RAO BULLETIN  
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**Veteran Prison Inmate Programs:** A sergeant at arms, hazmat crew, and intelligence team working in uniform behind guarded gates and a barbed-wire fence isn’t anything out of the ordinary in North Carolina that’s home to major military installations. But the men chosen to perform those tasks a few miles from the North Carolina border in Virginia are unusual. Unlike their comrades who perform these duties on ships and bases, about 80 civilian prisoners are doing so as inmates at the medium-security Indian Creek Correctional Center. Each served in the military before landing in prison, and state officials hope grouping them together to create a military environment will help change their lives and keep them from returning to prison. About 2,000 of 30,000 inmates in the state prison system say they are veterans, though officials say there may be more.

The Virginia Department of Corrections opened two dormitories this summer exclusively for veterans — one at Indian Creek and another in Haynesville — where inmates have served in conflicts from Vietnam to Iraq. Similar dorms have opened at several prisons in Florida, another state home to a large veteran population, as well as at a jail in Columbus, Ga., near Fort Benning. The inmates receive therapy that addresses some problems such as post-traumatic stress disorder, anger issues or substance abuse problems that may have led to them winding up in prison. Prison officials say these treatments help reduce recidivism among all inmates, but that grouping veterans together may be particularly effective. “These offenders have a particular bond because of the service they did for their country, and what they learned when they were in the service, all the good things they learned in the service, all the discipline and structure, is morphed into this program so that those things can now be channeled positively to help them,” said Virginia Secretary of Public Safety Marla Decker.

They’re also given information about resources for veterans to help continue treatment and find housing and employment after they’re released. “Before being part of this dorm, I didn’t know I was qualified for more benefits in the military, and being in the dorm helped me with that and gave me more confidence with an outlook to adapt,” said Johnny Casiano, a Navy veteran who is serving time in Indian Creek for arson after trying to kill himself in a Fairfax County house fire he lit. Casiano, is expected to be released from prison by the end of the month. He’s battled drug and alcohol abuse ever since his brother was killed in New York while Casiano was serving in the Navy in the early 1980s — retribution from rival gang members who couldn’t attack Casiano because he was in the military. Casiano said he’s learned the tools he needs to live a productive life with the support of his fellow veterans. “My greatest fear on getting help was overcoming the fear of opening up to someone. Today, I’m not afraid to speak to no one. I can open up to anyone and get past that hurt,” he said.

At Indian Creek, each inmate is given a job that harkens to terms many learned in their military service. The sergeant at arms is in charge of enforcing rules like making sure everyone’s shirts are tucked in and making sure no one reads magazines in therapy. The mess crew serves as the kitchen staff, the hazmat team is responsible for waste cleanup, and the intel coordinator provides news and information from the outside world. The logos of each branch of the military are painted on the entrance to the dormitory. Murals painted by inmates above the bunk beds include paintings of the Navy’s Blue Angels, as well as the logo for Prisoners of War. There are reminders of the program’s goals on the walls, too, such as remembering to deal with stressful situations and learning how to accept and cope with major losses. The idea is to create a sense of community, trust and accountability. “It helps a lot because we’re like-minded and, you know, there’s an understanding that he understands where I’ve been and some of the things I may have gone through. While I may not have done any deployments, I understand those guys that maybe experience some PTSD issues. It also helps in a major way because this program instills structure and discipline, and it’s easy for me because I did it in the military,” said former Army Sgt. Richard Broome, who is in prison for multiple driving under the influence convictions he got after leaving the Army in 2001.
Broome was a former budget analyst at Fort Belvoir who said he was raised believing that as long as you did your job Monday through Friday, it was OK to blow off steam on weekends and get “sloppy drunk.” “Culturally, it was a part of what I had learned over the years, which was it was acceptable,” Broome said. Now, though, Broome said he’s learned that his choices could have endangered others. For some prisoners, the hurt was self-inflicted.

Judson Anderson was an Army medic in the Vietnam War who later started using crack cocaine, which landed him in prison. After going through the Indian Creek program, he’s now proud of his military service again and plans to continue his addiction treatment after being released in February. “I wasn’t going to tell anybody about my service, about being in the Army, because I was ashamed. I was mad, I was real resentful. I kept that within me for a long period of time,” he said. “I had a lot of issues. I thought I was normal. I wasn’t.” [Source: Associated Press | Brock Vergakis | 25 Nov 2012 ++]

Gulf War Syndrome Update 19: Gulf War illness, the series of symptoms ranging from headaches to memory loss to chronic fatigue that plagues one of four veterans of the 1991 Persian Gulf war, is due to damage to the autonomic nervous system, a study released 26 NOV shows. "This is the linchpin," said the study's lead author, Robert Haley, chief of epidemiology at the University of Texas Southwestern Medical Center in Dallas. "The disease itself is so difficult to express and to understand," Haley said, explaining that veterans described simply that they "don't feel well" or "can't function," without being able to further explain a disease that affects the automatic functions of their bodies, such as heat regulation, sleep or even their heartbeats. "Docs don't know what the disease is, so they can't help," Haley said. "But if you can figure out what the disease is, the other problems will fall in line."

Researchers spent 15 years researching a hypothesis, and then "we planned the ultimate study that proved that hypothesis," Haley said. Along with Steven Vernino, chief of the neuromuscular division at Southwestern, Haley sent 97 veterans through 25 tests, including brain imaging, in seven days. The group had been drawn from a sample of 8,000 Gulf War veterans. "Veterans have high faith in Dr. Haley's dedicated and informative research," said Paul Sullivan of Veterans for Common Sense and a Gulf War veteran. "This finding is important because for the first time physicians who care for Gulf War veterans now have a medical explanation for many of the unusual symptoms."

The team conducted several studies, and then built a theory based on the results of that work. The doctors had funding from Congress until 2010, when they were dropped by the Department of Veterans Affairs after being accused of wasting millions of dollars in research money. That came directly after a 2009 study from Haley showed that neurotoxins such as anti-nerve agent pills, insect repellent and the nerve agent sarin caused neurological changes to the brain, and that the changes seem to correlate with different symptoms.

After they lost funding, Haley and the other researchers continued their work on their own time. "This is the most important study of all," Haley said. "The veterans want to know what's wrong with them. Now, for the first time, all the doctors in the country can say, 'Oh, maybe these are autonomic symptoms.' If you're not thinking autonomic, the symptoms can sound kind of flaky." For years Gulf War veterans have been told the symptoms were all in their heads, which Haley and other researchers say isn't true. There is no known treatment for Gulf War illness, Haley said, but a diagnosis can lead to clinical trials and a possible solution. Veterans of suffering from Gulf War illness tend to fall in three categories:

- Syndrome 1, or cognitive and depression problems.
- Syndrome 2, or confusion ataxia, which is similar to early Alzheimer's disease.
- Syndrome 3, or severe chronic body pain.
Haley said studies released in the next several weeks will include theories as to what caused the syndromes. The study should encourage Congress to devote more money for Gulf War illness research, Sullivan said. The disease affects up to 250,000 veterans, according to the Institute of Medicine. "Knowing the medical basis for a disease focuses the search for specific treatments and makes it possible to test them in clinical trials," Sullivan said. "If VA continues to be reluctant to fund research, then Congress should hold hearings that prompt VA to do the right thing for our veterans." [Source: USA TODAY | Kelly Kennedy | 26 Nov 2012 ++]

DoD Lawsuit ~ Combat Exclusion: Four women and an advocacy group are suing Defense Secretary Leon Panetta, alleging that the policy excluding women from combat units is unconstitutional. The combat exclusion policy puts women at a disadvantage and “sends a clear message to the world that women are not capable of serving their country to the same extent as men,” according to the federal lawsuit filed 27 NOV in California. Major Mary Jennings Hegar, a combat helicopter pilot in the California Air National Guard; Staff Sgt. Jennifer Hunt, a civil affairs soldier in the Army reserves; Capt. Alexandra Zoe Bedell, a logistics officer in the Marine Corps reserves; and 1st Lt. Colleen Farrell, an active-duty Marine air support control officer, are the plaintiffs in the suit, along with the Service Women’s Action Network. They are represented by the American Civil Liberties Union, the ACLU of Northern California and the law firm Munger, Tolles & Olson LLP.

Hegar said she knew she wanted to be an Air Force pilot at a young age and has proven she can do the job. “The ability to serve has very little to do with gender,” she said. "It has everything to do with heart, character, ability, determination and dedication. This policy is a disservice to those women who put their lives on the line for their country." All four women have deployed to Afghanistan, and two were awarded Purple Hearts. Hegar was awarded the Distinguished Flying Cross with Valor for her actions after her helicopter was shot down in 2009 during a casualty evacuation mission. The lawsuit alleges that all the women’s careers have been limited by the policy. It also alleges that male and female Marines were put into more danger than necessary because of a policy related to the exclusion that required Female Engagement Team members to return to a main forward operating base every 45 days, instead of staying with the combat units they served. [Source: Stars and Stripes | Jennifer Hlad | 27 Nov 2012 ++]

Agent Orange Exposed Ships: To submit a claim to the VA for an Agent Orange related medical condition you must be able meet the prerequisites of the feet on the ground policy or prove that you were aboard a ship that had exposure. To assist you, the VA provides a list of naval vessels that have been confirmed as having been exposed to Agent Orange. If your vessel is not included in the Mobile Riverine Force, ISF Division 93 or listed designations at http://www.publichealth.va.gov/exposures/agentorange/shiplist/index.asp#find, check the alphabetized list of ships at either http://www.publichealth.va.gov/exposures/agentorange/shiplist/list.asp#B or the attachment to this Bulletin titled, “Agent Orange Exposed Ships Nov 2012”. Ships will be regularly added to the list based on information confirmed in official records of ship operations. Currently there are 244 ships on this list. Refer to http://www.publichealth.va.gov/exposures/agentorange/shiplist/not-on-list.asp for instructions on how to add a ship to this list. For questions about your eligibility for disability compensation refer to http://www.publichealth.va.gov/exposures/agentorange/disability-compensation.asp. For contact information on your nearest VA benefits office refer to http://www2.va.gov/directory/guide/division.asp?dnum=3. [Source: http://www.publichealth.va.gov/exposures/agentorange/shiplist/list.asp#B Nov 2012 ++]
**SBP DIC Offset Update 36:** Sen. Bill Nelson has submitted an Amendment to the fiscal 2013 National Defense Authorization Act (S.3254) to repeal the DIC offset to SBP. To aid in this effort the military community can request their Senate representatives to do the right thing and fully support Sen. Nelson's amendment which would correct an important inequity faced by our military widows and our military retirees. Specifically, the Nelson amendment would repeal the SBP/DIC offset, ending the unfair dollar-for-dollar deduction of the Defense Department Survivor Benefit Plan against the Veterans Department Dependency and Indemnity Compensation. Military members and retirees have paid for SBP and have the most obvious of expectations to receive what they purchased. Surprisingly, that's not what happens. Under current law, SBP is reduced one dollar for each dollar received under DIC. In some cases survivors of retirees who die as a result of service related cause lose a majority - or all too often -- the entire amount of the monthly SBP annuity purchased by the servicemember. One way we can communicate this is to utilize the National association of Uniformed Officers (NAUS) Action message system at [http://capwiz.com/naus/issues/alert/?alertid=62192176&queueid=[capwiz:queue_id]] to forward a preformatted editable message on the subject to their legislators. [Source: NAUS Action Alert 27 Nov 2012 ++]

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**VA Homeless Vets Update 34:** One of VA’s most important missions is also among its most challenging: ending Veteran homelessness once and for all. The goal has been set for the end of 2015, and the numbers seem to be heading in the right direction; last year, Veteran homelessness fell by 12 percent, thanks to an infusion of prevention services. This isn’t an initiative that will succeed at just the federal level, but locally as well. Two recent stories highlight what can happen when all levels begin to meet mission.

- **The first.** ([http://rapidcityjournal.com/news/new-veterans-program-gives-apprenticeships-to-homeless-vets/article_1c09db8c-37c7-5c03-a3a7-f72de8e7bd14.html](http://rapidcityjournal.com/news/new-veterans-program-gives-apprenticeships-to-homeless-vets/article_1c09db8c-37c7-5c03-a3a7-f72de8e7bd14.html)) from the Rapid City Journal, details a VA program that intakes homeless Veterans and puts them to work at VA national cemeteries. The paid positions don’t just offer steady income, but something worth holding onto as Veterans work to lift themselves back up, as an Iraq Vet in the program described: “It’s given me a sense of pride,” he said. “I was kind of blowing in the wind.” He also plans to continue to use the skill set at a job after the year is up, even if it means leaving the Black Hills. “I love this program; I’m intent on doing this job,” Kurttila said.

- **The second** article ([http://www.washingtonpost.com/politics/homeless-aronlington-veteran-finally-settles-into-home-after-advocates-year-long-efforts/2012/11/22/269faf2c-33fb-11e2-bfd5-c20b67b501_story_1.html](http://www.washingtonpost.com/politics/homeless-aronlington-veteran-finally-settles-into-home-after-advocates-year-long-efforts/2012/11/22/269faf2c-33fb-11e2-bfd5-c20b67b501_story_1.html)) from The Washington Post helps illustrate how local organizations are making an impact despite challenges that can delay assistance, like proper identification for homeless Veterans: This is a common problem for homeless people. “You need ID to get ID,” said Jan-Michael Sacharko, director of development for A-SPAN. “You have to establish you’re a resident of Arlington, which is a bit of an oxymoron — how do you establish you’re a homeless resident of Arlington?” After many months, enough paperwork was collected to get Maas’s birth certificate from California.

Taken together, these articles show progress is hard fought and can be won, but challenges are still ahead to roll that counter down to zero. If you’re a homeless Veteran or family member, or at risk of becoming homeless, give VA’s help line a call at 1-877-4AID-VET (1-877-424-3838), and visit their homeless Veteran website [http://www.va.gov/homeless](http://www.va.gov/homeless) for more information on housing assistance, health care options, and more. [Source: VA Secy Vet Group Liaison Officer Kevin Sector article 27 Nov 2012 ++]

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**FICA:** As we near the end of 2012, Congress is on a tight deadline to come to an agreement to avoid a series of tax cut expirations. It has come to be known as the “fiscal cliff” because with $500 billion in tax increases and across-the-board spending cuts, it could ultimately have an impact on your finances. If Congress makes a last-minute deal to prevent us from going off the fiscal cliff, there’s still a chance that the payroll tax break might not be extended. This means that all American workers across all tax brackets could see their take-home pay reduced by 2 percent. For the average American household, that could result in an increase of $1,000 in taxes in 2013. FICA taxes, designated under the Federal Insurance Contributions Act (FICA), are taken on the first $110,100 of income. It includes a 12.4 percent tax that is paid into Social Security and another 2.9 percent that is paid into Medicare. While the self-employed are required to pay all of their FICA taxes, employees split the bill with their employer.

Ordinarily, workers pay 6.2 percent towards their Social Security contributions. But when the payroll tax holiday was introduced in 2010, that rate temporarily dropped to 4.2 percent. The idea was to put more money into the hands of consumers to boost spending, which in turn would contribute to economic growth. Philip Noftsinger, Business Unit President at CBIZ Payroll, says a reduction in the FICA tax rate was one of the easiest ways for Congress to send money to consumers during the recession. Some members of Congress believe it has had little positive impact. Some also say it has been taking away funding from the Social Security fund at a time when it needs it the most. By some estimates, that figure could be as much as $150 billion per year. “It hasn’t had the impact they thought it would and decreasing the input into Social Security at a time when output is rising, isn’t good,” says Noftsinger. Mari Adam of Adam Financial Associates in Boca Raton, Fla., says no one wants to see their paychecks shrink, but Congress, and many Americans, know it’s necessary. Unlike federal income, FICA taxes go directly to entitlement programs for retirement and medical care in your elder years. In many ways, these programs are a form of insurance, which makes the taxes almost a type of insurance premium. “We’ll all complain but it’s the right thing to do. Social Security is already not on sound financial footing and it’s hard to argue that,” says Adam. “We all need this.”

News about the election and the overall impending fiscal cliff has overshadowed the fact that neither party has expressed an interest in renewing the tax break. Some economists and financial advisers believe there’s little chance it will be extended, so in all likelihood, the employee’s portion of the FICA tax will return to its normal 6.2 percent. For an average worker making $45,000 per year, that’s $900 per year, or $17.30 less they’ll bring home per week. It may not be the end of the world, but at a point in time when prices are rising, incomes are already stagnant, and investment portfolios aren’t doing that well – every dollar counts. “It’s not like it’s $100 per paycheck, but it will add up over the course of a year. It’s like a night out per month for a family of four. They’ll notice it,” says Noftsinger. Because many Americans have become used to that extra money in their pockets, they’re likely going to see it as a tax increase if it hits in 2013. And if they’re not keeping up with the news and current affairs, they’ll feel a little shortchanged when they get their first paycheck in the New Year. Tom Reahard, CEO of Paycheckcity.com, an online payroll solution, says many employers will likely notify their employees if it’s certain the tax break will not be renewed. [Source: MoneyTalksNews | Craig Guillot | 27 Nov 2012 ++]

Vet Cemetery Florida Update 08: The Department of Veterans Affairs has announced that it has purchased land for two new national cemeteries in Florida. “We are pleased to expand burial service to families in the Sunshine State where so many Veterans live,” said Secretary of Veterans Affairs Eric K. Shinseki. “Acquiring this land is a key step forward in bringing these national shrines to Florida.” VA plans to construct one of the cemeteries in central eastern Florida between the cities of Daytona and Melbourne, and the other in northwestern Florida, in the Tallahassee area. Together, the facilities will serve an estimated population of 247,000 Veterans and family members who are not currently served with an open national, state or tribal Veteran’s cemetery within 75 miles of their residence.
VA completed acquisition of the central eastern Florida property on 31 JUL and paid $2 million for 318 acres of land. The property, formerly known as Acosta Groves, is located on U. S. Route 1 in northern Brevard County in Scottsmoor, approximately two miles from Interstate 95. VA purchased the Tallahassee property for $6.8 million on 14 AUG. The 250-acre parcel is in Leon County with frontage along U.S. Highway 27 (Apalachee Parkway). VA purchased the land from the St. Joe Company, one of Florida’s largest real estate development firms. The cemetery will also serve Veterans in southwestern Georgia and southeastern Alabama. VA has opened three new national cemeteries in Florida over the past five years including Jacksonville National Cemetery (2009), Sarasota National Cemetery (2009) and South Florida National Cemetery (2007). Prior to that:

- Florida National Cemetery in Bushnell opened in 1988 and is now the second busiest VA national cemetery in the country with 6,728 interments completed in fiscal year 2011. Of VA’s 131 cemeteries across the nation, the state of Florida is home to six national cemeteries that rank among the top 32 busiest by interment workload.
- Barrancas National Cemetery in Pensacola, established in 1868, serves Florida’s western panhandle and southern Alabama. A recent expansion of the historic cemetery ensures that it will remain open with a full range of burial options for decades to come.
- Bay Pines National Cemetery was established in 1933 and has been closed to first interment casketed burials since 1989. The facility still offers cremation burial sites. St. Augustine National Cemetery, established in 1881, has been closed since 1997.

Veterans with a discharge issued under conditions other than dishonorable, their spouses and eligible dependent children can be buried in a VA national cemetery. Also eligible are military personnel who die on active duty, their spouses and eligible dependents. Other burial benefits available for all eligible Veterans, regardless of whether they are buried in a national cemetery or a private cemetery, include a burial flag, a Presidential Memorial Certificate and a government headstone or marker. Families of eligible decedents may also order a memorial headstone or marker when remains are not available for interment. In the midst of the largest expansion since the Civil War, VA operates 131 national cemeteries in 39 states and Puerto Rico and 33 soldiers’ lots and monument sites. More than 3.8 million Americans, including Veterans of every war and conflict, are buried in VA’s national cemeteries on more than 20,000 acres of land. Information on VA burial benefits can be obtained from national cemetery offices, from the Internet at [http://www.cem.va.gov](http://www.cem.va.gov), or by calling VA regional offices toll-free at 800-827-1000. To make burial arrangements at any VA national cemetery at the time of need, call the National Cemetery Scheduling Office at 800-535-1117. [Source: VA News Release 26 Nov 2012 ++]

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**VA Medical Marijuana Policy Update 06:** The state of Colorado voted to legalize marijuana 6 NOV, but its use is still against federal law, VA policy, and the Uniform Code of Military Justice, even for servicemembers stationed in or visiting the state. For the military, the use of narcotics, in or out of uniform, is illegal. For family members and civilians with access to the base, they need to remember one crucial fact if they do participate in recreational marijuana use -- marijuana is not allowed on any military base. Colorado's new amendment has no effect on the Drug Demand Reduction Program and random drug testing will continue as scheduled to ensure individuals comply with the Uniform Code of Military Justice (UCMJ).

