindness, I usually make the right decision. Age 66

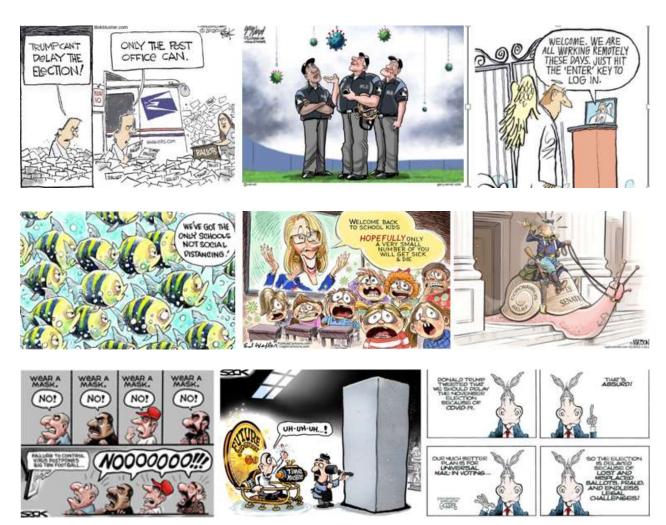
I've learned that everyone can use a prayer. Age 72

I've learned that even when I have pains, I don't have to be one. Age 74

I've learned that every day you should reach out and touch someone. People love that human touch, holding hands, a warm hug, or just a friendly pat on the back. Age 76

I've learned that I still have a lot to learn. Age 78

If Things Get Better With Age Then I'm Approaching Excellent.



Thought of the Week

"Why does a woman work ten years to change a man's habits and then complain that he's not the man she married?" --- Barbra Streisand

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