In November 2000, Coloradans passed Amendment 20 establishing the Medical Marijuana Registry. The Colorado Department of Public Health and Environment (CDPHE) maintains a confidential database of patients who have applied for a registry identification card for the medical use of marijuana. Registry identification cards are available to Colorado residents and valid only in Colorado. Patients who are currently receiving medical treatment for a debilitating medical condition may qualify for a registry identification card.
A list of qualifying conditions to obtain a card is available on the CDPHE Legal Documents/Resources page http://www.colorado.gov/cs/Satellite?c=Page&childpagename=CDPHE-CHEIS%2FCBONLayout&cid=1251593017076&pagename=CBONWrapper. CDPHE only issues registry identification cards and maintains the confidential Medical Marijuana Registry. For questions about Medical Marijuana Centers or Caregiver Cultivation Sites visit the Medical Marijuana Enforcement Division at the Department of Revenue website http://www.colorado.gov/revenue/mmed for more information.

Meanwhile, in Illinois the sponsor of a measure to let Illinois residents use marijuana for medical purposes said 26 NOV he's closing in on collecting enough votes to pass the bill in the House. Rep. Lou Lang said his "nose count" has him at or near the 60 votes needed for approval of a three-year trial medical marijuana program. "If members vote their consciences, I'll have the votes," said Lang, D-Skokie. The Senate has approved similar legislation before; the House has been the stumbling block. Last year, Lang fell a handful of votes short. One big difference between now and then is that the election is in the past. There will be three dozen lawmakers in the House and Senate who are not coming back in the next General Assembly, making them lame ducks. Their votes are more likely to be up for grabs given that they are not expected to face the voters again. [Source: Military.com article 26 Nov 2012 ++]

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Honor Flight Network Update 03: As many as 100 World War II veterans missed their chance to travel to Washington to see their war’s memorial after about $110,000 disappeared from a Kansas nonprofit that organized free trips for them. Richard Foster, the president of the board for an organization that ran Central Prairie Honor Flights, fears some of the veterans will never see the National World War II Memorial. It wasn’t completed until 2004, and with more than 600 World War II veterans dying daily, there is urgency to the effort to help them see the memorial. Central Prairie Honor Flights was the largest trip organizer in Kansas and raised nearly $1.2 million for them between 2008 and 2012. Flights were halted this year, however, after more than $100,000 went missing from the group’s account. Its program director, LaVeta Miller, was charged in October with two counts of theft by deception. “With that kind of money, we could have completed the World War II veterans or come close,” Foster said. “It really pulled the rug out from under us.”

![LaVeta Miller](image)

Before the flights stopped, nearly 800 veterans made the trip from Kansas to the nation’s capital on flights chartered by the Great Bend, Kan.-based group. It pooled donations from everything from 4-H groups to children’s lemonade stands to pay for the trips. But this spring, the group canceled two charter flights that would have transported as many as 220 more veterans. Another group called Kansas Honor Flight sprung up, but the three trips it hurriedly organized on commercial flights included less than half of the veterans who would have gone on the chartered flights.
Miller began helping administer the Honor Flight program in April 2009 and was promoted to program manager in April 2011. In the spring, around the time the flights were canceled, Springfield, Ohio-based Honor Flight Network decided it no longer wanted the Great Bend group to help organize trips for the national network. It cited problems with reports being filed late and a veteran breaking a rib on a trip. In July, Central Prairie Resource Conservation & Development, which oversaw the Honor Flights as one of its community projects, closed its Great Bend office and fired Miller because it no longer had the money to pay her $22,000-per-year salary. An investigation ensued. “I had her back and thought it was a witch hunt, and then I started seeing the evidence,” Foster said. The evidence included invoices that were changed and direct deposits to Miller’s bank account, he said. Miller, who is free on bail, made her first court appearance 26 NOV. Her attorney, Robert Anderson, refused to comment on the charges against her. She doesn’t have a listed number, and a message sent to her through Facebook was not returned.

Many veterans remain skeptical of the charges, noting that that Miller didn’t have a luxurious lifestyle. She lived in a small, rented home and never seemed to have much cash, they said. During a recent bingo night at the American Legion hall in Great Bend, Miller mingled with veterans. “She is a nice woman, and nobody thinks a thing about her being here,” said Larry Buczinski, 65, of Great Bend, a retired Army staff sergeant who served in Vietnam. He said he suspects evidence was planted in Miller’s home to implicate her in the thefts. “Nobody here really believes what has happened to her,” he said. Before organizing the flights, Miller led the Kansas chapter of the American Legion Auxiliary in 2007 and 2008. The group conducts external audits and isn’t aware of any problems, said Cherie Thomas, who now leads the auxiliary. “Everybody is just shocked, that’s all I can say,” she said.

In hindsight, Foster said he wished his group conducted external audits too. It is nearly $40,000 in debt with about $14,000 of that owed to a prison printing shop that made keepsake memory books for veterans. With no money, it’s now relying on volunteers to do things like apply for grants. Jim McLaughlin, chairman of the board of the Honor Flight Network, said the national group exercises no financial oversight of the local groups that provide the flights. It was completely surprised by the charges against Miller, he said. The now-defunct Central Prairie Honor Flights has handed over its records, along with leftover hats and T-shirts, to Hutchinson-based Kansas Honor Flight. President Mike VanCampen said Kansas Honor Flight volunteers have called people on the Central Prairie waiting list and been told they died or were too ill to fly. “That is the call we hate to make,” VanCampen said. “We just have to say we are sorry to hear that and couldn’t get him up to Washington to see the memorial built in his honor. [Source: The Washington Post | Associated Press | 23 Nov 2012 ++]

Traumatic Brain Injury Update 25: The hunt for brain injury treatments has suffered a big disappointment in a major study that found zero benefits from a supplement that the U.S. military had hoped would help wounded troops. The supplement is marketed as a memory booster online and in over-the-counter powders and drinks. It is also widely used by doctors in dozens of countries to treat traumatic brain injuries and strokes, although evidence on whether it works has been mixed. U.S. scientists had high hopes that in large doses it would help speed recovery in patients with brain injuries from car crashes, falls, sports accidents and other causes. But in the most rigorous test yet, citicoline (see-tee-KOH’-leen) worked no better than dummy treatments at reducing forgetfulness, attention problems, difficulty concentrating and other symptoms. "We very much were disappointed," said Dr. Ross Zafonte, the lead author and a traumatic brain injury expert at Harvard Medical School. "We took a therapy that is utilized worldwide and we found that at least its present use should be called into question."

The study involved 1,213 patients aged 18 and older hospitalized at eight U.S. trauma centers. They had mild to severe traumatic brain injuries - blows to the head resulting in symptoms ranging from dizziness to loss of consciousness and with complications including brain bleeding or other damage. Half of the patients received
citocline - also known as CDP choline - in pills or in liquid within 24 hours of being injured. The dose of 2,000 milligrams was much higher than used in over-the-counter products and it was given daily for three months. The rest got a dummy treatment, and all were followed for six months. Most patients improved on measures of memory, learning and other mental functions, but those on the supplement fared no better than those given dummy treatment. That suggests their improvement was due to the normal healing process. A total of 73 patients died during the study, about equal numbers in both groups. Zafonte noted that citocline patients with the mildest injuries did slightly worse than those who'd been given dummy treatments. Those results could have been due to chance, but he said they only reinforce the conclusion that the supplement should not be used for traumatic brain injuries.

More than 1 million Americans suffer traumatic brain injuries each year and 53,000 die. Military data show more than 250,000 cases have occurred in service members since 2000, many during the wars in Iraq and Afghanistan. There is no effective treatment for these injuries. "The military would have been overjoyed if this had been the one," said Dr. Robert Ruff, co-author of a journal editorial and neurology chief at the Cleveland Veterans Affairs Medical Center. The study results imply that a single drug alone won't be sufficient to help these patients improve, he said. Citocline is a naturally occurring brain compound made of choline, a chemical needed to build brain cells. Choline is found in some foods including beef liver, eggs and wheat germ. Commercial versions of choline and citocline are both sold as diet supplements. Lab studies in animals had suggested that high doses of citocline could help speed recovery from brain injuries, with almost no side effects. Several studies in humans examined citocline as a possible treatment for strokes but had mixed results. Still, it is widely used in Europe and Japan to treat strokes and brain injuries. The product used in the study is made by the Spanish pharmaceutical company Ferrer Grupo, which makes prescription-grade citocline.

Dr. Steven Zeisel, a choline scientist and director of the University of North Carolina's Nutrition Research Institute, said it's still possible citocline would work if used in combination with other potential treatments, but to determine that would require another rigorous and costly study. He was not involved in the research. The National Institute of Child Health and Human Development helped pay for the study, along with grants from several universities. The government institute has spent nearly $30 million since 2002 to fund a research network seeking treatments for traumatic brain injuries. The citocline results were eagerly anticipated in a military-commissioned Institute of Medicine report last year on potential nutritional treatments for traumatic brain injury. Besides citocline, the report said other nutrients being studied held some promise, including fatty acids and zinc. Zafonte, the study's lead author, was on the committee that wrote the report. "It's back to the drawing board," he said. "We all had such hope this would make some difference." [Source: The Tribune | Lindsey Tanner | 20 Nov 2012 ++]

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Board of Veterans' Appeals Update 02: If there is one thing more frustrating, complicated and time-consuming than applying for veterans disability benefits, it may well be appealing the decisions made by the Department of Veterans Affairs on those very claims. Under the rules of the system, veterans can appeal decisions on their disability claims to the Board of Veterans Appeals, an agency within the Department of Veterans Affairs. And if they do not like the resulting decision, they can appeal again to an independent federal judicial panel, the Court of Appeals for Veterans Claims. Sometimes the court rules in favor of the veteran, ending the case, and sometimes it upholds the board’s decision. But as often as not, it sends the claim back down to the board for further review and processing – a decision known as a remand. And there the case may wait. And wait and wait and wait. According to the Board of Veterans Appeals’ 2011 annual report, the average time between the filing of an appeal and disposition by the board is 883 days – nearly two and a half years. And that does not take into account the time the Court of Appeals for Veterans Claims takes to make a decision. Moreover, if there is a remand, that adds more months or years to the process. And some cases are remanded multiple times.
Veterans lawyers call it “the hamster wheel”—decision, appeal, remand, rinse, wash, repeat. “There are massive, unconscionable delays in the system,” said William F. Fox, distinguished scholar in residence at Dickinson School of Law at Pennsylvania State University, who has written about the appeals process. Now lawyers for an 80-year-old widow of a veteran are asking the United States Supreme Court to empower the Court of Appeals for Veterans Claims to issue fewer remands and simply issue final decisions on its own. The lawyers hope that if they succeed, many more cases will be decided much faster.

The facts of the case are these, according to the court documents:

- Dennis Donald Acheson was an engineer who served in the Army between 1952 and 1954. In 1953, he was assigned to a classified nuclear-testing operation in Nevada where he was exposed repeatedly to radiation, his lawyers and doctors say. In 1971, at the age of 42, he died from a form of lymphoma. Shortly after his death, his widow, Lady Louise Byron, applied for a death pension and other benefits provided by the federal government to widows of veterans.

- Ms. Byron, who remarried after Mr. Acheson’s death and has since divorced, submitted evidence from doctors saying that her husband’s cancer was directly a result of the radiation he was exposed to in the Army. After repeated rejections and appeals, the Board of Veterans Appeals in 2009 granted part of her claim and set an effective date of 1988—entitling her to a retroactive payment for benefits starting from that date.

- But Ms. Byron asserts that the effective date should be 1971, when her husband died. She appealed to the Court of Appeals for Veterans Claims, which last year agreed that the board had probably erred on the effective date. But rather than ending the case there, the court remanded it to the board. In its decision, the court wrote that it would not address whether an earlier effective date was warranted, “because that would require it to make factual determinations in the first instance based on the evidence the Board failed to consider, which it may not do.”

- Ms. Byron appealed that ruling to the United States Court of Appeals for the Federal Circuit, but lost. Now, she is asking for relief from the Supreme Court.

Edward Reines, a California-based lawyer who is handling Ms. Byron’s case, said the Court of Appeals for Veterans Claims was wrong to say it was powerless to consider the facts of the case. He argued that the case record has all the evidence the court needs to rule in Ms. Byron’s favor and bring the four-decade-long case to an end. “We deserve reversal, not remand, because the record is complete,” Mr. Reines said. “To say the Court of Appeals for Veterans Claims cannot even consider whether there is a bona fide issue is wacky and so harmful to a system that is already backlogged.” A number of veterans organizations, including Paralyzed Veterans of America, Gold Star Wives of America and the National Veterans Legal Services Program have filed a brief supporting Ms. Byron’s case. In their briefs, Justice Department lawyers representing the Department of Veterans Affairs argue that the Court of Appeals for Veterans Claims, like most federal appeals courts, does not have the authority to review the record and make decisions on the facts of a case.

“The Veterans Court’s jurisdiction is limited by statute,” the government says in one brief. “The Veterans Court is authorized by statute to ‘affirm, modify, or reverse a decision of the Board or to remand the matter, as appropriate.’” But Professor Fox of Penn State, who has also written a brief supporting Ms. Byron, said the veterans court was different from other federal appeals courts and, whether it realizes it or not, actually has more power to make decisions than the executive branch contends. He asserts that Congress, when it created the court in 1988, wanted it to be an independent body with the expertise not only to uphold or overrule the Board of Veterans Appeals but also to make judgments on the merits of a case. “They wanted a group of judges that essentially would take a fresh, nonpartisan look from outside the agency,” Professor Fox said. “They wanted this court to be expert. “Their failure to exercise that power is creating a Ping-Pong effect. We’re just trying to get the court to flex a little more muscle.” The Supreme Court is likely to decide early next year whether it will hear the case. [Source: New York Times | James Dao | 23 Nov 2012 ++]
**Toxic Exposure ~ St. Louis:** A doctoral dissertation that renewed public interest in the military-sponsored chemical spraying of impoverished areas of St. Louis in the 1950s and '60s has spawned a lawsuit. It leaves open the potential for litigation related to more controversial aspects of Lisa Martino-Taylor’s work — questions of more sinister government experiments on human test subjects. Undisputed is that St. Louis was among several test cities chosen decades ago by government contractors for the spraying of zinc cadmium sulfide, a chemical powder mixed with fluorescent particles to allow tracking of dispersal patterns. The spraying was part of a biological weapons program, the government conceded in 1994, and St. Louis was chosen because its topography was similar to some of the Russian cities the military thought it might have to attack.

When Martino-Taylor’s research hit the news earlier this fall, it triggered a memory for Benjamin Phillips, currently the sole plaintiff in what his attorney seeks to turn into a class action in St. Louis Circuit Court. Phillips, a former city marshal, spent part of his childhood in the Pruitt-Igoe housing complex. He suddenly remembered men in protective suits on roofs with machines spewing what seemed like a thick fog of bug spray, according to his attorney, Elkin Kistner. Residents were told it was testing “a smoke screen” for protection in enemy attack. Martino-Taylor’s research highlighted studies showing chronic lung and respiratory problems borne from exposure to zinc cadmium sulfide. The Army said earlier this month that no health consequences had been found in St. Louis. Martino-Taylor also raised the possibility of radioactive material’s being used. She pointed to links between participants in the St. Louis program and scientists who took part in wartime efforts to build the atomic bomb. The Army has denied such speculation.

Phillips’ suit generally describes the spraying of “cadmium, including potentially radioactive cadmium, without the knowledge or consent of those residents.” It names as defendants the Parsons Company, a government contractor known to have conducted the tests, and two others that Martino-Taylor named as potential players based on government records: SRI International, which supposedly designed an air-sampling unit to be used in the aerosol studies, and Monsanto, which allegedly knew of plans and offered the government use of its St. Louis plant. The suit asks over $50,000 in actual damages on claims of a public nuisance, strict liability, emotional distress and battery. It also seeks unspecified punitive damages. SRI International, through a spokesperson, said it had not found any evidence that the company was involved. It intends to seek dismissal from the lawsuit. Monsanto issued a statement saying that the suit “does not contain any facts about the alleged conspiracy occurring 50 years ago or more, or Monsanto’s supposed involvement.” Parsons declined comment.

Kistner said Phillips had an ear tumor that may or may not be linked to the exposure. Other potential class members have contacted him, he said, including a woman whose family members had cancer. He said more would be learned through the discovery process, but, “In my view, these people are at least entitled to nominal damages.” He added, “You can’t go spraying stuff on a bunch of people without their consent.” [Source: St. Louis Post-Dispatch | Jennifer Mann | 21 NOV 2012 ++]

**Vet Drivers License:** It can be difficult for military veterans to prove they served in the military. The only federally issued military ID cards are military retiree ID cards, veterans ID cards issued by the VA for eligible veterans, and other veterans on a limited basis. Veterans who are ineligible for one of these ID cards are often left without an official ID card that proves they served in the military. Some veterans get around this by carrying around a copy of their DD form 214, but this presents a several issues: it is not a photo ID, so many places won’t accept it, it is bulky and difficult to carry in one’s wallet, and it has the veteran’s Social Security number on it, which presents an identity theft risk if it is stolen. Thankfully, many states are taking notice of this and are including a veterans
designation on drivers licenses and state issued ID cards. Some states, such as Virginia, are issuing a separate photo ID that identifies veterans.

A list of all states and their current status on this issue is shown below. At present 27 states offer a military service or veterans designation on drivers licenses and their state issued ID cards. Some of the 27 states recently passed legislation and haven’t yet begun issuing the veterans IDs at the state or county level. These cards can often be used for military and veterans discounts, or to prove you served in the military. However, it’s important to note that these ID cards are not official military ID cards in the sense that they will allow you to enter a military post or receive military benefits. You will need to show your DD Form 214 or other official military documents to receive military benefits. Legislation to add a military service designation on state issued ID cards is currently pending in 13 states, and 10 states currently don’t have any pending legislation to add a military service or veterans designation to drivers licenses (12 if you count Washington D.C among those without pending legislation):

- Alabama – None
- Alaska – Pending Legislation (HB 180)
- Arizona – Pending Legislation
- Arkansas – Drivers License Designation
- California – Pending Legislation (SB 1355)
- Colorado – Drivers License Designation (more info)
- Connecticut – Drivers License Designation
- Delaware – Drivers License Designation
- Florida – Drivers License Designation
- Georgia – Drivers License Designation
- Hawaii – None
- Idaho – None
- Illinois – Drivers License Designation (beginning July 2015)
- Indiana – Drivers License Designation
- Iowa – Drivers License Designation (starting 2013)
- Kansas – None
- Kentucky – Drivers License Designation
- Louisiana – Drivers License Designation
- Maine – Drivers License Designation
- Maryland – Drivers License Designation
- Massachusetts – Drivers License Designation
- Michigan – Pending Legislation (House Bill 4127)
- Minnesota – Drivers License Designation
- Mississippi – Drivers License Designation
- Missouri – Drivers License Designation
- Montana – None
- Nebraska – None
- Nevada – Pending Proposal in 2013
- New Hampshire – Pending Legislation (SB 313)
- New Jersey – Veterans ID Cards Available at County Level
- New Mexico – None
- New York – Pending Legislation (S6453-2011)
- North Carolina – Drivers License Designation (law passed; not yet available).
- North Dakota – Drivers License Designation
- Ohio – Drivers License Designation
- Oklahoma – Pending Governor’s Signature (SB 138)
- Oregon – Drivers License Designation
- Puerto Rico – Drivers License Designation
- Pennsylvania – Drivers License Legislation (HB 2428)
- Rhode Island – Pending Legislation
- South Carolina – Drivers License Designation
- South Dakota – Drivers License Designation
- Tennessee – Drivers License Designation (fall 2012)
- Texas – Drivers License Designation
- Utah – Drivers License Designation
- Vermont – None
- Virginia – Separate Veterans ID Card
- Washington – Pending Legislation (House Bill 2378)
- Washington D.C. – None
- West Virginia – Pending Legislation (HB 4082)
- Wisconsin – Pending Legislation
- Wyoming – None

[Source: The Military Wallet Newsletter 20 Nov 2012 ++]

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**Vet Drivers License Update 01:** The military service designation is new in many states, so it may not have been available when you last renewed your drivers license or ID card. Virtually every state will require you pay a replacement fee if you want to get a new card with the veterans designation before your old license has expired. Each state has different rules and costs for this, so contact your state DMV in advance. Location and contact data can be found on the internet:

- If you live in a state that offers the military designation on state issued drivers licenses and ID cards, then you will need to bring a copy of your DD Form 214, DD Form 215, or other discharge paperwork, along with any additional paperwork required by your state (most states require a copy of your birth certificate, social security card, passport, or some other form of identification). You should be able to find a specific list by contacting your state department of motor vehicles (DMV) by phone, or by visiting their website.
- If you live in one of the states that doesn’t offer a veterans designation on drivers licenses, then you will need to contact your state representative and ask them to sponsor a bill to make this happen. The good news is there is a growing trend for states to offer this feature to their veterans, and there is very little expense in making this happen. So there is really no reason why states shouldn’t offer their veterans the ability to show a state recognized proof of service.

[Source: The Military Wallet Newsletter 20 Nov 2012 ++]

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**Vet Drivers License Update 02:** New Mexico is adding a feature on its driver's licenses to indicate that someone is a veteran. State officials said 16 NOV the designation will make it easier for veterans to provide proof they served in the military without needing to carry copies of their discharge papers. Veterans sometimes qualify for discounts at businesses. There’s no extra cost to have the designation on a license. People with a currently valid license must pay an $18 replacement or renewal fee to get a new license, including one with the veteran's designation. To obtain the veteran's license, individuals need to provide the state with a form showing they were
discharged from the military or they can provide a U.S. Department of Veterans Affairs medical identification, military retiree card or National Guard identification. [Source: KCBD.com article 17 Nov 2012 ++]

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**Vet Drivers License Update 03:** Connecticut Veterans May Have Flag On IDs And Driver's Licenses. WTNH-TV “Veterans in Connecticut now have the option to have their military status marked on their driver's license or state-issued ID card. Starting 3 JAN 2013, the DMV and AAA offices will start issuing the cards with a symbol of the American flag to identify veteran status. Governor Malloy says the symbol will give veterans a more convenient way of accessing the benefits and services they've earned. At least 30 days prior to visiting a DMV or AAA office, veterans must submit to the state Department of Veterans’ Affairs a completed application and proof of honorable discharge, such as a DD-214. The Department of Veterans Affairs will verify the veteran’s military status and electronically notify DMV of the request prior to the driver’s license or ID card being issued.

The application can be downloaded online at the Department of Veterans’ Affairs website by visiting http://www.ct.gov/ctva and clicking the “Application for Veteran’s Flag” link. The flag symbol will be added to veteran’s license or ID card at no additional cost at renewal time or when it is first issued. Veterans can request a flag symbol by mailing an application and additional documentation to the state Department of Veterans’ Affairs at: CT Department Of Veterans’ Affairs, Attn: Veteran’s Flag on Driver License or ID Card, 287 West St., Rocky Hill, CT 06067. For more information on DMV services and office locations, please visit http://www.ct.gov/dmv.

[Source: CTWatchdog | CT Governor | 23 Nov 2012 ++]

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**Tricare Pharmacy Copay Update 07:** The House and Senate will decide in the next few weeks how military pharmacy fees will be raised in 2013, a step that arguably will be the most significant taken to date to slow growth in military healthcare budgets. Out-of-pocket costs for military families and retirees who have prescriptions filled in the Tricare network of retail pharmacies depend on final language in the fiscal 2013 Defense Authorization Act. Congress intends to pass a final defense bill by mid-December. The House-passed plan for pharmacy fees could win over Senate colleagues during final negotiations on the bill. It already is more palatable with military associations. It calls for more modest co-pay hikes than proposed by the Obama administration. But it would achieve the same first-year savings by requiring beneficiaries 65 and older to use the Tricare mail order pharmacy program for refills of all maintenance drugs, those that control chronic conditions like high blood pressure and diabetes. Any brand name prescription filled by mail rather than in drug stores or supermarkets saves the department 27 percent, on average, said Rear Adm. Thomas J. McGinnis, chief of pharmaceutical operations for Tricare.

Officially the administration continues back the pharmacy fee increases it unveiled last spring. Prescriptions would remain free on base, and the co-pay for generic drugs would stay at $5 at retail outlets. But the administration plans to raise the $12 co-pay at retail to $26 for brand names on the military formulary. The formulary is the department’s list of approved drugs based on price and effectiveness. The administration also wants to ban retail outlets from filling prescriptions for non-formulary drugs, forcing beneficiaries to use mail order for the most costly brand name medicines. Also the new higher co-pays would climb by $2 more each year until reaching $34 in 2016. After that, they would be adjusted yearly based on overall medical inflation. Co-pays for brand name drugs at mail order also would jump to $26 from $9, for a 90-day supply, and then climb slowly to $34 by October 2016, under the administration’s plan.
Tricare already has authority to make these changes. The question is will Congress step in and modify the plan. The Senate Armed Services Committee, in marking up its version of the 2013 National Defense Authorization Act, stayed silent on the issue. So unless the bill is amended on the floor next week to interfere with the plan, the Senate will signal Tricare to proceed with planned fee changes. Last June, the department even published a proposed regulation to do so, and invited public comment. It withdrew the proposed regulation when the House passed in its version of the defense bill with an alternative pharmacy fee plan. The House proposes bumping the co-pay for formulary brand names at retail only to $17 versus $26 proposed by the administration. It also would continue to allow prescriptions for non-formulary drugs to be filled at retail, but would raise the co-pay for these more costly drugs to $44 versus the current charge of $25. More significantly, the House plan would limit future co-pay increases to the annual percentage cost-of-living adjustments to military retired pay.

Given actions to date by the House and the Senate committee, some retail pharmacy fee increases are a certainty. The battle ahead is details. After the Senate passes its defense bill, a House-Senate conference committee will smooth out any differences, including on pharmacy co-pays. McGinnis suggested the House plan could take longer to implement, delaying new fees perhaps until 1 APR, given the requirement that beneficiaries 65 and older use mail order for maintenance drugs. “We would have to do a contract modification with Express Scripts,” he said, referring to the company that administers Tricare pharmacy programs, “so that would take a little bit longer to implement.” Also there would have to be an aggressive information program to explain to senior beneficiaries that prescription refills must be filled by mail order. The House bill would set this requirement for at least a year. But McGinnis said once beneficiaries try mail order, 98 percent of them like it and choose to continue to use mail order over their local pharmacies. If the House plan does prevail, elderly beneficiaries will have time to absorb details before it starts. One of those details is certain to be a “fail safe” provision that would allow a patient to get a 30-day supply of any maintenance drug at retail if there’s a hitch in the mail order process.

Tricare estimates that it pays an average of $324 every three months for a brand name medication filled at retail but the cost falls to between $233 and $239 through mail order or if filled on base. If beneficiaries ask for a generic substitute for any brand name drug, the department three-month cost falls to about $60. Beneficiaries too save money with mail order because, for the same co-pay prescriptions typically are filled for 90 days versus 30 days at retail. And generic drugs are provided at no charge through mail order. Given the incentives and the convenience of mail order, McGinnis said usage has popped within the military community over the past year. In June of 2011, a million prescriptions a month were filled by mail. That monthly total has climbed since then to about 1.5 million. McGinnis said the departure of Walgreens from the Tricare retail network last January helped in that regard. Many former Walgreens customers shifted to mail order and liked it, McGinnis said. “We are not getting any complaints from anybody. That really worked out well [and] saved us a lot of money,” the pharmacy chief said. Without Walgreens, the retail network still meets contract requirements for serving beneficiaries, McGinnis said. In urban areas, 91 percent of beneficiaries must live within two miles of a pharmacy. In the suburbs, 95 percent must live within five miles and in rural areas, 95 percent of beneficiaries must be within 15 miles of a network pharmacy. Without Walgreens, the network still has 57,600 pharmacies. To put that into perspective, McGinnis said, there are 36,000 grocery stores, 14,000 McDonalds and 11,000 Starbucks in the United States. [Source: Military Update | Tom Philpott | 23 Nov 2012 ++]

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**Vet Charity Watch Update 29:** Individuals donated $218 billion in 2011, about 73 percent of all charitable contributions. With so much money at stake, you'd think people would do their homework on who they give their money to, but surprisingly few check a charity before donating. Only one-third of donors researched a charity before contributing, according to a 2010 survey conducted by Hope Consulting. "It's difficult to make good giving decisions, or I should say, it is easy to make bad ones," Daniel Borochoff, president of Charity Watch, a
watchdog group. Poor regulation and little enforcement make it easy for charities to mislead donors, Borochoff said. "There are a lot of groups that are not what they appear to be," he said. "People need to be careful but not turn cynical and give up because (giving to charities) is really important." Researching a charity can take anywhere from a few minutes to a few hours, depending on how deep you want to dig. At a minimum, find out how much of a group's revenue goes toward programs that support its mission and how much is spent on administration overhead and fundraising. The rule of thumb is that at least 60 percent of a charity's revenue should be used for programs, although high-performing groups achieve 75 percent or better. If you want to delve deeper, here's how you do it.

- **Form 990.** Almost every non-faith-based charity must file a 990 tax form with the IRS. The 990 has a wealth of information about an organization's revenue, expenses, highest-paid employees and biggest contractors. Copies of it are available for free online through Guidestar at [http://www.guidestar.org](http://www.guidestar.org) or the New York state attorney general's office. Groups that are committed to transparency post their 990s on their websites, but if push comes to shove, charities are required by law to provide their three most recent 990s to anyone who asks.

- **Programs versus administration costs.** To determine how much an organization is spending on programs versus administration costs, go to the website Charity Navigator [http://www.charitynavigator.org](http://www.charitynavigator.org), which has done that very calculation for thousands of charities. If your charity doesn't appear on the site, Charity Navigator explains how to do it on your own by using the 990.

- **Follow the money.** Form 990 lists contractors that received more than $100,000 from an organization. You can find the contractors on page 8, section B. You can see the programs that supported the group's mission on page 2 of the 990.

- **Financial health.** A truly savvy donor looks at three years of 990s or audit reports to see if the charity's revenue is growing, if it has saved money for a rainy day and if it consistently spends most of its money on its mission. To see if revenue and expenses are growing, compare line 12 (total revenue) on page 1 of the 990 of the current year with prior years. Then do the same with total expenses on line 18 of page 1.

- **Audits.** Charities can massage their 990 tax forms in ways that are misleading, said Borochoff of Charity Watch. For example, a nonprofit can say its printed fundraising material is "public awareness" or "educational" and claim it as a program expense rather than fundraising expense. You can spot this trickery when you see tips like how to fold a flag or requests like "pray for suffering in the Sudan" wedged into a letter appealing for money. The Paralyzed Veterans of American claimed their fundraising expenses as program activity by giving etiquette tips for how to interact with someone in a wheelchair in their fundraising requests, Borochoff said. Charity Watch relies on audits to figure out where a group's money is going. In New York, audits are available online for free through the state Attorney General's Office. Audits provide a more detailed look at how money is raised and spent. Audits also may include notes on brewing problems, like lawsuits or changes in funding streams. Borochoff is wary of organizations like Charity Navigator that create rankings based on 990s. He calls them "roboratings." Charity Watch grades about 600 groups. A listing of the top-performing charities is available on the Charity Watch website for free but access to the full rankings costs $40 a year.

- **CEO salaries.** The nationwide average salary of a charity CEO is $150,000, according to Charity Navigator, though salaries tend to be higher in the Northeast and in the arts and education. The 990 tax form lists the salaries of the highest-paid employees on page 7. Check out the 990, and see if you are comfortable with how much the group's leaders are paid. The American Cancer Society pays its CEO $2.2
million, the highest salary in the nation among charities, according to Charity Watch. The salaries of the Top 25 CEOs range from $2.2 million to $692,000.

- **Measuring outcomes.** An organization's website should provide specific information on the programs it sponsors and the progress being made. Charity Navigator provides advice on what to look for: specific numbers on how many people use the group's services, data that compares performance over different time periods, explanations of the methodology used for monitoring results, evidence that the group's programs are working and evaluations by independent third-parties.

- **Phone solicitations.** Be wary of charities that solicit money over the phone. The state Attorney General closely tracks charitable phone campaigns and has found that a fraction of the money actually goes to the charity. In 2010, more than $249 million was raised by 564 telemarketing campaigns in New York, according to the AG's Pennies for Charity report. Of that, only $92 million, or 37 percent, went to the charities. Donors can search the AG's online database on telemarketing campaigns for free. A search of the database found that the Glens Falls Police Benevolent Association raised $30,000 through a phone campaign in 2010, but kept only $7,500 and the rest went to the telemarketing company. The Department of New York Veterans of Foreign Wars raised $372,000 and kept $60,500 of it — just 16 percent — and the telemarketer took the lion's share.

- **Verify tax status.** Tax-exempt doesn't necessarily mean that donations to an organization are tax deductible. Make sure an organization is tax exempt under 501(c) (3) of the tax code, a status that allows donors to deduct contributions from their taxes. The IRS has a free online tool for confirming tax status called the "Exempt Organization Select Check." Websites like Charity Navigator and Guidestar also identify tax status.

- **Transparency.** Check out a charity's website and see if it posts its recent tax forms, audits, and names and affiliation of its board members. These are good signs that the organization isn't hiding anything. Also, see if the group has a privacy policy to determine whether they plan to sell your name to third parties. Ask questions. If you can't find answers on a group's website or in its financial forms, pick up the phone and call them.

[Source: Times Union | Cathleen F. Crowley | 10 Nov 2012 ++]

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**Vet Charity Watch Update 30:** Here are some resources for evaluating a charity before deciding where to give your money:

- [http://www.charitywatch.org](http://www.charitywatch.org): A watchdog group that grades charities and offers advice on how to evaluate them
- [http://www.charitiesnys.com](http://www.charitiesnys.com): New York State Attorney General's office site, where donors can look up charities' tax forms, audits and telemarketing costs. Donors also can file complaints here.
- [http://www.givewell.org](http://www.givewell.org): Recommends specific questions a donor should ask a charity based on the type of charity it is.

[Source: Times Union | Cathleen F. Crowley | 10 Nov 2012 ++]
**Fiscal Cliff:** The ‘fiscal cliff’ that is making headline news will impact everyone (all working classes, retirees, pre-retirees, students, etc.) in some way in 2013. The following is a brief outline of it potential path of destruction.

**INCOME TAX**

- **Income Tax Rates:** In 2013, the six income tax brackets of 2012 will be replaced with five tax brackets. The tax rates will begin at 15 percent and rise as high as 39.6 percent (in 2012 the tax rates began at 10 percent and rose to 35 percent).

- **Employee Payroll Tax Rate:** On Jan. 1, 2013, the current 4.2 percent employee payroll tax rate will revert back to 6.2 percent. The increased percentage will be borne by the employee (another tax increases for the lower and middle class).

- **Itemized Deduction:** In 2012, the itemized deduction for uninsured medical expenses paid equals the excess of qualified expenses over 7.5% of adjusted gross income. In 2013, the threshold rises to 10% of AGI. An exception exists for taxpayers age 65 or older, as of Dec. 31, 2013, who will not be subject to the 10% threshold until Jan. 1, 2017. Individuals who will be impacted by the threshold change should accelerate medical expenses into 2012.

- In 2012, expenses claimed on Schedule A are not subject to any limitation regardless of a taxpayer’s income. In 2013, a high-income taxpayer's itemized deductions will be reduced by 3 percent of the amount their adjusted gross income exceeds an annual threshold. This will have a greater impact on residents of Maryland, Connecticut, New Jersey and Virginia where a majority of residents utilize itemized deductions instead of a standard deduction.

- **Child Tax Credit:** In 2013, the Child Tax Credit decreases from $1,000 to $500 for each qualifying dependent child.

- **Child and Dependent Care Tax Credit:** In 2013, allowable care expenses will be reduced to a maximum of $2,400 (down from $3,000) for one child and $4,800 (down from $6,000) for two or more dependents. The credit remains at between 20 percent and 30 percent of those amounts, based on taxpayer income.

- **Marriage Penalty:** In 2012, the standard deduction for a married couple equals twice the standard deduction for an unmarried individual filing a single return. In 2013, the standard deduction for a married couple will be decreased to 167 percent of the single filer's deduction.

**CAPITAL GAINS & DIVIDENDS**

- **Long-Term Capital Gains and Dividends:** Long-terms capital gains rates apply to the sale of an asset held for more than a year. Taxpayers in the current 25 - 35 percent income tax brackets currently pay a long-term capital gains tax rate of 15 percent. That rate is scheduled to increase to 20 percent in 2013. Taxpayer’s in the 10 and 15 percent income tax brackets pay no long-term capital gains tax. Effective January 1, 2013, that rate will increase to 10 percent (who said no tax increases for the lower and middle class).
• Qualified dividends, which are also currently taxed at the same rate as long-term capital gains, will be taxed as ordinary income. This will result in an increase from 15 percent to a tax rate as high as 39.6 percent in 2013.

• In addition, beginning in 2013, a tax provision contained in the health care law (“Obamacare”) will add a 3.8 percent Medicare tax on unearned income (interest, dividends, capital gains, royalties and rents) of higher-income investors. This will result in a maximum long-term capital gains tax rate of 23.8 percent and 43.4 percent tax rate on dividends.

ESTATE & GIFT TAX EXEMPTION AND RATES - Federal Estate and Gift Tax: The Federal Estate Tax Exemption will drop to $1 million (down from $5.12 million in 2012) with will be taxed at 55 percent (up from 35 percent). That tax rate also applies to applicable gift taxes.

EDUCATION
• Federal Student Loans: In June 2013, the Congressional extension of the 3.4 percent fixed rate on the subsidized Stafford loan will expire. If not extended, it will revert back to 6.8 percent. According to the Congressional Budget Office the extension into 2013 cost the federal government approximately $6 billion.

• College Tax Credits: The provision of the American Opportunity Tax Credit, which provides families a tax credit of up to $2,500 per year for 4 years, will expire on December 31, 2012. In 2013, the tax credit will be decreased to a maximum of $1,900 per year for two years.

CONCLUSION: The Congressional Budget Office has warned that the economy would contract by 0.5 percent in 2013 if action isn't taken before the end of the year. Despite this fact, the President and Congress continue to spar over taking action sooner rather than later. [Source: Southwest Florida Estate & Tax Planning | Marc J. Soss | 20 Nov 2012 ++]

Medicare Reimbursement Rates 2013 Update 06: A one-year "doc fix" has gotten nearly $7 billion more expensive, according to new estimates from the Congressional Budget Office, obtained by The Hill. Doctors are scheduled to see a 26.5 percent drop in their Medicare payments at the end of the year unless Congress steps in to delay the cut, as it does every year. Delaying the cut and freezing doctors' payments for one year would cost $25 billion, according to CBO's latest estimates - up from $18.5 billion in its last projection. Because the "doc fix" is now wrapped up with the end-of-year "fiscal cliff," there's a chance Congress might stop short of fixing it for a full year, postponing the Medicare cut - along with other parts of the fiscal cliff. CBO said, while freezing doctors' payments for 10 years would cost nearly $244 billion. [Source: The Hill Healthwatch | Sam Baker | 20 Nov 2012 ++]

Editor Note: If congress should allow the 26.5% cut required by current law to occur, it is anticipated the number of civilian physicians willing to accept lower fees for Medicare patient care and by extension TRICARE patient care will be drastically reduced.

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APO/FPO/DPO Holiday Mail 2012: To ensure delivery of holiday cards and packages by Dec. 25 to APO/FPO/DPO and international addresses overseas, it is recommended that mail be posted by the recommended mailing dates listed below. Remember, all mail addressed to military and diplomatic post offices overseas is subject to certain conditions or restrictions regarding content, preparation, and handling. APO/FPO/DPO addresses generally require Customs forms. To see a table of active APO/FPO/DPO ZIP Codes and associated mailing restrictions, go to http://pe.usps.com and click Postal Bulletins in the blue sidebar. Go to the current issue and see the article “Overseas Military/Diplomatic Mail.”

Recommended Mailing Dates

<table>
<thead>
<tr>
<th>APO/FPO/DPO Mail Addressed To</th>
<th>Express Mail</th>
<th>First-Class Mail Letters/Cards</th>
<th>Priority Mail</th>
<th>Parcel Airlift Mail (PAL)²</th>
<th>Space Available Mail (SAM)¹</th>
<th>Parcel Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>APO/FPO/DPO AE ZIPs 090–092</td>
<td>Dec 17</td>
<td>Dec 10</td>
<td>Dec 10</td>
<td>Dec 3</td>
<td>Nov 26</td>
<td>Nov 13</td>
</tr>
<tr>
<td>APO/FPO/DPO AE ZIP 093</td>
<td>N/A</td>
<td>Dec 3</td>
<td>Dec 3</td>
<td>Nov 30</td>
<td>Nov 26</td>
<td>Nov 13</td>
</tr>
<tr>
<td>APO/FPO/DPO AE ZIPs 094–098</td>
<td>Dec 17</td>
<td>Dec 10</td>
<td>Dec 10</td>
<td>Dec 3</td>
<td>Nov 26</td>
<td>Nov 13</td>
</tr>
<tr>
<td>APO/FPO/DPO AA ZIPs 340</td>
<td>Dec 17</td>
<td>Dec 10</td>
<td>Dec 10</td>
<td>Dec 3</td>
<td>Nov 26</td>
<td>Nov 13</td>
</tr>
<tr>
<td>APO/FPO/DPO AP ZIPs 962–966</td>
<td>Dec 17</td>
<td>Dec 10</td>
<td>Dec 10</td>
<td>Dec 3</td>
<td>Nov 26</td>
<td>Nov 13</td>
</tr>
</tbody>
</table>

1- EMMS is available to selected military/diplomatic post offices. Check with your local Post Office to determine if this service is available to your APO/FPO/DPO of address.

2- PAL is a service that provides air transportation for parcels on a space-available basis. It is available for Parcel Post items not exceeding 30 pounds in weight or 60 inches in length and girth combined. The applicable PAL fee must be paid in addition to the regular surface price for each addressed piece sent by PAL service.

3- SAM parcels are paid at Parcel Post prices with maximum weight and size limits of 15 pounds and 60 inches in length and girth combined. SAM parcels are first transported domestically by surface and then to overseas destinations by air on a space-available basis.

[Source: NAUS Weekly Update 21 No v2012 ++]

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Medicare Premiums 2013: Medicare officials have announced the new Part B premium rates for 2013 - and they were slightly lower across the board than what many had predicted. The basic monthly premium for Part B will jump 5% in 2013. The increase - which previously had been projected at 9% translates to a $5 monthly increase for single Medicare-eligibles with incomes below $85,000 ($170,000 for married couples). For those with higher incomes, the monthly Part B increase will range from $7 to $16 (see chart below). By law, the premium must cover 25 percent of Medicare's expenses for the basic category, and cover 35% to 80% of expenses for higher-income groups.
### 2013 Medicare Part B Monthly Premiums

*(double income and premium amounts for married couples)*:

<table>
<thead>
<tr>
<th>Individual Income</th>
<th>2012 Premiums</th>
<th>2013 Premiums</th>
<th>Change</th>
<th>Gov't Subsidy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under $85K</td>
<td>$99.90</td>
<td>$104.90</td>
<td>+$5.00</td>
<td>75%</td>
</tr>
<tr>
<td>$85+K-$107K</td>
<td>$139.90</td>
<td>$146.90</td>
<td>+$7.00</td>
<td>65%</td>
</tr>
<tr>
<td>$107+K-$160K</td>
<td>$199.80</td>
<td>$209.80</td>
<td>+$10.00</td>
<td>50%</td>
</tr>
<tr>
<td>$160+K-$214K</td>
<td>$259.70</td>
<td>$272.70</td>
<td>+$13.00</td>
<td>35%</td>
</tr>
<tr>
<td>Above $214K</td>
<td>$319.70</td>
<td>$335.70</td>
<td>+$16.00</td>
<td>20%</td>
</tr>
</tbody>
</table>

- In addition, the Part B deductible will be $147 for 2013 - a $7 increase over last year.
- The part A inpatient deductible will rise $28 to $1,184.
- Part A premiums, however, will actually drop to $441 a month - a $10 monthly reduction.

The bottom line: Most Medicare patients will actually see a slight reduction in their total Medicare premiums for 2013. [Source: MOAA Leg Up 20 Nov 2012 ++]

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**Vet Housing Update 08:** On 19 NOV the Consumer Financial Protection Bureau (CFPB), in partnership with the Federal Trade Commission (FTC), issued warning letters to approximately a dozen mortgage lenders and mortgage brokers advising them to clean up potentially misleading advertisements, particularly those targeted toward veterans and older Americans. The CFPB also announced it has begun formal investigations of six companies that it thinks may have committed more serious violations of the law. “Misrepresentations in mortgage products can deprive consumers of important information while making one of the biggest financial decisions of their lives,” said CFPB Director Richard Cordray. “Baiting consumers with false ads to buy into mortgage products would be illegal. We will conduct a fair and rigorous investigation into these issues and will take appropriate action for any violations we find.”

The warning letters stem from a joint “sweep,” a review conducted by the CFPB and the FTC of about 800 randomly selected mortgage-related ads across the country, including ads for mortgage loans, refinancing, and reverse mortgages. The agencies looked at public-facing ads in newspapers, on the Internet, and from mail solicitations; some came to the attention of the CFPB and the FTC from consumers who complained about them. The CFPB and the FTC were looking for potential violations of the 2011 Mortgage Acts and Practices Advertising Rule, which prohibits misleading claims concerning government affiliation, interest rates, fees, costs, payments associated with the loan, and the amount of cash or credit available to the consumer. The CFPB and the FTC share enforcement authority for the rule. Companies that the CFPB finds have violated prohibitions on misleading advertising could be subject to enforcement actions.
The CFPB’s review generally focused on mortgage advertisements, particularly ads that targeted older Americans or veterans. The FTC, meanwhile, examined ads by home builders, realtors, and lead generators. The FTC is issuing their own warning letters to about a dozen companies and continuing with their own investigations of even more companies based on their findings. A copy of the FTC’s press release is available at: http://www.ftc.gov/opa/index.shtml. The sweep identified problems, such as:

- Potential misrepresentations about government affiliation: For example, some of the ads for mortgage products contained official-looking seals or logos, or have other characteristics that may be interpreted by consumers as indicating a government affiliation.
- Potentially inaccurate information about interest rates: For example, some ads promoted low rates that may have misled consumers about the terms of the product actually offered.
- Potentially misleading statements concerning the costs of reverse mortgages: For example, some ads for reverse mortgage products claimed that a consumer will have no payments in connection with the product, even though consumers with a reverse mortgage are commonly required to continue to make monthly or other periodic tax or insurance payments, and may risk default if the payments aren’t made.
- Potential misrepresentations about the amount of cash or credit available to a consumer: For example, some ads contained a mock check and/or suggested that a consumer has been pre-approved to receive a certain amount of money in connection with refinancing their mortgage or taking out a reverse mortgage, when a number of additional steps would customarily need to be completed before the consumer would qualify for the loan.

The warning letters will advise the recipients that their ads may violate federal laws, and that they should review all their advertising. Opening an investigation is not an accusation of wrongdoing. Investigations are fair and reasonable inquiries into a matter and may exonerate the subject of the investigation. An example of a warning letter from the CFPB to the mortgage advertisers that targeted older Americans can be found at: http://files.consumerfinance.gov/f/201211_cfpb_generic_warning_letter_older_Americans.pdf An example of a warning letter from the CFPB to the mortgage advertisers that targeted veterans and servicemembers can be found at: http://files.consumerfinance.gov/f/201211_cfpb_generic_warning_letter_veterans.pdf. A blog from Assistant Director for the Office of Servicemember Affairs Holly Petraeus and Assistant Director for the Office for Older Americans Skip Humphrey further discussing today’s enforcement action is at: http://www.consumerfinance.gov/blog/buyer-beware-potentially-deceptive-mortgage-ads-are-targeting-veterans-and-older-americans/ [Source: CFPD Press Release 19 Nov 2012 ++]

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Veterans Day 2012 Update 01: President Barack Obama laid a wreath at the Tomb of the Unknown Soldier to mark the Veterans Day holiday on Sunday, declaring that soldiers' needs would be met even as the country winds down wars in the Middle East and Asia. In the ceremony at Arlington National Cemetery, Obama pledged continuing support for veterans as they make the transition to civilian life. "This is the first Veterans Day in a decade in which there are no American troops fighting and dying in Iraq," the president said at the cemetery across the Potomac River from Washington, where soldiers' graves are marked with row upon row of simple white stones. "After a decade of war, our heroes are coming home," he said. "Over the next few years more than a million service members will transition back to civilian life."

The president touted the work of first lady Michelle Obama and Jill Biden, wife of Vice President Joe Biden, for their work in the Joining Forces campaign, which urges businesses to hire veterans. He also reaffirmed his commitment to continuing the post-9/11 GI Bill program, which provides college education funding for those who have served, and said soldiers suffering war-related health problems will get the care they need. "No one who fights
for this country overseas should ever have to fight for a job, or a roof over their head, or the care that they have earned when they come home," he said.

After the ceremony, Obama visited with people in an area of the cemetery known as Section 60, where many of the soldiers who died in the Iraq and Afghanistan wars are buried. The Democratic president won re-election to a second four-year term on Tuesday and now faces tough negotiations with Republican congressional leaders to avoid sharp spending cuts that loom at the end of the year. A big chunk of those reductions would come through a decline in defense spending. During the campaign, Obama and Biden regularly pledged their commitment to bringing troops home from Afghanistan and taking care of American veterans. Obama criticized his opponent, Republican Mitt Romney, for failing to mention the war in Afghanistan during his speech to the Republican National Convention.

[Source: Reuters | Samson Reiny | 11 Nov 11 2012 ++]

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Veterans Day 2012 Update 02: A gray, overcast, drizzly morning provided the perfect backdrop for quiet reflection on the cost of war, violence and tyranny. Sunday morning, about 200 people gathered for the German Air Force's annual observance of Volkstrauertag, or National Day of Mourning, at Fort Bliss National Cemetery. This German holiday is similar to Memorial Day in the United States, said Cpl. Bastian Stürke, with the German Air Force Command at Fort Bliss. It recognizes those who were killed during war, including Germans and their American and NATO allies, Stürke said. It is also Germany's way of coming to grips with its role in World War I and II, and pledging itself to being a force for peace, freedom and human dignity in the world. "Today, we, who are living in peace, gathered to commemorate the countless men and women that lost their lives due to war and tyranny: family members, friends, comrades and the many unknown victims of war and despotism -- yesterday and today," said Lt. Col. Ingo Kresser, commander of the German Air Defense Center at Fort Bliss. Kresser took over command of the school last month and was the featured speaker at Sunday's event. In cities and towns all over Germany on 18 NOV, people came together in similar events to remember fallen soldiers and the civilian victims of violence, no matter what their nationality, Kresser said.
German Air Force officers saluted as the German and U.S. colors marched off the field Sunday.

The holiday was established in 1952 and is observed two Sundays before the beginning of Advent. "As Germans, we feel a particular responsibility and urge to contribute to peace, to mutual understanding between nations and to nonviolent resolution of conflicts," Kresser said. "This is the result of a long and often -- especially in recent years -- a very painful process." The German Day of Mourning is also a way of recognizing more recent conflicts and deployments. More than 50 German soldiers, for instance, have died in Afghanistan and hundreds more have been wounded. Kresser said. German service members were also deployed in the Balkans during the 1990s and for humanitarian missions, he added. Kresser addressed the crowd in both German and English. The National Day of Mourning "means grief and sorrow," Kresser said. It is a way to remember those who died in action during any war, the victims of tyranny and those who lost family or friends, he said. "Here, we stand together with our American allies in ongoing operations," Kresser said in a short interview after the ceremony. "Germany is taking its responsibility toward peace, freedom, humanitarian rights and for the dignity of life. As a consequence of that decision, we are standing with our allies, especially our American allies."

The German Air Force has had a presence at Fort Bliss since 1956, just 11 years after the end of World War II. The event included a mix of 50 German and American civilians and about 150 airmen from the German Air Force Command and the German Air Defense Center, both located at Fort Bliss. A highlight of the ceremony was the playing of Ludwig Uhland's "Ich hatt' eienen Kameraden (I had a comrade)." Participants bowed their heads and were lost in thought or prayer during the mournful song which was played by the 1st Armored Division Band -- a frequent guest and contributor for German ceremonies at Fort Bliss. [Source: El Paso Times | David Burge | 19 Nov 2012 ++]

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Vet License Plates Kansas: Kansas offers a selection of eight distinctive license plates to their residents. In the attachment to this Bulletin titled, "Vet License Plates KS" all can be viewed along with the special requirements to obtain each. In most cases no additional fees are required. All plates must be applied for via a Kansas County Treasurers’ office. A list of these along with their locations and services provided can be found at http://www.kansastreasurers.org/services.htm. [Source: http://ksrevenue.org/dmv-plates.html Nov 2012 ++]

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OBIT ~ Herbert E. Carter: Herbert "Gene" Carter was a veteran World War II fighter pilot and a member of the original cadre of the Tuskegee Airman. Carter and his fellow Tuskegee Airmen shattered the widely held myth that blacks were not capable of serving their country in the arena of flight. He was born on 27 September 1919 in Amory, Mississippi. After graduating from high school, he enrolled at Tuskegee Institute, Alabama. When World War II broke out, preparation began for the construction of an earning his pilot wings. Carter was sent
overseas as the engineering officer with the original 99th Fighter Squadron. In April 1943, Carter was sent to Africa to become a part of the Desert Air Force. He logged 125 combat hours with 77 combat missions airfield at Tuskegee to support a new program in which the U.S. Army Air Corps would train black men to become pilots. He applied for the program, was accepted, and graduated as a member of the fourth class, Class 42-F. Upon over Tunisia, Sicily, and Italy in the Curtiss P-40 Warhawk and Republic P-47 Thunderbolt. His unit, the 99th Fighter Squadron, and other squadrons of the 332d Fighter Group compiled an outstanding record of performance in tactical air and ground support of Allied Armies.

Carter and his squadron broke the bonds of discrimination and the adversities of separatism with their achievements during World War II. By the war's end, the all black 332nd Fighter Group had never lost an allied bomber aircraft to enemy air action in 200 escort missions. Flying P-40 Warhawks, P-47 Thunderbolts, and finally the red-tailed P-51 Mustang, they destroyed 250 enemy aircraft on the ground and 150 in air-to-air combat. Of these were 17 German aircraft over Anzio Beach during the Allied Force's invasion of Northern Italy. After the war, Carter was the aircraft maintenance and flight test officer for the 477th Composite Group at Godman Field, Kentucky. He was proficient in the P-47 Thunderbolt fighter, the North American B-25 Mitchell medium bomber, and Douglas C-47 Dakota transport aircraft. He tested and performed experimentation projects with fighter aircraft for night, low level, and improvised landing field operations at Wright Field from 1949 to 1951.

Herbert Carter, in January at the Tuskegee Airmen National Historic Site in Alabama. Behind him: A PT-17 trainer aircraft.

For five years he was the Professor of Air Science and Commander of the Tuskegee Institute's ROTC Detachment. He then took his teaching skills overseas as the Deputy Director Military Advisory Group to the German Air Force. Following his overseas tour, he became the Chief of Maintenance of the 328th Fighter Wing, managing the aircraft maintenance functions of over 700 personnel and 60 aircraft. In 1963, he moved to Loring AFB, Maine, to provide maintenance expertise during severe climatic condition testing on Convair F-106 Delta Dart fighter interceptor aircraft. Lieutenant Colonel Carter returned to teaching in 1965 at the Tuskegee Institute and retired from the USAF in 1969. He remained at Tuskegee Institute in Alabama as the Associate Dean for Student

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Commissary Elimination Update 03: Sen. Tom Coburn (R-OK) recently released a report, titled ‘Department of Everything,’ in which he claims that eliminating DoD activities like commissaries and grammar schools could save $68 billion over 10 years. Coburn’s report details several “duplicative and wasteful” programs that the report argues have nothing to do with the nation’s security that are wasting money and resources. However, many servicemembers and military retirees will not be pleased to see that commissaries are once again in the budget cutting crosshairs. Coburn argues that the following DOD programs duplicate other resources and programs:

- Non-Military Research and Development ($6 billion)
- Stateside DoD Elementary Schools and STEM programs ($15.2 billion)
- Alternative Energy ($700 million)
- Commissaries ($9 billion)
- Overhead, Support, and Supply Services ($37 billion)

The report has some interesting findings including more than $1 million spent on the 100-year Starship Project, and $100,000 for a workshop titled “Did Jesus Die for Klingons Too?” The report highlights the following list of obscure DoD expenditures:

- Pentagon-branded beef jerky.
- A reality cooking show called Grill it Safe featuring two “Grill Sergeants” who performed a 46-minute cooking video.
- Pentagon-run microbreweries.
- A smart phone app to alert users when to take a coffee break.
- Research examining the social interaction between robots and babies.

Coburn’s press release states that the $67.9 billion in savings in the “Department of Everything” report could pay for a third of the cost of the planned fleet of new strategic bombers for the Air Force. It could, likewise, pay a third of the cost of the fleet of Ohio-class replacement nuclear submarines for the Navy. For the Army, $16 billion over ten years – about 25 percent of the savings in the report – could mean robust funding for modernization or purchase of new rifles and light machine guns for every soldier. The full ‘Department of Everything’ report can be accessed at http://www.coburn.senate.gov/public/index.cfm?a=Files.Serve&File_id=00783b5a-f0fe-4f80-90d6-019695e52d2d. You can let your elected officials know how you feel about the efforts to end commissary benefits by going to the Military.com Action alert site http://www.capwiz.com/military/issues/alert/?alertid=62158901&type=ML and complete and forward an editable text message of how this will impact on you and the military community. [Source: Military.com | Terry Howell | 15 Nov 2012 ++]

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Vet Back & Neck Pain: Andrew Bouwma worried he wouldn't be able to pick up his 3-year-old daughter and newborn son. His back was killing him. An Army infantryman who served a tour in Iraq, Bouwma wore an extra 50 to 60 pounds every day on foot patrols. Clad in helmet and body armor weighted down with a medical kit and extra ammunition pouches, Bouwma crouched inside Stryker vehicles and jumped out small hatches, contorting his body. He also was shot in the hip in 2006 in Mosul and began favoring one side during rehabilitation, adding to his back pain. "There’s a lot of things I’m not really able to do anymore," Bouwma said. Bouwma, 27, of Racine, is part of an alarming rise in the number of Iraq and Afghanistan veterans suffering from spine pain. While
amputations and traumatic brain injuries from improvised explosive devices have become the signature wounds of those wars, musculoskeletal and spine pain are by far the most common cause of evacuation from Iraq and Afghanistan. Among the key findings in studies published in a recent edition of The Spine Journal:

- There have been 10 times as many long-term spinal pain casualties unrelated to combat injuries among Iraq and Afghanistan veterans compared with blast injuries.
- After being medically evacuated from Iraq with non-battle-related spinal pain, patients have less than a 20% chance of returning to their unit and regular duty.
- 60% of veterans seeking care for spine problems have serious psychological distress.

"We see quite a bit of spine pain among returning veterans," said Tom Kotsonis, a staff physician in physical medicine and rehabilitation at the Zablocki Veterans Administration Medical Center in Milwaukee. "The vast majority of young combat veterans we see are suffering from neck and back pain." The number of people getting evacuated from war zones for back pain has been as high as 60% of the wounded, said Eugene Carragee, a physician who edited The Spine Journal's September issue, which was devoted to the casualties of war. That's a huge problem for commanders worrying about troop strength in war zones. And it's a problem for the military members when they come home and try to resume their lives. "These numbers were shocking to us," said Carragee, who retired as a lieutenant colonel in 2010 and served as command surgeon for a special operations unit in Iraq and Afghanistan. "That's completely different from anything seen before. In Vietnam and Korea it was mainly infectious diseases and heat and cold injuries as the reasons why people were evacuated. This isn't taking people off the line for a few days, these are people air- evacuated to Landstuhl" Regional Medical Center in Germany, Carragee said.

The studies noted that combat casualties decreased and spine pain casualties dramatically increased in Iraq in 2005 and '06, while back pain casualties dropped by a third during the surge in 2007. Not just front-line troops Carragee, who earned a Purple Heart in a suicide bomber attack in Iraq in 2008, said the vast majority of troops in war zones suffer from bad backs, a reflection of the heavy loads they carry and their high-intensity activity. But the studies noted that back injuries were found not just in front-line troops but also among all deploying military personnel, even those with desk jobs. "It didn't correlate with combat intensity either, which is when you think people would get more knocked around and more likely to wear their body armor 24/7 and carry more ammunition. It was the inverse. It was the slow times when (medical evacuation for noncombat spine pain) was higher," Carragee said. "I don't think the soldiers are fabricating the back pain or malingering. I think it's much more complex. But when soldiers are really in the fight, they do their duty and take care of the people around them. They're very resilient," Carragee said.

Hariharan Shankar, director of the pain clinic at Milwaukee's VA hospital, estimated that three-quarters of the veterans seeking help at the pain clinic suffer from back pain, specifically lower back troubles. Of that amount, about a third are recent combat veterans. The causes for their back pain range from heavy lifting, trauma and falls in combat zones to a genetic predisposition for weaker spines. Usually by the time veterans show up at the VA hospital in Milwaukee, they already have seen their primary care physician for help and tried physical therapy or medication or both. When their backs continue to hurt, they're referred to the musculoskeletal or pain clinics at the VA. "Ninety percent of back pain gets better in three months without treatment. We tend to get the 10% suffering from acute pain," Kotsonis said. Treatment includes physical therapy and exercise, bracing, medication, injections and acupuncture as well as surgery for severe cases. At Milwaukee's VA, patients can take yoga classes to strengthen their back and core muscles, and the hospital is planning on offering tai chi classes soon, said Judith Kosasih, chief of the polytrauma support clinic team.

For Bouwma, who played volleyball at Racine Park High School and enjoyed playing softball and football, his lower back pain, as well as the gunshot wound that passed through both hips, means he can no longer play sports. "Walking long distances or playing any sports is kind of out of the question," Bouwma said. "The one time I tried to play flag football I ended up using a cane for two weeks." Bouwma, a patient of Kotsonis', performs exercises,
Military Compensation Update 03: The Congressional Budget Office has released a report on military compensation that puts a red laser dot on near-term pay raises, beneficiary health care fees and retirement of future forces as potential cost-saving targets Congress might want to consider in any debt-reduction deal. Thanks in part to what CBO says were pay raises that exceeded private-sector wage growth through much of the last decade, the report estimates that military cash compensation increased by 52 percent from 2002 to 2010 while private sector wages rose by only 24 percent. In 2012, a married E-4 (Army corporal) with four to six years of service will receive "regular military compensation," or RMC, valued at $50,860. RMC is the "salary" yardstick for the military. It combines basic pay (in this case, $27,200 for that E-4) with subsistence allowance ($4,180), average Basic Allowance for Housing for the pay grade across U.S. housing areas ($14,820) and an estimated value for the tax advantages on tax-free allowances ($4,660). An officer example is given too. RMC for a married O-3 (Army captain) with six years of service is $92,220 this year. In addition, CBO notes that some members receive enlistment or re-enlistment bonuses, special or incentive pays for unique skills and pay for serving in dangerous or difficult assignments, including combat areas, which can mean tax breaks on part or all of their basic pay too.

CBO discusses RMC after advising that $150 billion, or more than one quarter of the Defense Department's "base" budget (which excludes the cost of current operations in Iraq and Afghanistan) will be spent this year on military pay and benefits for current forces and retirees. It goes on to propose ways to curtail compensation costs. Rep. Paul Ryan of Wisconsin, in his role as chairman of the House Budget Committee, requested the report. It describes recent gains to service compensation, projected growth, the history of cost sharing under TRICARE and even how court rulings knocked down claims by older retirees that recruiter promises had bound the military to provide free health care for life.

One approach to cut costs is to "restrict basic pay raises" as Defense officials proposed last April, CBO says. Congress so far has rejected the idea. But any grand bargain to address the debt crisis in coming months could include many unpleasant surprises for beneficiaries of federal programs. The Department of Defense proposed a raise of 1.7 percent this January and in 2014. These were touted as big enough to keep pace with private-sector wage growth, but CBO projects they will fall short. And even deeper pay caps are proposed for the next three years. The administration's 2015 raise would be only 0.5 percent, followed by 1 percent in 2016 and 1.5 percent in 2017. Pay caps could hurt recruiting and retention, CBO concedes, but that can be mitigated with more and bigger enlistment and re-enlistment bonuses. Unlike pay hikes, CBO says, bonuses "do not compound from year to year and they have no effect on the value of future retirement annuities." If negotiators were to agree to pay cap plan, military pay would lose 9 percent to private-sector wage growth over the five-year period, the report says. But that is only an option, not a recommendation, CBO adds.

Another way to slow compensation growth, it says, is to raise TRICARE enrollment fees, deductibles or co-payments, actions also proposed by the administration last April. For working-age retirees, those under 65, fee hikes should be phased over five years and use a "tiered approach" so that senior-grade retirees would pay higher fees than lower-ranking retirees. DoD also seeks a new annual enrollment fee for the TRICARE for Life insurance supplement to Medicare, used by retirees 65 and older. That also would be tiered so retirees drawing smaller
retirements pay less. Congress so far has rejected that proposal as well. CBO says higher enrollment fees not only would raise collections but also discourage retirees and families from relying on military health care versus civilian employer health insurance. Higher deductibles and co-pays would restrain use of medical services too and also lower TRICARE costs.

The report estimates that out-of-pocket costs to military beneficiaries today are just one-fifth of what civilian workers pay for health care. Unless fees are raised, CBO projects that military health care costs will jump from $51 billion in 2013 to $77 billion (in 2013 dollars) by 2017. CBO raises another option it floated last year: prohibiting working-age military retirees and families from TRICARE Prime, the military's managed care option. Instead, they would use only TRICARE Standard, the fee-for-service insurance option, or TRICARE Extra, the preferred-provider option. Or presumably they would use health insurance offered by current employers. Sen. John McCain of Arizona, ranking Republican on the Senate Armed Services Committee, embraced that idea last year in a letter to the Joint Select Committee on Debt Reduction, a concession to avoid across-the-board cuts to defense programs called for under the "sequestration" trigger of the 2011 Budget Control Act. Sequestration must be carried out starting by Jan. 2, 2013, if Congress doesn't agree to a $1.2 trillion debt-cutting deal.

CBO says restricting Prime access to retirees under 65 and their family members would save as much as $10 billion a year. Congress so far has rejected it too, along with calls to raise TRICARE fees or to change military retirement for future recruits. The CBO report reviews options for changing retirement. It notes that a less generous plan, if only for new entrants, still would save on the DoD "accrual" costs, the funding required every year to cover obligations to future generations of retirees. Like most Americans, military people are confused and frustrated by the failure of Congress to reach a debt-reduction deal. The CBO report reminds the military community that how the deal gets made could be as consequential to their families as that fearsome drive off the "fiscal cliff." [Source: The Lawton Constitution | Tom Philpott | 18 Nov 2012 ++]

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**USS Missouri (BB-10) Bell:** Missouri’s official contribution to the 1904 World’s Fair was a grand Romanesque building on the crest of Government Hill in Forest Park. The statue atop its golden dome towered 180 feet above the lawn. The Missouri Building was the largest in the cluster of structures representing states at the Louisiana Purchase Exposition. Its auditorium seated 1,000 people. It had an office for the governor, living quarters for the fair’s directors and an early air-conditioning system. It was filled with art and artifacts from the state archives and 10,000 books from public libraries. The building cost $160,000 to erect and furnish, roughly $4 million in today’s dollars.

Shortly after 6 p.m. on Nov. 19, 1904, Lee Jones was working in the kitchen beneath the auditorium. The fairgrounds outside were jammed with people enjoying 70-degree weather. In two weeks, the fair would close. A boiler exploded in the kitchen. Jones shouted for help and grabbed a fire extinguisher. Fellow employee J.T. Nixon joined the fight, but fast-growing fire crackled through the kitchen ceiling into the auditorium. Nixon, choking from smoke, was dragged to safety by another man. Billowing smoke and clanging fire wagons drew thousands of fairgoers to the hilltop. The Missouri building, like so many on the fairgrounds, was made of wood slathered in a compound called staff, a mix of plaster and fiber. With the building’s rotunda serving as a flue, the blaze grew quickly. Firefighters and military personnel assigned to the fair did double duty, fighting the blaze and retrieving artifacts while there was time. A cry went up to save the bell.

Missourians had raised money to cast a silver ship’s bell for the USS Missouri, a Maine-class battleship that was commissioned in 1903. The bell was on display in the west wing of the building, to be delivered to the
Navy when the fair ended. Before fire reached that wing, a squad of Marines went inside for the bell. “They made for it with a rush,” the Post-Dispatch reported. “As many hands as could seized the supporting framework, and then, with a ‘yo-heave,’ and a few excited sailor words, they marched out of the building with it, to the thunderous applause of the crowds.” Rescuers saved most of the books and paintings before the burning dome collapsed. Firefighters stopped the fire before it could destroy the west wing. Four men suffered injuries.

In June 1905, the bell was delivered to the battleship. In 1909, the city built the World’s Fair Pavilion that stands on the site of the Missouri building. Also that year, the battleship took part in President Theodore Roosevelt’s “Great White Fleet” world cruise. The ship, the second of four Navy vessels to bear Missouri’s name, was scrapped in 1922. The bell is currently located at Soldiers Memorial Military Museum in St. Louis.

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**VA FDC Program Update 01:** Veterans Affairs has taken heat for some time now as it struggles with the expeditious and timely processing of claims for disability and pension for the veterans it serves. There are numerous reasons for this delay and seemingly endless processing time:

- **New GI Bill.** Congress and the administration decided in 2008 to improve the GI Bill benefits that provide funding for veterans’ education. Congress mandated an August 2008 start, even though the programs to administer this process had not yet been fully developed. The VA was not prepared to handle this very generous, but complex payment system. For the first year, the VA was practically relying on a pen-and-pencil-type of claims processing through this complicated system. This caused a shift of resources inside
the VA to accommodate paying the veterans and their schools as promised in the law. The old Montgomery
GI Bill was usually paying the veterans one similar payment nationwide. The new 9/11 GI Bill created a
different pay structure for every veteran eligible for this benefit and added a tuition payment and book stipend. This took a monumental effort on the part of the VA to get these payments flowing. While there
are still delays, the overall situation is much improved and the 9/11 GI Bill is a wonderful and very
generous benefit compared to the older Montgomery GI Bill.

- **ALS.** Just as the VA was coming out of this crisis, the rules were changed for presumptive conditions for
all veterans who have ALS. Any veteran who has served 90 days or more of active duty and is diagnosed
with ALS is automatically service-connected for this condition, usually at the 100 percent rate. The VA in
2010 added leukemia type B, Parkinson’s disease and ischemic heart disease to the list of presumptive
conditions for veterans who served with boots on the ground in Vietnam, and some very limited parts of
Thailand and Korea. The floodgates were then opened to all veterans exposed to agent orange who had
these conditions. There were many hundreds of thousands of claims filed almost immediately. The VA also
had to go back and re-adjudicate the claims for these conditions that had been denied in the past, including
settling claims for the widows and widowers of veterans who had died of these conditions since the 1970s.

- **PTSD.** On top of that, the VA liberalized the proof requirements for post-traumatic stress disorder claims.
The burden of proof went from having to prove explicit stressful combat incidents to just serving in a
combat theater and having the VA diagnose the veteran with PTSD that was connected to the service in that
combat theater. Again, all the claims that had been denied in the past were filed again and had to be worked
and re-adjudicated. The VA is starting to dig out of the hole it was in, and we are seeing progress in the
time it takes to settle a claim.

One of the ways that the VA is making this happen is using a technique called Fully Developed Claim (FDC).
This new and innovative program is designed to provide swift and expeditious settlement of eligible “fully
developed” compensation or pension claims. The FDC program is the fastest means of getting a claim processed. A
participating veteran with an eligible claim will have his or her claim expeditiously routed through the claims
process for a swift decision. Participation will not affect the quality of care a veteran receives or the benefits to
which a veteran is entitled.

To participate, the FDC program requires that a veteran complete and submit a Fully Developed Claim
Certification and either a VA Form 21-526EZ, Fully Developed Claim (Compensation) for a compensation claim, or
a VA Form 21-527EZ, Fully Developed Claim (Pension) for a pension claim. The veteran must also submit, with the
application and certification, all relevant and pertinent evidence to “fully develop” the claim. VA Form 21-526EZ
and VA Form 21-527EZ provide, in detail, claims eligible for the FDC program as well as notification of all
information and evidence necessary to “fully develop” and substantiate these claims. Filing these claims takes a little
extra work on the part of the veteran and the veteran representative, but it is well worth it in time savings. Some
claims are being settled in 30 to 60 days from the date of filing. This is rare, but it is starting to happen more often.
When you file your claim, listen to the veteran representative and get them the necessary information they need to
file a fully developed claim. It will save everyone a lot of stress and worry. [Source: Daily Republic | Ted Puntello |
19 Nov 2012 ++]

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**Military Vets in Congress:** The 113th Congress that takes office in January will have the fewest
military veterans since World War II, although the number of members who served in the Afghanistan or Iraq wars
is growing. Nineteen percent of the next Congress will be veterans, with 85 in the House and 18 in the Senate,
according to a tally compiled by the American Legion. In the current Congress, there are 91 veterans in the House and 25 in the Senate. The decline isn't completely surprising. The 95th Congress of 1977 and 1978 -- just after the draft ended in 1973 -- had 412 veterans. The percentage of members who served in the military has steadily fallen since. "There are two things that are leading to fewer veterans in Congress," said Jon Soltz, co-founder of VoteVets.org. "First, the last conscription force to fight a war is at retirement age, and they are leaving Congress. Second, the new generation of veterans makes up a smaller percentage of the overall population now, and many of them are just getting into politics for the first time. Many of them aren’t yet ready to run for Congress, because they have no political base in their communities."

As many of the veterans from World War II, the Korean War and the Vietnam War retire, Afghanistan and Iraq veterans are beginning to take their places. Rep. elect Tammy Duckworth (D-IL), a double amputee from the Iraq War, is one of the highest-profile new members. During her race, she faced accusations from the incumbent, Rep. Joe Walsh (R-IL), that she was not a "true hero" and talked too much about her military service. Including Duckworth, there are a total of nine new House members who have served in Iraq or Afghanistan, according to Iraq and Afghanistan Veterans of America. Republican Martha McSally, who served in both wars, is still waiting for the outcome of her race to be decided against Rep. Ron Barber (D-AZ). No new senators are veterans. Seven Iraq and Afghanistan veterans were reelected. "While the total number of veterans in Congress has decreased, we will see a record number of post-9/11 veterans in Congress this year," said Tom Tarantino, chief policy officer for Iraq and Afghanistan Veterans of America. "Sixteen veterans of Iraq and Afghanistan have won their races and will be part of the House of Representatives next year." Committee assignments in both chambers are still being figured out. More than 1 million new veterans are expected to return home within the next five years, meaning these issues will become increasingly important for Congress.

### Number of veterans in Congress since 1975, according to the American Legion:

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VA Claim Denial Update 10:  Missing military records from the wars in Iraq and Afghanistan will be the subject of a congressional hearing next month, the spokeswoman for a House Veterans' Affairs subcommittee said 17 NOV. Separately, Rep. Michael Michaud (D-ME) called on Secretary of Defense Leon Panetta and Veteran's Administration Secretary Eric Shinseki to respond to findings of the investigation, which detailed how dozens of Army units and U.S. Central Command destroyed or failed to keep field reports. Michaud sits on the House Veterans' Subcommittee on Disability Assistance and Memorial Affairs, which added the topic to a 4 DEC session about the Department of Veterans' Affairs effort to move its claims and benefit recordkeeping systems into the digital era. ProPublica and the Times found that some veterans were denied disability benefits or faced delays in some cases because field records were unavailable to prove that injuries were combat-related. The stories focused on missing Army and Centcom field reports rather than those created and kept by the VA.

Michaud called for a joint study by the VA and the Pentagon into the impact of missing field records on veterans' benefit claims and the ability to study war time health risks, such as concern about exposure to toxic particulates from open-air burn pits used to incinerate garbage in Iraq and Afghanistan. "We cannot allow these lost records to lead to the same gaps in knowledge and care that our Vietnam veterans face with Agent Orange and our First Gulf War veterans face with medically unexplained illnesses," wrote Michaud. "We need to get to the bottom of this in order to understand the full scope of the problem and ensure it doesn't happen again." Sen. Patty Murray, (D-WA) has also asked Panetta's office to report on the status of efforts to find and collect field records from Iraq and Afghanistan. A spokesman for Murray, who chairs the Senate Veterans' Affairs Committee, said Panetta has not yet responded. Among the witnesses being called to the Dec. 4 hearing are representatives from the Department of Defense, the VA, the National Archives and Records Administration and veterans' advocates, a subcommittee spokeswoman said. Following is the full text of Congressman Michaud's letter to Panetta:

November 16, 2012

Dear Secretary Panetta and Secretary Shinseki,

I am writing to express my concern with recent reports that the military has been destroying or failing to keep records from the field in Iraq and Afghanistan. I am very worried that the lack of records will have serious consequences for current and future veterans of these wars.
According to investigative reporting done by ProPublica, the Pentagon was aware of this serious crisis in unit level recordkeeping as early as 2005, but multiple units are unable to produce any records through 2008. These records include after-action write-ups, intelligence reports and on-the-ground accounts, including information on fighting, casualties, prisoners, battle damage, pictures and maps. The lack of these records for the conflicts in Iraq and Afghanistan will have far reaching implications for both our understanding of these wars and the ability of veterans to get the care and benefits they have earned through their service.

Since October 1, 2001, 1,515,707 veterans of the Iraq and Afghanistan Wars have become eligible for VA health care, and that number will grow as the remaining Afghanistan force is drawn down. It is critical that Congress, the Department of Defense and the Department of Veterans Affairs work together to improve the record keeping process and protect the rights of our veterans going forward. In order to ensure that all necessary remedies are put in place, I request information on the Department of Defense and the Department of Veterans Affairs' joint efforts to address the impact the loss of these records will have on individual veterans filing benefit claims and the impact on the efforts of researchers examining war time health risks and patterns.

In addition, I request that the Department of Defense provide information on the steps taken to ensure that military units are submitting field reports and any evidence that demonstrates improvement in the collection of these records. I request that the Department of Veterans Affairs provide information on how often these types of records are used by veterans to establish a disability claim, including claims where a witness affidavit is submitted in place of an official military record.

Our service members and veterans depend on your agencies and Congress to protect them in battle and to care for them at home. We cannot allow these lost records to lead to the same gaps in knowledge and care that our Vietnam veterans face with Agent Orange and our First Gulf War veterans face with medically unexplained illnesses. I appreciate your attention to this important matter and look forward to working with you both as we continue to care for those who have served our country.

Sincerely,

MIKE MICHAUD Member of Congress

[Source: Alaska Dispatch | Peter Sleeth | 17 Nov 2012 ++]

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VA Claim Denial Update 11:  David Huffman has helped thousands of military veterans seeking disability benefits navigate the complex, often slow and at times frustrating claims process. The Wood County lawyer can relate: he was a 19-year-old Marine in Vietnam when a booby trap blinded him. As if getting through college and law school without sight weren't challenges enough, Huffman has begun a new quest: convincing the U.S. government to change the way it allows lawyers to handle veteran disability claims. Huffman is targeting the policy for claims, revised in 2007, that says a veteran can hire a lawyer for a fee only after a claim has been rejected. He supports what he hopes becomes a national movement, Veterans for Full Representation (http://vets4fullrepresentation.net), which is seeking nonprofit status from the U.S. Internal Revenue Service and recently launched a website. Ultimately, he hopes officials will allow fee-charging lawyers earlier in the process.

"I want the (Disabled American Veterans), the VFW or any of them to say, 'Why the heck would you want to pay an attorney 20 percent of your back check, when we can do it for free?' Maybe that will help them do better, to give the veteran a choice," Huffman said. "Veterans, in the long run, are better off having free choice and full representative from either an attorney or a claims representative." Groups like the Disabled American Veterans
provide service officers to help veterans file benefit claims for free. While praising these organizations, Huffman questions whether they have enough staff for the avalanche of claims both from recently returned and aging veterans. The U.S. Census Bureau estimates there are more than 22 million veterans nationally. Of the 1.6 million from the wars in Iraq and Afghanistan, 45 percent are now seeking compensation for injuries they say are service-related, The Associated Press recently found. That compares with 21 percent who filed such claims after the Gulf War in the early 1990s, top government officials told the AP.

Huffman also argues that these groups don't have the funding to obtain a veteran's medical records, or to arrange for an opinion from a physician or specialist. But his chief concern is the expertise of these service officers, given this complicated and evolving area of the law. He cited anecdotes from veterans and his own experience of service officers receiving just a few hours' training in a year's time, or who appeared to pre-judge a veteran for a claim involving noncombat injuries, or who see themselves more like a chaplain than a claims advocate. "I can't say this in general, because the (veterans) I don't hear from are the ones who are happy," Huffman said. "I love the veterans' organizations, and there are claims representatives who do a good job and a lot of them get more training than they used to. But the fact that veterans do not have an alternative but them has hurt the veterans more than it helped them. I hate to say that."

Joe Violante of the Disabled American Veterans said its 250 or so national service officers must complete a 16-month process before assisting with claims, and then receive training and are tested throughout their careers. They are all also wartime-disabled veterans, said Violante, who estimated that the DAV represents more veterans than the other service groups combined. "They know it firsthand," said Violante, a Vietnam veteran. "They've been involved on a personal level, in addition to being trained to help others get through the process." States also help veterans. West Virginia's Department of Veterans' Assistance, recently elevated to Cabinet-level, has 16 field offices with trained service officers that provide free assistance, spokeswoman Heather Miles said. "For this reason, the (department) is confident that West Virginia's veterans and their dependents have access to quality claims assistance under the current system," Miles said.

Veterans often have more than one condition they attribute to their military service. Those returning from Iraq and Afghanistan on average are claiming eight to nine ailments. For those who have come back since mid-2011, the average is 11 to 14. Failing to identify all of a veteran's service-related claims at the onset can mean a delay in resolving their case or insufficient benefits, Huffman said. He offered the example of a veteran with a service-related back injury who has begun suffering depression as a result, but his pending benefit request fails to make that connection. This reality makes the policy limiting lawyer involvement unfair and counter-productive, Huffman argues. "So, you either throw the veteran under the bus by handling just what's on appeal — that's a lot easier — or you represent him correctly, on everything," Huffman said. "I did not want to throw the veteran under the bus."

The Disabled American Veterans has opposed fee-charging lawyers, Violante said. "We don't believe that veterans should have to pay for their earned benefits," said Violante, who is also a lawyer. "We've seen a lot of egregious cases where veterans have paid an awful lot of money (to attorneys) regardless of the level of representation." While the DAV now accepts the policy change, its members have adopted a resolution asking Congress to cap attorneys' fees, Violante said. "Attorneys are in the process, for better or worse," he said. "I think that we would oppose bringing them in on the initial claims process." Huffman likens his situation to that of David versus Goliath, but believes the cause is worthy. "I'm 65, I can retire. I don't have to do this. I get veterans benefits myself," he said. "But I like to do this, and I want to see that the veterans are taken care of. I can't imagine how many Second World War veterans died without even knowing what their benefits were." [Source: Associated Press | Lawrence Messina | 24 Nov 2012++]
**Aid & Attendance Update 10:** Problems with a Veterans Affairs benefit have created a scam industry and left thousands of seniors ignorant of a pension they are entitled to receive, veterans advocates and congressional investigators say. Many families are unaware of the pension for ailing combat veterans and their dependents, footing the bill for their care as up to $24,239 a year for each veteran sits unused. Advocates blame poor outreach by the Veterans Affairs Department, a massive federal agency that wields $127 billion each year. Families that do know about the Aid and Attendance pension, sometimes called the widows' pension, find themselves confronted with daunting paperwork. The applications, once submitted to one of three centralized processing offices, can take more than a year to approve.

Lisa Fitter spent 14 months seeking a pension for her mother-in-law, the widow of a World War II veteran, who suffered a massive stroke in May. The Fitters have struggled to provide 24-hour home care, and they pay an aide $15 to shower her each day. "There is no excuse when you're dealing with a 96-year-old woman," said Fitter, 47, a Wellington Realtor. "She could have died." Federal Veterans Affairs officials in Washington, D.C., and St. Petersburg did not respond to a series of questions and requests for interviews by email and phone. But a spokesman told The New York Times in September that 38,076 veterans and 38,685 spouses were granted an Aid and Attendance pension in 2011. That year 1.7 million World War II veterans were alive and eligible for the pension. Since December, hundreds of thousands have died, but more Korean War veterans, who number more than 2 million, will become eligible. The issue has particular resonance in Florida, where 187,900 World War II veterans reside, according to Veterans Affairs. The Census reports that about 32,846 Korean and World War II veterans live in Broward and Palm Beach counties.

The benefit is a kind of last thank you for low-income veterans — or their spouses or dependent children — who are older than 65 and rely on others for daily care. They must have been a member of the Armed Forces at least one day during wartime and need not have been injured in combat. On average, veterans received $9,669 in 2011, and their survivors received $6,209, according to a federal report published this year. Critics have blasted the program from all sides. They say Veterans Affairs does little to advertise the pension in a deliberate attempt to keep the cost down and to relieve backlog. Meanwhile, state and local veterans officials said they give presentations, set up tables and distribute information through organizations such as the American Legion. The Florida Department of Veterans Affairs distributes a benefits guide — but Aid and Attendance is conspicuously absent from it.

The dearth of education has led to other problems, as well. A parasitic industry of private "pension poachers," as they're known, has sprung up in the vacuum of official help. "There's no outreach to seniors, and because of that failure, [Veterans Affairs has] allowed a market to be created in partnership with financial advisors and assisted living properties," said Deborah Burak, a Virginia lobbyist who has railed for pension reform after fighting with Veterans Affairs over benefits for her father. "They put on huge seminars, and they always do it under the guise of honoring their sacrifice," she said. In a May report, the Government Accountability Office, the investigative arm of Congress, counted more than 200 organizations nationally that sell financial products to seniors, ostensibly to help them dump wealth to meet asset restrictions on the pensions. Sometimes they offered annuities that the seniors could never hope to recover in their lifetimes, investigators reported. U.S. Rep. Tom Rooney (R-FL-16), has introduced legislation that would make it illegal to transfer assets three years before applying for a pension. While some say this will further complicate an onerous application process, a spokesperson for Sen. Ron Wyden, the Oregon Democrat who introduced the companion bill, said clearing pension poachers from the system will free up time to process legitimate claims.

Piero Pareja, the veterans services officer for Palm Beach County, sees the backlog, though he said some applications are approved in a matter of weeks. And he isn't surprised that millions of bedridden seniors are unaware of the pension. But he encouraged veterans to call his tiny office (three people, including himself), rather than private companies. The Veterans' Services Office is free and won't hard sell financial products. "We can help you,"
he said. "We can do 100 percent of the paperwork." Pareja's office did the paperwork for the Fitters, in Wellington. First Fitter and her husband tried to submit the application forms, along with backup documents, themselves. But Veterans Affairs denied their application, requesting more information. So they went to the Veterans' Service Office. That was in October. Then just last week, Pearl Fitter was admitted to a local hospital with an infection, as word came from Veterans Affairs. Their claim was approved. [Source: Sun Sentinel | Ben Wolford | 17 Nov 2012 ++]

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VA Disputed Claims Update 12: William Dolphin, the West Haven Connecticut Purple Heart winner wounded in the Vietnam War, now has a Senate ally in his fight with the government for medical care coverage. U.S. Sen. Richard Blumenthal said 16 NOV he is planning a meeting with Dolphin's lawyers to discuss how Dolphin can receive veterans medical benefits without Dolphin having to pursue the federal lawsuit he filed last week against Secretary of the Army John McHugh. "I can't prejudge that it will be possible for him to receive them but we are going to help advocate for him," Blumenthal said in a telephone interview. "We're going to seek to upgrade his discharge status." Yale Law student Laura Keay of Yale's Veterans Legal Services Clinic, which is representing Dolphin, said Blumenthal's interest was good news to Dolphin. Blumenthal said he learned of Dolphin's plight after reading about it in The Courant. "My first thought was, can I do something to help?" Blumenthal said. Though his office often assists veterans with similar issues, Blumenthal said Dolphin's case stood out. "His facts are particularly compelling," Blumenthal said.

In the lawsuit Dolphin charges that the U.S. Department of Veterans Affairs is refusing to pay for his medical care. The denial of a discharge upgrade by the Army Board for the Correction of Military Records was "arbitrary, capricious, unsupported by substantial evidence and an abuse of discretion," according to the lawsuit. Dolphin, 68, was drafted into the Army at 18 and he served in combat operations during Vietnam. According to his lawyers, Dolphin's unit came under heavy enemy fire during one mission in 1968 and an explosion threw him to the ground, leaving him with serious back, knee and brain injuries. His lawyers said Dolphin now suffers from those same injuries as well as post-traumatic stress disorder and is struggling to pay his medical bills. Dolphin was treated at hospitals in Alaska and Japan before being transferred to St. Albans Hospital in Queens, N.Y. There he "experienced vivid flashbacks and suffered insomnia because of frequent nightmares of being back on the battlefield," the lawsuit states.

During this time, the Army told Dolphin's mother that he had died and presented her with the Purple Heart. She said it was not until a month later that his mother was informed that Dolphin was still alive. After his stay at St. Albans, his lawyers said Dolphin returned to New Haven, where his family lived at the time, to convalesce. The lawsuit says Dolphin "continued to be plagued by constant pain, memory loss, and depression. He was often dazed, could not pay attention when people spoke to him" and was suicidal. "On one occasion, his mother physically restrained him from jumping out a window in an attempt to take his own life," the lawsuit says. In 1974, Dolphin was arrested and charged on three counts of being absent without leave (AWOL), according to the lawsuit. After a court-martial proceeding, Dolphin was sentenced to a bad-conduct discharge. Dolphin's lawyers said he does not recall receiving notice that the Army considered him AWOL and he left the hospital in Queens in a state of extreme confusion.

According to the lawsuit, Dolphin applied on his own twice for a discharge upgrade but was unsuccessful. In 2011, after a psychiatrist diagnosed Dolphin with post-traumatic stress disorder, Dolphin applied to the board again, citing the diagnosis as new evidence that the board should consider. In a letter to Dolphin rejecting the application, the Department of the Army Board for Correction of Military Records said his request was not received within a certain time limit of the board's original decision. According to the government's regulations, an applicant can request reconsideration of an earlier board decision if the request is received within one year of the original decision,
according to the letter. Blumenthal said when he meets with Dolphin's lawyers, he also plans to discuss the broader issue Dolphin's case has raised – how post-traumatic stress disorder was not recognized at the time of the Vietnam War and veterans were and still are not being properly treated for the disorder. "Many veterans have suffered this same fate and deserve a remedy or relief," Blumenthal said. "The current system needs to be improved. Unfortunately common sense has sometimes gone AWOL. Medical science has progressed beyond what it was when Mr. Dolphin was discharged. There are likely many who share his circumstances right now."

Keay said in addition to the federal lawsuit, Dolphin has sought a discharge upgrade through the U.S. Department of Veterans Affairs office in Newington but was denied after a hearing in January. Keay said officials there said he was denied due to his bad-conduct discharge. Though certain exceptions can permit the rewarding of medical benefits, she said veterans affairs officials said Dolphin "doesn't fit with any of those exceptions." Dolphin is appealing the local office's decision, she said. Since he was injured, Dolphin's lawsuit states that his combat injuries hampered his ability to get full-time employment, though he managed to work part-time jobs. In 1982, Dolphin was convicted of aiding and abetting a robbery and served about five years in prison. He was also arrested and convicted of other criminal offenses but since the 1990s, according to the lawsuit, has been successful in "transforming his life.

[Source: Harford Courant | Alaine Griffin | 16 Nov 2012 ++]

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Presidential 2012 Election Update 01: Every four years, Americans gather on the National Mall to witness the historic swearing-in ceremony of the newly-elected President of the United States. The 57th Presidential Inauguration of Barack Obama will take place at the United States Capitol on Monday, January 21, 2013. Each Senator and Congressional office receives a limited amount of tickets to the inauguration which are distributed to residents of that district on a first-come, first-serve basis. Contact their offices with any questions or requests concerning tickets. Viewing the Swearing-In Ceremonies from the National Mall does not require tickets. The non-ticketed area of the National Mall begins at Fourth Street NW. Demand for inauguration tickets is high with many people wanting to attend this event. Filling out an application to the inauguration does not guarantee a ticket. Tickets to Inaugural Balls and the Parade are controlled by the Presidential Inaugural Committee. Requests to participate in Inauguration Day events for marching bands, equestrians, military groups and floats are collected by the Joint Task Force-National Capital Region. The Presidential Inaugural Committee selects the participants from these requests. Refer to http://www.2013inaugurationparade.mil. [Source: Congressman Darryl Issa msg. 17 NOV 2012 ++]

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COLA 2013 Update 06: On their first day back in session the Senate passed S.2259, which gives a 1.7% cost-of-living-adjustment to compensation benefits paid to disabled veterans and survivors. The bill had previously been passed by the House of Representatives back in July. The bill’s sponsor, Senator John Tester (D-MT) said: “Veterans fought hard for this country and earned all their benefits. It’s my job to make sure those benefits keep pace with economic realities, and I will fight to improve the lives of veterans across Montana and the country.” Tester estimated that the increase would mean an additional $500 in benefits for veterans and their families next year. The president signed S.2259 into law in late November. The new COLA will take effect on 1 DEC and is expected to be included in the checks sent in January. [Source: TREA News for the Enlisted 16 Nov 2012 ++]

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TRICARE Urgent vs. Emergency Care: If you or your child gets sick or injured, your first instinct is to go to the emergency room (ER) right away or call 911. These are good instincts in an emergency, but many people use the ER when it is not an actual emergency. This contributes to long ER wait times, high costs, and unnecessary medical care. Sometimes, using an urgent care clinic may be your best choice, and can help responsibly preserve the TRICARE benefit for future generations of military families. It can be difficult to know whether an illness or injury is really an emergency, but the judgment is yours to make. If the condition is obviously life threatening, or causing severe pain and distress, then the need for an emergency room is clear. TRICARE views an emergency as a medical, maternity or psychiatric condition you believe could threaten your life, limb or sight without immediate medical attention. Other emergencies include severe, painful symptoms requiring immediate attention, or when a person may be an immediate risk to themselves or others. If you or a family member experience any of the following symptoms, go to the ER immediately:

- Chest pain or pressure
- Uncontrolled bleeding
- Sudden or severe pain
- Coughing or vomiting blood
- Difficulty breathing or shortness of breath
- Sudden dizziness, weakness, or changes in vision
- Severe or persistent vomiting or diarrhea
- Changes in mental status, such as confusion

You do not need authorization for emergency care before receiving treatment. However, if you’re enrolled in a TRICARE Prime plan you must contact your primary care manager or regional health care contractor within 24 hours or the next business day after you receive emergency care.

Urgent care is when an illness or injury is serious enough to seek health care right away, but not so severe as to require emergency room care. Some examples include earache, toothache, joint sprain, muscle pull or urinary tract infection. You can get urgent care from your primary care manager (PCM), or from an urgent care center if your PCM is inaccessible. Urgent care can be quicker, with a lower cost and better results, compared to a crowded ER that may require unnecessary tests or hospital stays. Many urgent care centers are open after normal business hours and on the weekend, so you can go at a time that fits with your schedule, or when a health problem warrants. If you have TRICARE Prime, you need to get prior authorization from your PCM or your regional contractor to avoid additional costs for visiting an urgent care center. If you are traveling, you need to contact your home region for authorization. You can find contact information for your regional contractor at www.tricare.mil/contacts.

According to the Urgent Care Association of America, 57 percent of visits to an urgent care facility have a wait time of 15 minutes or less. By comparison, the Centers for Disease Control and Prevention report only 22 percent of visits to an emergency room have wait times of 15 minutes or less. Getting urgent care instead of visiting the ER can also save money. ERs are required to run expensive diagnostic tests that may not be necessary if your condition is less serious. Being judicious with your healthcare spending can make your household budget go further, and cost efficient urgent care will help protect your TRICARE benefits in these uncertain financial times. It’s a good idea to be aware of nearby urgent care facilities in the TRICARE network, just as you would with the closest emergency room. To find an urgent care facility near you in the TRICARE network, visit http://www.tricare.mil/mybenefit/home/Medical/FindingAProvider and select the search tool for your regional contractor. [Source: DODLive | Deputy Director, TMA | 12 Nov 2012 ++]
Consumer Price Index Update 01:  The purpose of a Cost of Living Adjustment (COLA) is to ensure that the values of Social Security, veterans’ benefits and other vital benefits do not diminish. The proposals to switch to a chained Consumer Price Index (CPI) would, over time, cut the benefits of both current and future beneficiaries. One of the most disturbing aspects of a chained CPI is that cuts to benefits get larger the longer you receive them. This means that the chained CPI would disproportionately hurt many retired service members, survivors, and disabled veterans. For example, veterans wounded in combat at a young age would be among those most adversely affected by this proposal. Since 1972, when President Nixon signed the COLA law, COLA has been part of the basic Social Security benefit. It is not a benefit increase. A chained CPI would slowly decrease purchasing power for the most vulnerable of beneficiaries.

The National Association for Uniformed Services (NAUS) recently participated in a Press Conference, along with Sen. Bernie Sanders (I-VT), who is being mentioned as possibly the next Senate Veterans’ Affairs Committee chairman, to express opposition to switching to the Chained CPI for future increases. During the media teleconference with Sen. Sanders, NAUS Legislative Director Rick Jones said, “A Chained CPI would cut important benefits to disabled veterans, military retirees, their families and their survivors from the World Wars to the current conflicts in Iraq and Afghanistan. As a nation, we share a solemn obligation to help those who honorably served and their families keep pace with inflation, not to erode their quality of life.” [Source: NAUS Weekly Update 16 Nov 2012 ++]

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SVAC Update 10:  On 15 NOV, Sen. Patty Murray (D-WA) announced she will step down as chair of the Senate Veterans’ Affairs Committee (SVAC) to seek the chairmanship of the Senate Budget Committee in the 113th Congress, filling a vacancy created by the retirement of current chairman Sen. Kent Conrad, (D-ND). Her move, which will receive almost certain approval from her fellow Senate Democrats, provides an opportunity for Sen. Bernard Sanders (I-VT), an independent who caucuses with and receives committee assignments from Democrats, to become the new chairman of the veterans’ committee. Murray said she would remain a member of the veterans’ committee and stay active on it. “They have not gotten rid of me,” she joked. [Source: NAUS Weekly Update 16 Nov 2012 ++]

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Budget Impact On Vets (2013):  As lawmakers and the White House start negotiations to stave off sequestration and several other end-of-year crises, the Congressional Budget Office (CBO) released a new report, "Choices for Deficit Reduction," that includes an array of spending cut options for FY2013 and the outyears. Some of the options outlined in CBO’s report would:

- Raise the age of Medicare eligibility to 67
- Raise the full retirement age and the earliest eligible age for Social Security
- Change the COLA formula for adjusting Social Security benefits

Others are aimed more specifically at military retirement and healthcare programs. While the descriptions in the new report are vague in some cases, MOAA has identified more specific descriptions of many of them that CBO has published in previous budget-option packages. Here are links to CBO-identified options that would:

- Raise out-of-pocket costs for TRICARE-for-Life by up to $5,000 a year per married couple
Cap future military pay raises below the average American's earnings.

Change the COLA formula for military and federal civilian retired pay and VA compensation.

Dramatically raise TRICARE fees for beneficiaries under age 65.

Change TRICARE eligibility rules for beneficiaries under age 65.

Dramatically raise TRICARE pharmacy copays.

Consolidate and raise prices in commissaries and exchanges.

Most of these proposals have been around for years, and have been rejected by Congress before. But in this political and budget environment, back-room deal-makers being pressed to come up with a package quickly will be disposed to simply grab some off-the-shelf options and worry about any potential consequences later. This is all the more reason to make your voice heard by sending your congressional representatives a message on how you want them to react to these proposals. A MOAA-suggested message is available at the link provided above. An option is available for you to print and forward it via letter if you desire:

Barack Obama (D), President
Joseph R. Biden Jr. (D), Vice President
Your U.S. Senators
Your U.S. House Representative
Leon E. Panetta, Secretary of Defense, Secretary
Martin E. Dempsey, Chair, Joint Chiefs of Staff, Chairman
Erin C. Conaton, Under Secretary of Defense for Personnel and Readiness, Under Secretary
Robert F. Hale, Under Secretary of Defense (Comptroller), Under Secretary
Jeffrey Zients, Director, Office of Management and Budget, Acting Director

[Source: MOAA Leg Up 16 Nov 2012 ++]

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SBA Vet Issues Update 24: Multiple contractors told The Des Moines Register that thousands of veteran-owned businesses have been disqualified from bidding on government construction projects — costing U.S. taxpayers millions — because stringent federal checks to guard against fraud are mired in bureaucracy. In Iowa, the Register found examples where projects have cost taxpayers hundreds of thousands of dollars more because veteran-owned companies have been unable to compete in the government’s bidding process. “Throughout the country this is costing taxpayers millions of dollars,” said Terry Winn, owner of Winn Construction, an Omaha-based business that frequently works on government projects in Iowa. “It is red tape, and it’s very burdensome.” The problems center on a U.S. Department of Veterans Affairs Service Disabled Veteran Owned Small Business (SDVOSB)
program that is supposed to give preference to retired or disabled veteran business owners when contracts are issued. The department spends about $3.5 billion each year in services provided by veteran-owned businesses.

Problems surfaced in recent years when the U.S. Government Accountability Office blew the whistle (GAO-12-697 Report) on thousands of businesses across the nation that had fraudulently won millions of dollars in contracts even though they weren’t veteran-owned. In response, Congress passed a law in 2010 that gave federal veterans officials greater ability to conduct background searches to verify that businesses qualify for the program. The new process has whittled the national list of contractors available to bid on the veterans projects from around 18,000 in 2010 to about 6,250 today, which some say is an indication that many qualified businesses are being excluded. The issue has caught the attention of at least two Iowa congressmen and was the center of a recent congressional oversight hearing. The House Veterans Affairs subcommittee concluded that the problems now extend beyond fraudulent representation highlighted several years ago to efficiency and time needed to approve qualified businesses to participate in the program.

“I want to know how and, equally important, when the VA will put in place the systems and policies that will shorten the time to be approved, decrease the level of effort needed to pass muster and finally, create a community of veteran-owned businesses that is reasonably free from unqualified companies,” said Rep. Marlin Stutzman (R-IN). Iowa Rep. Bruce Braley of Waterloo is the top-ranking Democrat on the Veterans Affairs subcommittee on economic opportunity, which has investigated the matter. “We need to find a balance between having a fair and timely system in place to certify businesses as veteran-owned, and at the same time making sure taxpayer funds are being used appropriately,” Braley said. The process of certifying businesses owned by veterans does take longer, but that’s a result of laws passed by Congress and it’s one to help protect legitimate veterans’ businesses, said Thomas Leney, the executive director for small and veteran business programs at the U.S. Department of Veterans Affairs.

Leney said the process is nearly identical to one used by the U.S. Small Business Administration. Federal officials have not completed a “deep dive” into how much more projects have cost taxpayers because of contractors being excluded from the bid process, Leney said. But, Leney said, he’s seen no direct evidence that there’s been “a material change in costs.” In previous years, thousands of businesses were able to self-verify that they were eligible to participate in the veterans business program. It’s part of the reason roughly two-thirds of the contractors have been eliminated, Leney said. “For those who say, ‘You guys are crazy, you’ve got this wild regulation and this extreme requirement,’ I say there is one big difference: We look,” Leney said. “And here is the good deal for veterans and why we take it so seriously: When someone is verified and they wear that logo, they are telling the world: ‘You can count on me. I am the real deal.’ ” Iowa Veterans Affairs officials directed questions to Leney, noting that the federal offices handle the review process.

The Disabled Veterans National Foundation, an advocacy group based in Washington, in September urged federal officials to ease the restrictions. “This is a process, and it’s not easy,” said Doug Walker, a spokesman for the national veterans group. “Making it as simple as possible for our veterans would be tremendous.” Latham, a Republican from Clive, said the verification process is crucial but he also has concerns that it’s unnecessarily cumbersome. When legitimate veteran-owned businesses are excluded, it not only hurts those businesses but could also become more costly for taxpayers, Latham said. “That’s the frustration a lot of these businesses have is that they’ve gone past the bid dates waiting for re-verification,” Latham said. “Because the process has been very, very slow and cumbersome there are cases, I think, when we probably could have lower bids. We need to make sure the process is done in a proper way and in a timely way.” [Source: Des Moines Register | Jason Clayworth | 14 Nov 2012 ++]

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VA SSVF Program: Estimates for Veteran homelessness have dropped substantially in the past five years. However, despite the success of VA Homeless Services and its community partners, to end Veteran homelessness, VA must continue to assist families transitioning from homelessness to permanent housing and prevent at-risk families from becoming homeless. In 2010, the Department of Housing and Urban Development (HUD) reported that 13 percent of impoverished individual Veterans become homeless at some point during the year. In 2009, the American Community Survey estimated that 1,356,610 Veterans lived in poverty.

VA has been authorized to offer community-based grants through the Supportive Services for Veteran Families (SSVF) Program, which will provide supportive services to very low-income Veteran families in or transitioning to permanent housing. Funds are granted to private non-profit organizations and consumer cooperatives who will assist very low-income Veteran families by providing a range of supportive services designed to promote housing stability. Through the SSVF Program, VA aims to improve very low-income Veteran families’ housing stability. Grantees (private non-profit organizations and consumer cooperatives) will provide eligible Veteran families with outreach, case management, and assistance in obtaining VA and other benefits, which may include:

- Health care services.
- Daily living services.
- Personal financial planning services.
- Transportation services.
- Fiduciary and payee services.
- Legal services.
- Child care services.
- Housing counseling services.
- Time-limited payments to third parties (e.g., landlords, utility companies, moving companies, and licensed child care providers) if these payments help Veterans' families stay in or acquire permanent housing on a sustainable basis.

When funds are made available, VA publishes a Notice of Fund Availability (NOFA) in the Federal Register. At [http://www.va.gov/HOMELESS/docs/SSVF/FR_Notice_SSVF_10_26_12.pdf](http://www.va.gov/HOMELESS/docs/SSVF/FR_Notice_SSVF_10_26_12.pdf) can be found the latest NOFA dated 26 OCT 2012. Application deadline for FY 2013 is 1 FEB 2013. Application information is also available online at [http://www.va.gov/homeless/ssvf.asp](http://www.va.gov/homeless/ssvf.asp) and [http://grants.gov](http://grants.gov). To obtain applications go to:


For further information about the SSVF Program, email the program at SSVF@va.gov. [Source: http://www.va.gov/homeless/ssvf.asp Nov 2012 ++]

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Tricare Philippines Demonstration Project Update 05: Military insurer Tricare is getting ready to overhaul its troubled health coverage system for U.S. veterans in the Philippines, but the upcoming changes are already drawing strong criticism from some beneficiaries. Veterans say a new closed network of Philippine health care providers — set to go online 1 JAN — is riddled with problems and unanswered questions. They are urging Tricare to quickly pull together a retiree panel to direct improvements. The agency said 9 NOV it has fully explained the system and denied troubles are looming. It decided in 2011 to try a closed network after struggling for years to reduce fraud and complaints from about 8,000 military beneficiaries in the Philippines who
say red tape during claims processing has often blocked them from receiving full reimbursements for covered expenses.

The agency unveiled details of its three-year pilot project during presentations to retirees in Manila, Subic Bay and Angeles City in late October, but the events did little to assuage concerns, said Mike Garcia, director of the Retired Activities Office Manila. “The people they sent here to present the Tricare project didn’t know anything about the Philippines. They think it is just like the U.S.,” Garcia said. “I don’t think they will be able to put it [the closed network] in place by January because of all the questions and concerns.” The closed network of hospitals and doctors was designed so veterans would no longer have to pay medical bills upfront or file their own reimbursement claims with Tricare, a requirement that has caused confusion over differences between U.S. and Philippine documentation and resentment over rejected or delayed payments. Instead, the providers who have joined the new closed network are supposed to explain benefits to veterans and file claims directly with Tricare so full, upfront payments are no longer necessary.

There are six hospitals and 71 doctors included in the first phase of the pilot project, according to the approved provider list published by Tricare. The experimental network will be phased in beginning in January to include veterans in Manila, Angeles City, Subic Bay and Orion. The second phase will open in January 2014 in areas of Cavite, while the final phase will include Iloilo City, Tricare has said. After three years, the agency plans to review the performance and decide whether to adopt it permanently in the Philippines. “What’s going to happen is it’s going to fail,” said Ken Fournier, a former servicemember who has spent years helping other Philippine retirees with Tricare grievances and pressing the agency for changes to its system. “The issue of travel time is a big one.” Fournier, who has become an unofficial representative of Philippines beneficiaries, said many worry they will be forced to travel long distances to reach participating hospitals and doctors, which could be expensive for those on fixed incomes or those without a vehicle. For example, the closed network includes just one general hospital in metro Manila, meaning up to four or five hours of travel in some of the world’s worst traffic, he said. (Manila, a city of 12 million people which grows to 16 million during the day, has no freeways)

Meanwhile, Fournier said many questions remain on issues such as hospital admissions, waivers and the closed-network boundaries. He submitted a list of questions to Tricare management following the 30 OCT public meeting the agency hosted in Manila. “If I go to the hospital, who do I go to see to sign in as a Tricare beneficiary?” he said. Fournier is requesting the agency create a working group made up of representatives from Philippines retired activities offices, veterans groups and online retiree groups that focus on the Tricare issue. “We offered to sit down and show them how to make it work,” he said. “We are not interested in being adversaries; we are interested in being partners.”

In a written response to Stars and Stripes, Tricare denied veterans will be forced into long commutes or that it has not done enough to educate beneficiaries. “Travel times have been considered in the recruitment of providers,” Tricare spokesman Austin Camacho wrote. “Beneficiaries may choose to drive to see approved providers but because it is locality based, four- to five-hour drive times are not required.” Camacho said the agency sent a letter explaining the closed network to all beneficiaries in the Philippines who have filed a claim in the past two years and also conducted the briefings last month, which were held in areas that used to host large Navy and Air Force bases and still have some of the highest veteran populations. Tricare also has posted online information showing providers, area maps and step-by-step instructions on how to use the network. The agency will not create an advisory working group of retirees because it already considered veterans’ input when developing the network, but the agency’s local contractor International SOS is planning a new round of meetings with retired activities offices in the coming months to further discuss the pilot project, Camacho said.
Tricare Philippines Demonstration Project Update 06: Military insurer Tricare says retirees in the Philippines will continue to face upfront medical payments despite efforts to eliminate the requirement and overhaul the troubled benefits system there. The agency has told beneficiaries for the past year they would no longer need to pay before receiving health care due to a new closed-network of Tricare providers set to open on Jan. 1. But it backtracked 20 NOV, saying up-front co-payments must be charged to attract and satisfy Philippine providers in the new network. Meanwhile, plans for the Tricare network in the country’s Orion area were abandoned this week because the agency said it could not find enough providers. Retirees have been warning for months that the overhaul is riddled with problems and unanswered questions. They have urged Tricare to create an advisory board of local beneficiaries to iron out the bugs, though the agency has declined.

Tricare announced in 2011 that ballooning costs for the Philippines program and insurance fraud have made it necessary to try a closed-network approach. It said this month it has built plans based on input from the military beneficiaries. The changes announced this week will help increase convenience for retirees, who will be able to avoid a second trip to a doctor’s office or hospital to pay a bill, according to Tricare spokesman Austin Camacho. “Beneficiaries may be asked to pay their applicable cost share and deductible at the time of the visit,” Camacho wrote in an email to Stars and Stripes. “This change was implemented due to beneficiary and provider feedback. When beneficiaries pay their cost shares and deductibles upfront, it eliminates the need to make a second trip to pay the cost share or deductible.” Camacho said the change does not defeat the purpose of the new network and that beneficiaries will only be required to provide their co-pay — not a full up-front payment — for all medical care and services.

Retirees in the Philippines must routinely pay their full medical bill before receiving care — thousands of dollars for serious procedures — and then file a claim with Tricare to be reimbursed. That system has led to years of complaints over improper billing and insufficient refunds, and beneficiaries say they are not receiving the full benefits earned during their military careers. Tricare had originally planned to have closed-network providers bill Tricare directly following care and then charge retirees their share. The new system will be phased in beginning in January to include veterans in Manila, Angeles City and Subic Bay. Orion was slated to be part of the first phase of the project until this week, but now beneficiaries in that area will not be required to participate in the closed network due to the lack of providers, Tricare said. So far, there are six hospitals and 71 doctors included in the first phase of the pilot project, according to the approved provider list published by Tricare. The second phase will open in January 2014 in areas of Cavite, while the final phase will include Iloilo City, Tricare has said. After three years, the agency plans to review the system and decide whether to adopt it permanently in the Philippines.

Jim Houtsma, a retiree in the Philippines, who is a beneficiary representative and activist who has pressed Tricare to change its system for years, said the decision to continue charging upfront payments might not reduce the need for additional trips to a health care provider. “While it may preclude beneficiaries from returning to pay deductibles and co-pays, it will now require they return to try to recoup over-payments, and considering local culture and custom, that may not be possible or will require multiple return trips,” Houtsma wrote in an email to Stars and Stripes. A top concern of many retirees is travel to and from the new network providers. Some say a limited number of providers could require 4-5 hour travel times and additional expenses for those who do not live nearby or own a vehicle. Ken Fournier, a retiree and informal representative of Philippine beneficiaries, said the changes on up-front payments are an indication that the closed network should be put on hold. “We need the demo suspended until all of
the rules, processes and procedures are worked out and published for retirees to digest,” he said. “If they held
meeting with us as a working group, we could walk them through the issues that have not been thought out and
provide reasonable fixes for them.”

Editors Note: Retirees living in PI may want to consider adding their comments to the above article at
1.197918 and also visit the TRICARE Facebook page at http://www.facebook.com/TRICARE to post
comments/questions about TRICARE. They may help get the attention of TRICARE leadership. Especially since
there is no TRICARE office in PI to monitor what retirees must go through to obtain medical care under existing
and proposed TRICARE rules. [Source: Stars & Stripes | Travis J. Tritten | 21 Nov 2012 ++]

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End of Life ~ Conversations:  A study on patients with stage IV lung or colorectal cancer was held
to evaluate the extent to which end-of-life discussion characteristics, such as timing, are associated with the
aggressiveness of care received near death. Researchers found tackling end-of-life conversations early may cut down
on unnecessarily aggressive care and improve use of hospice in patients with advanced cancer. When those
discussions occurred before the last 30 days of life, late-stage cancer patients were at least 48% less likely to spend
their last 14 days on chemotherapy or visit the ICU or hospital in their last 30 days. They also had a higher
likelihood of hospice and earlier initiation of a hospice stay with early end-of-life conversations according to the
results of the consortium cohort study appearing online in the Journal of Clinical Oncology. "Aggressive care is not
necessarily wrong for individuals at end of life," the group noted. "It may fit with the preferences of select patients
who want to pursue life prolongation at any cost. But most patients who recognize that they are dying do not want
such care."

Guidelines recommend end-of-life discussions start soon after diagnosis with incurable cancer, before acute
deterioration and with physicians who know the patient well. "When discussions begin in the last 30 days of life, the
end-of-life period is typically already under way," Mack and colleagues pointed out. "Importantly, clinicians may
not know when the last month of life is about to begin. "However, physicians seem to wait until the patient begins
deteriorating medically, a strategy that leads to a high incidence of inpatient discussions," they wrote. "Instead,
physicians should consider moving conversations closer to diagnosis and initiating conversations while the patient
is doing comparatively well, so the patient has time to plan for more difficult times in the future." Mack's group
examined the prospective population- and health system-based Cancer Care Outcomes Research and Surveillance
Consortium (CanCORS) cohort for end-of-life care received by 1,231 patients with stage IV lung or colorectal
cancer who died over a 15-month period. The 88% of patients who had some kind of end-of-life discussion typically
had it during a hospitalization (63%) and with someone other than an oncologist (60%). Nearly 40% of these
discussions about resuscitation preferences and hospice care happened in the last 30 days of life. MedPage Today |
Crystal Phend | 13 Nov 2012 ++]

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searchable collection of the burial sites of more than 500,000 members of the military. The project, a partnership
with the Veterans Affairs Department and the National Archives and Records Administration, allows people to
search by name — for a fee — through an online collection of military burial sites at the site. The collection
includes burial information for prominent figures in history, including President Abraham Lincoln and Gen. George
Armstrong Custer, who died with more than 200 of his men in the 1876 Battle of the Little Bighorn against a
coalition of Native American tribes. “We are excited to be able to share this wealth of primary documentation,”
Steve L. Muro, the VA’s undersecretary for memorial affairs, said in a statement. “With the help of Ancestry.com, we have opened the doors to thousands of service members’ histories through the information contained in these burial ledgers.”

The National Cemetery Administration has overseen U.S. military burial documents for 82 national cemeteries since 1973. Concerned for the fragility of the documents and wanting to expand public access to the contents, the administration scanned about 60 handwritten ledgers to produce more than 9,344 pages of high-quality digital images. However, those images couldn’t be searched, making it difficult to find records. In 2011, the administration partnered with Ancestry.com to index the pages so users can search them more easily. Ancestry.com spent close to 3,000 hours indexing the records to make them searchable by name, at no expense to the government or taxpayers, the company said in a statement. The project includes two new, searchable collections of U.S. burial registers, military posts and national cemeteries from 1862-1960 and of U.S. headstone applications from 1926-1963.

Ancestry.com operates a website for researching family history and has more than 2 million paying subscribers. The company develops and acquires systems that digitize handwritten historical documents, and it works with government archives, historical societies and religious institutions around the world. The company says more than 10 billion records have been added to its site during the past 15 years. Last month, the company announced it had agreed to be acquired by a group led by European private equity firm Permira Funds in a cash deal valued at about $1.6 billion. [Source: Associated Press article 12 Nov 2012 ++]

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GI Bill Update 133: The Veterans Affairs Department has been late in paying education benefits to scores of Colorado veterans, Sen. Michael Bennet (D-CO) said 1NOV, and he asked the department to find a remedy. Bennet said 141 veterans have told him the VA has been late in paying benefits under a half dozen education programs. He sent a letter to VA Secretary Eric Shinseki about the delays. "We're only going to have more student vets in the years ahead," Bennet told The Associated Press. "We don't want matters to get worse." The VA said its employees are working overtime and weekends to process paperwork for veterans seeking education benefits. "We regret any delays that may have occurred," the department said in a written release.

A panel of veterans that advises Bennet on veterans matters raised the issue. Bennet's office then sent questionnaires to veterans at about 20 Colorado colleges and universities in September asking about problems with benefits payments. More than 260 responded. Of those, 168 said they experienced some sort of problem in getting education benefits, including the 141 who said their payments had been late. Nearly 120 said their benefits had been at least 30 days late. "One of the reasons that people join the military often is to pay for school," Bennet said. "I think we have a sacred promise to veterans to make sure their benefits are paid on time." The programs the veterans cited included three versions of the GI Bill and programs for vocational rehabilitation, retraining assistance and help for survivors and dependents. Separately, some veterans attending colleges in Colorado and elsewhere have reported problems in getting paid for the hours they put in as part of a work-study program. The VA said in that case that its processing office in St. Louis had been slow in processing paychecks and work-study contracts because off vacant positions and an influx of veterans joining the program. The department said it hired more workers and had reduced the processing time for paychecks. The St. Louis office handles work-study time cards and contracts from 19 states, mostly in the Midwest. [Source: Denver Post | Dan Elliott | 13 Nov 2012 ++]

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VA Conference Scandal Update 03: (Note: Military Times Copyrighted material - Not authorized for reproduction on any publicly accessible website or website accessed newsletter. Forwarding
“The truce is off,” the House Veterans Affairs’ Committee chairman declared 28 NOV in an abrupt and explosive end to a hearing on questionable spending on conferences and travel within the Veterans Affairs Department. “Expect more oversight and investigation,” said Rep. Jeff Miller, (R-VA) as he gavelled to a close a hearing called to focus on the $86.5 million VA spent last year on conferences and workshops — a hearing that unexpectedly expanded to questions about foreign travel by VA workers. Tension had been building between VA and Congress because the department has been slow to respond to questions about spending on conferences, including exactly how much has been spent. Miller and his staff came up with the $86.5 million total for 2011, a figure that Todd Grams, VA’s chief financial officer, did not dispute.

Miller and other committee members hammered VA witnesses about why hundreds of questions about conference spending asked in the last six months have not been answered. The discussion went off the rails, however, when Miller began asking questions about photographs posted on VA’s Facebook website of a trip to Italy by employees of the Veterans Canteen Service. Gould and other VA officials were not prepared for those questions, because Miller had given no advance warning that he would ask them. Labeled on Facebook as a year old, the set of photos depicted people sitting around an outdoor table with what appeared to be wine glasses. The photos were said to have been taken during a “side trip” to southern Italy “to explore gastronomic ecstasy, explore some incredible locations and visit with VCS expatriate and former chief operating officer Ralph Shalda.” A comment posted by the Veterans Canteen Service read: “Research is tough but someone has to do it.” After the hearing, VA spokesman Nathan Naylor said the photos were taken during personal travel, not government-funded travel, and should not have been posted on a VA website. “We regret those pictures were on the site,” Naylor said.

Rep. Corrine Brown (D-FA), ranking Democrat on the veterans’ committee, said she was unhappy that Miller had not told her about the Facebook photos before bringing them up at the hearing, comments that committee aides said could bode for a difficult relationship between Republicans and Democrats on a traditionally bipartisan panel. Miller, however, didn’t back down, saying any embarrassment for VA employees is the fault of VA bureaucrats, not the committee trying to get explanations about how taxpayer money is being spent. “I had a nice conversation with Deputy Secretary Gould yesterday on the phone, and thought we could work together, but it appears not,” Miller said. “Frankly, I’m tired of waiting for them to answer basic questions and tired of their excuses. If they don’t like getting more and more questions from us about conference spending and travel, maybe they could answer some of our questions.” Gould conceded during the hearing that VA controls on spending were lax, and said new safeguards have been put in place so that senior agency officials have a bigger role in approving expenses. “I apologize to veterans and this committee,” Gould said. “It is unacceptable this money was wasted.” [Source: NavyTimes | Rick Maze | 28 Nov 2012 ++]

Tricare Autism Care Update 04: (Note: Military Times Copyrighted material - Not authorized for reproduction on any publicly accessible website or website accessed newsletter. Forwarding via email in personal communications is authorized.) The Pentagon has taken steps to cover intensive autism therapy for affected children of service members and retirees but is still fighting a judge’s order that it pay for the treatment, known as applied behavior analysis. The Justice Department has appealed a 26 JUL ruling by Judge Reggie Walton of the U.S. District Court in Washington, D.C., that Tricare cover ABA as a medical benefit for beneficiaries. Tricare maintains that ABA is an educational intervention, and as such should not be a covered service. Dr. Jack Smith, DoD’s director of clinical program policy and integration, told the Defense Health Board 27 NOV that the Tricare manual is being revised to comply with Walton’s decision, but he added that DoD has asked the judge to reconsider. DoD also is conducting a “thorough literature review” to determine whether evidence supports ABA as a medical treatment, Smith said.
Walton’s ruling, which stemmed from a class-action lawsuit, cleared the way for the children of military retirees to receive ABA under Tricare and also expanded ABA coverage for active-duty dependents as part of Tricare’s basic program. Previously, Tricare paid for ABA therapy only as part of its Extended Health Care Option program, available only to active-duty personnel. The benefit was capped at $36,000 annually. From 2005 to 2008, Tricare registered 9,300 beneficiaries with autism under age 21 with autism: 6,025 active-duty dependents and 3,271 family members of active-duty and reserve component retirees, and survivors. Another 10,000 family members had a related disorder, such as Asperger’s syndrome or pervasive development disorder. Smith told the Defense Health Board that the Pentagon is offering ABA through a group of approved “masters-level board certified behavior analysts.” But the advocacy group Autism Speaks has called DoD’s efforts to comply with Walton’s ruling insufficient and said its list of authorized providers is “too restrictive.” “Very few dependents will actually receive any level of care, let alone the intensive level of services many require,” an Autism Speaks press release stated.

[Source: NavyTimes | Patricia Kime | 28 Nov 2012 ++]

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VA Fraud Waste & Abuse Update 61:

- **Roseburg OR** - A longtime pharmacy technician at the Veterans Affairs hospital in Roseburg admitted 13 NOV that she carried out a scheme to steal controlled narcotics from her workplace. Denise Nadine Richardson, 47, pleaded guilty in U.S. District Court in Eugene to a charge of theft of government property. She could be sentenced to prison when she returns to court in January. Richardson, who worked 19 years at the VA hospital, “discovered a flaw in the system” and stole more than 6,000 pills valued at more than $23,000 from the pharmacy, Assistant U.S. Attorney Amy Potter said in court. Richardson is not accused of selling any of the drugs, which Potter said had an estimated street value of $250,000. “She stole them for her own or others’ use,” Potter said. Richardson took the semisynthetic opiates OxyContin and oxycodone, the sleep drug Ambien and clonazapam, which works as a tranquilizer, according to a federal agent’s sworn affidavit in the case. An investigation began in June 2011, after one of Richardson’s co-workers became suspicious of a records discrepancy, the affidavit states. Richardson pleaded guilty as part of an agreement with federal prosecutors, who in January will ask a judge to sentence her to two years in prison, Potter said. [Source: The Register-Guard | Jack Moran | 14 Nov 2012 ++]

- **Long Island NY** - A cemetery worker was charged with doing unauthorized body work on the side, federal authorities said Monday. Joseph Basile, a mechanic at Calverton National Cemetery, claimed he had injured his back and was collecting disability checks from the federal government since July 2006. Then last month, a federal agent with the Department of Veterans Affairs discovered Basile was working off-the-books as a mechanic at Crossroads Body & Fender Works in Manorville, according to a federal complaint. Basile has been repairing cars there since April and collecting about $400 cash per week, according to the complaint. He allegedly defrauded the government out of $86,000 in federal disability payments. [Source: Daily News | John Marzulli | 3 Nov 2012 ++]

- **Seattle WA** - A Seattle Army veteran who defrauded the Veterans Administration out of more than $23,000 in travel expenses has been sentenced to a year in prison. Fifty-year-old Aaron Adams admitted he used a false address in Pullman in requesting mileage reimbursements - making it appear that he traveled across the state for his VA appointments in Seattle. In reality, he lived in Seattle. Federal prosecutors say he split the money with two VA workers who are scheduled for trial in January. Four other military veterans were also charged. Investigators say the conspiracy cost the VA precious resources that should have been used to provide health care to veterans. In a letter to U.S. District Judge James L. Robart, Adams wrote that he regretted his actions, and that he had struggled with post-traumatic stress disorder, alcohol and cocaine addictions, and homelessness. [Source: Seattle Times | AP | 28 Nov 2012 ++]
Vet Jobs Update 93:  A former Fort Bragg Special Forces soldier has launched a national website https://www.rallypoint.com/ for service members looking to plan for their post-military careers. The beta version of RallyPoint.com went live 19 NOV. It's a professional networking site similar to LinkedIn. RallyPoint CEO and board member Yinon Weiss is a former Army captain who went through the Special Forces qualification course at Fort Bragg before he was assigned to 5th Special Forces Group. He partnered with another former Army officer in Harvard Business School after noticing that soldiers are sometimes so focused on their military careers that it's hard to plan for the next step - their civilian jobs. "I want people in the military to know it doesn't have to be that way," Weiss said. "You can take more control over your own career." People can sign up if they're active-duty or reserve personnel, but there are plans in the works to extend the service to veterans next year, Weiss said.

In the site's first week, a new user has signed up every 90 seconds, on average, and the RallyPoint user group has increased by 400 percent since the launch, Weiss said. They've watched as servicemen from privates to colonels have joined the networking site. Not only can RallyPoint users connect with civilian job opportunities before they transition out of the military, but they also can track career updates of their military connections and discover PCS opportunities. When Weiss arrived at Harvard Business School, he had always thought the word "networking" had bad connotations, such as "he networked his way" through the military. "When I got into the private sector, that's how most of the world works," Weiss said. He reconnected with co-founder Aaron Kletzing at Harvard, after they both served the same tour in Iraq. They came up with the RallyPoint idea on the back of a napkin last year. Since then, they've taken money from their own pockets to create a demonstration website platform. Weiss left his former full-time job, and Kletzing postponed his last year of Harvard classes to focus on the project. But over the past year, they've also raised money and gained advisers, including Retired Gen. George Casey, former Army chief of staff. "I'm emailing and calling these four-star, three-star commanders, and it just blows my mind how supportive it's been and what a difference we can make," Weiss said. [Source: FayObserver.com article 19 Nov 2012 ++]

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Veteran Hearing/Mark-up Schedule:  Following is the current schedule of recent and future Congressional hearings and markups pertaining to the veteran community. Congressional hearings are the principal formal method by which committees collect and analyze information in the early stages of legislative policymaking. Hearings usually include oral testimony from witnesses, and questioning of the witnesses by members of Congress. When a U.S. congressional committee meets to put a legislative bill into final form it is referred to as a mark-up. Veterans are encouraged to contact members of these committees prior to the event listed and provide input on what they want their legislator to do at the event. Membership of each committee and their contact info can be found at http://www.congress.org/congressorg/directory/committees.tt?commid=svete. Missed House Veteran Affairs committee (HVAC) hearings can viewed at http://veterans.house.gov/in-case-you-missed-it. Text of completed Senate Veteran Affairs Committee (SVAC) hearings are available at http://www.gpo.gov/fdsys/browse/committee.action?chamber=senate&committee=va&collection=CHRG&plus=CHRG:

- **November 29, 2012.** House Committee on Veterans Affairs Subcommittee on Economic Opportunity will hold a hearing titled, "State Approving Agencies (SAA) Roles and Reviewing the Challenges of P.L. 111-377 Section 203." 10:00am in Cannon 334.

- **December 4, 2012.** HVAC, DAMA will conduct a hearing entitled "Wading through Warehouses of Paper: The Challenges of Transitioning Veterans Records to Paperless Technology."

[Source: Veterans Corner w/Michael Isam 29 Nov 2012 ++]
**WWII Vets Update 32:** Since the 1920s, schoolchildren have been taught that Rear Adm. Richard E. Byrd was the first man to fly over the North Pole in an airplane. Today, aviation historians are in almost universal agreement that Byrd's flight of the Josephine Ford on May 9, 1926, fell far short of the North Pole, and Byrd spent the rest of his life claiming he made it. On a quiet street in Shelton's Huntington section lives Ernest C. Stewart, 88, the last survivor of a super-secret flight in a B-29 Superfortress that flew over the North Pole on Oct. 16, 1946. The craft was an F-13, a variant of the B-29 that was modified for aerial photography. Stewart was part of the 46th Reconnaissance Squadron, and acted on this flight as an observer. One of the squadron's assignments was to figure out how to fly and navigate in polar regions. "It was just a routine flight, and I was wondering most of the time what would happen if we had to make an emergency landing," Stewart said. "It was about eight to 10 hours each way."

He said the B-29 used for the polar flight was known as the "Dreamboat Model." It was little more than a flying fuel tank and was able to stay aloft for more than 30 hours. One, in fact, flew nonstop from Honolulu to Cairo in 39 hours; it took off with 13,400 gallons of fuel. "I stayed awake the whole time," he said. "When we passed over the pole, the officers made the announcement," he said. "I looked down. No Santa Claus." The crew was using a new grid navigation system that was developed by the Air Force for flying in the polar regions. "This flight, more than any other, proved the workability of the grid system," he said. "For the first time, we could fly throughout the Arctic and know where we were at all times." At the time, all 14 on board assumed that they were just the second airplane to fly over the pole. Outside of military circles, there was almost no recognition of the flight. "Everything the unit did was classified as top secret," said Ken White, who wrote about the exploits of the 46th and 72nd Recon Squadrons in his book, "World in Peril." White's father, Maj. Maynard E. White, was the commander of the B-29 that made the polar flight.

Ernest Stewart, who was part of a B-29 crew that flew over the North Pole in 1946

Also aboard was Paul A. Siple, who as a Boy Scout, accompanied Byrd on two expeditions to Antarctica, in 1928-30 and 1933-35. He also wrote the book "90 Degrees South," a favorite of boys growing up in the 1960s. He is best known for his scientific work on survival in polar regions and helped develop what is known today as the wind chill factor. Stewart's B-29 flight was technically the second verified aircraft to fly over the pole, but the first airplane to do so. On May 11-14, 1926, the airship Norge, in what is also known as the Amundsen-Ellsworth-Nobile Transpolar Flight, floated from Kings Bay, Spitsbergen, to Teller, Alaska, crossing the pole en route. Aboard was
Roald Amundsen, the first man to reach the South Pole, on Dec. 14, 1911. The flight to the North Pole was not Stewart's only aviation adventure. He survived three heavy bomber crashes,

- **The first** during World War II as a nose gunner in a B-24 that was badly damaged by anti-aircraft fire while over what was then Japanese-controlled Formosa, now Taiwan. "We started to make a turn toward the sea, and an anti-aircraft shell exploded maybe 100 feet in front of us," he said. "All I could see was one big orange flame." Two of the plane's four engines were dead, and the pilot was desperately trying to nurse the crippled craft back to Clark Field in the Philippines. Instead, he had to ditch near Laoag, about 300 miles north of Clark Field. All were rescued and survived. "A few hours later, we were herded aboard a C-47 and flown unceremoniously back to Clark Field, where we arrived in time for supper," he said.

- **The second** crash occurred during the night of Feb. 20, 1947. Stewart was in a B-29, the Kee-Bird, while on a 20-hour flight from Ladd Air Force Base, outside of Fairbanks, Alaska. The craft lost its ability to steer and had to make a forced landing on the extreme northeastern coast of Greenland. It took three days before the crew of 11 was located and rescued. All survived relatively unscathed. "When we landed, we had no idea where we were," he said. "We could have been in Siberia, for that matter." Following standard procedures, all spy gear and all sensitive documents were destroyed by officers.

- **The third** crash, he said, changed his life. It was May 1947, and Stewart was in a B-29 that has just taken off from Ladd. Something went wrong, and the bomber, heavily loaded with fuel, smashed into a nearby hillside. Three crew members were dead, and Stewart was left with a broken neck and badly burned hands. "In fact, that was the very same plane that we used for the North Pole flight," Stewart said. "No name, just the tail number: 848." In a full body cast, he was flown to a hospital in Augusta, Ga., to recuperate for six months. "I had to wear the cast for four months, with holes cut for my face and ears, and there was no air conditioning," he said.

"The old saying that a dark cloud has a silver lining proved true," he said. "I met a beautiful blond nurse, Lt. Elaine Anderson, and we were married on Sept. 8, 1947." His wife, originally from Bridgeport, died in 2003. After leaving the Air Force, Stewart taught English for 13 years at Milford's Jonathan Law High School. He's lived in Huntington since 1969. "My students really weren't very interested in stories about my Air Force days," he said, including the one over the North Pole. [Source: Bridgeport Connecticut Post | John Burgeson | 20 Sep 2012 ++]
Saving Money: If you’re a merchant seeking profits, there’s only one way to find them: sell stuff for more than you pay for it. But what’s a fair markup? Fifty percent? One Hundred? Two? It depends on both product and business, but one thing’s for sure – some consumer goods are being sold for a whole lot more than they cost. Whether you’re sipping a martini in a swanky bar or bottled water from the grocery store, odds are you’re swallowing an astronomical markup. Twenty most overpriced products, in no particular order, and tips on how to spend less on them are:

- **Movie theater popcorn/candy.** Movie theater popcorn has an average markup of 1,275 percent. With a soda, that popcorn has a caloric equivalent of three McDonald’s Quarter Pounders? Nutrition aside, concessions like $5 tubs of popcorn and $6 boxes of gummy worms are big revenue streams for movie theaters. Since most theaters prohibit moviegoers from bringing in outside food and drinks, the way to save is to bypass concessions altogether. You can find your cinematic savings elsewhere, like getting a five-pack of movie tickets for $30 at [http://www.cinemadeals.com](http://www.cinemadeals.com).

- **Prescription drugs.** Astronomical prescription drug prices – with markups ranging from 200 to 3,000 percent – are enough to give patients a headache. In fact, price hikes caught the eye of Arizona’s Attorney General Tom Horne, who is suing pharmaceuticals distributor McKesson Corp. for markups on Allegra, Celebrex, Coumadin, Flonase, Lipitor, and Valium. To save on prescriptions, ask your doctor for free...
samples and about generic substitutes. Comparison-shopping is also a great idea. Walmart, Target, and warehouse stores like Costco are good places to start. And take advantage of mail-order suppliers like Express Scripts if your prescription-drug plan offers it. Check out 10 Tips to Safely Save on Prescriptions at http://www.moneytalksnews.com/2011/12/22/10-tips-to-safely-save-on-medicine/.

- **Diamonds.** Shoppers in the market for a diamond should be prepared to pay anywhere from 50 percent to 200 percent more than the wholesale cost, according to TheStreet.com. Information at this Google Answers page suggests markups range from 50 to 400 percent. A diamond’s sparkle may cause shoppers to turn a blind eye to the price tag, but you can land a better deal by understanding what you’re buying and doing a lot of shopping. Check out Guide to Buying Diamonds in 5 Simple Steps at http://www.moneytalksnews.com/2010/12/15/a-mans-guide-to-buying-diamonds-in-5-simple-steps/.

- **Bottled water.** Some claim bottled water’s markup reaches 4,000 percent – more expensive than gasoline. Saving is simple: drink tap water. If you’re concerned about taste or quality, use a water filtration system.

- **Salad bars.** Some salad bar items are marked up more than 350 percent, according to Food Network Magazine. Items that aren’t worth their weight: chickpeas (386 percent markup over retail), radishes (302 percent), and baby corn (277 percent). To save, load up on the lighter items that cost less than you’d pay at the grocery store, like bacon bits (55 percent markdown) and grilled chicken (44 percent).

- **Eyeglass frames.** Dishing out $450 for Armani frames? Markups for eyeglass frames can reach 1,000 percent. That’s certainly not unheard of. Fortunately, focusing on warehouse stores and the Internet can help you find discounts. For more ways to save up to 90 percent check out 8 Ways to Save on Eyeglasses at http://www.moneytalksnews.com/2012/07/06/8-ways-to-see-big-savings-on-eyeglasses/.

- **Soda.** Order a glass of Coke when you’re dining out, and you could pay 300 to 600 percent over cost. Sure, you know going into a restaurant that you’re paying for the service and ambiance too. But if you’re looking to save without sacrificing a night out, skip the extras like soda and opt for water instead.

- **Text messages.** Outgoing text messages on a cell phone can cost the provider three-tenths of a cent, but users up to 20 cents – that translates to a 6,000 percent markup. Some plans charge 10,000 times more for sending a text than other types of data. If you frequently send text messages, get an unlimited plan.

- **Wine/champagne.** It’s not uncommon for restaurants to charge two or even three times retail for a bottle of wine. Order by the glass, and you’re sipping on an item marked up as much as 400 percent. So scan the menu for a reasonably priced bottle (tip: look for house wines).

- **Hotel minibars.** Whether you’re reaching for a Snickers or a toothpaste kit, minibar markups can hit 400 percent. Some of the most ludicrous minibar prices, according to http://blog.oyster.com/four-outrageous-new-york-city-hotel-minibar-ripoffs-1990/: $14 gummy bears at Omni Berkshire Place and a $10 bottle of water at the Mansfield Hotel. Simple solution: Leave your room.

- **Coffee and tea.** Lattes are one of life’s little luxuries, but they can be marked up by 300 percent. If you’re looking to save, start by turning on your coffeemaker and bypassing the coffee shop.

- **Handbags.** Some of the world’s most expensive handbags: a $3.8 million purse made by The House of Mouawad in Dubai that’s adorned with more than 4,000 colorless diamonds and a $1.9 million Hermes Birkin bag. Women own an average of 10 handbags and spend an average of $148 on a handbag “splurge,”
according to a ShopSmart poll. Keep more cash in your purse by comparison-shopping online and in outlet stores. For more tips, check out Finding Designer Accessories at Deep Discounts at http://www.moneytalksnews.com/2012/09/20/designer-accessories-at-deep-discounts-how-to/.

- **Designer jeans.** A $665 price tag on Gucci jeans and $225 for Sevens proves some shoppers are willing to go to great lengths for fashion. But these designer items are grossly overpriced. According to The Wall Street Journal, it costs about $50 to make True Religion’s best-selling jeans, Super T Jeans, but the wholesale price reaches $152 and the average retail price is inflated to $335.

- **Bakery goods.** For items that can easily be baked at home, you could be paying a 100 percent markup. Granted, convenience is a factor, and maybe a baker is a better cook than you. If so, a good cookbook could offer a decent return on investment.

- **Greeting cards.** Greeting cards are simple pieces of paper with a 200 percent markup. And that’s before factoring in so-called “Hallmark holidays.” On a budget? Make your own cards – or better yet, if you have school-aged children, have them design one. This will likely amount to a more sentimental gesture and will leave a lasting impression.

- **College textbooks.** Most college students will shell out about $655 for required textbooks this year, according to the National Association of College Stores. It’s no secret that most of these books come with monster markups. Read 11 Ways to Save Big on College Textbooks at http://www.moneytalksnews.com/2012/08/08/11-ways-to-save-big-on-college-textbooks/ for cost-cutting tips, from asking professors about coursework in advance to textbook rentals.

- **Flowers.** An orchid can cost up to $25 per stem. Add Valentine’s Day or a wedding into the mix, and prices can surge. While disregarding flower purchases altogether isn’t always an option, shopping around for the best price is. Check out online retailers, and buy in season to help cut costs.

- **Produce.** Produce is often marked up as much as 75 percent. Buying in season is the best way to find a bargain. As explained in Seasonal Savings at http://www.moneytalksnews.com/2012/09/19/the-best-time-to-save-on-everything/, look for deals on grapefruits and oranges in January, asparagus in March, and melons in May. Also steer clear of pre-cut veggies and fruit, which often have an additional markup of about 40 percent.

- **Furniture and mattresses.** Furniture stores usually make a hefty margin, with markups of about 80 percent. Try to shop during sales, but if your timing is off, don’t be afraid to negotiate a better price. Also take note of the product number and then search online to see if any other retailers offer a lower price.

- **Cosmetics.** The average markup on cosmetics: 78 percent. Since most cosmetics are made from various combinations of dirt, oil, wax, and fragrance, it’s surprising that shoppers pay such a premium. But thanks to anti-aging claims and celebrity-endorsed marketing, shoppers have been breaking the bank to look younger and more beautiful for years. Before purchasing heck out More Bang for Your Buck at http://www.moneytalksnews.com/2011/07/07/6-tips-save-beauty-products/.

[Source: MoneyTalksNews | Renee Morad | 26 Sep 2012 ++]

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Notes of Interest:

- **Oxytocin.** New research suggests if retired Army Gen. David H. Petraeus had gotten an occasional dose of supplemental oxytocin, a brain chemical known to promote trust and bonding, he might still be director of the Central Intelligence Agency.

- **Virginia Income Tax.** As required by the 2012-2014 Appropriations Act, there will be two options on 2012 returns for receiving individual income tax refunds – direct deposit or debit card. Both paper and software versions of the individual income tax returns will require that one of these two options be selected. Requesting a paper check in preference to direct deposit or a debit card will not be an option.

- **Medicare.** Once a year, Medicare participants have the ability to add or make changes to their Medicare plans. The enrollment period is now open. Your decision is important, so be sure to compare plans and consider coverage options under traditional Medicare, Medicare Advantage and prescription drug plans. Enrollees have through 7 DEC to make changes at http://www.medicare.gov or 1-800-MEDICARE.

- **Vet Foreclosures.** For a video discussion of illegal foreclosures of military and veteran homes check out http://www.youtube.com/watch?feature=player_embedded&v=norr2MQVtk#.

- **Military.** The suicide rate was higher in the military than the general population for the first time in 2012, with 30 incidents per 100,000, compared to 24 per 100,000 for a demographically comparable civilian population.

- **Guam Contamination.** To review a report of findings regarding 1980’s toxic chemical exposure at Andersen AFB Guam refer to http://dbiller112.wix.com/guamcontamination#.

- **Online Discounts.** A sneaky way to get discounts online is to shop sites and add anything you want to your cart. Proceed to check out and fill out enough of the form to enter in your email address. But don’t complete the sale. Wait a day or two and see if you get a special deal, discount, or other incentive in your email inbox as a follow-up.

- **Homeless Vets.** The House will likely consider H.R.6328 in NOV which, if passed, would give homeless veterans unclaimed clothing recovered at U.S. airports. The Clothe a Homeless Hero Act would direct the Transportation Security Administration (TSA) to transfer all unclaimed clothing recovered at airports to local veterans organizations or other local charitable organizations for distribution to homeless or needy veterans and their families.

[Source: Various 15-30 Nov 2012 ++]

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**Medicare Fraud Update 105:**

- **Sterling Heights MI** - An obstetrician/gynecologist Jonathan Agbebiyi, 63, has been sentenced to five years in prison and to pay nearly $3 million in restitution following his conviction for health care fraud. Agbebiyi joined a conspiracy to bill Medicare for unnecessary neurological tests, according to the U.S. Attorney's Office in Detroit. He was a staff physician at three clinics in Livonia that operated between 2007
and 2010. Some of the tests involved sending an electrical current through the arms and legs of patients. Clinic employees who lacked adequate training administered the diagnostic tests, and patients never received any follow-up treatment by neurologists, federal prosecutors said. According to evidence during Agbebiyi’s trial, the patients were not referred to the clinics by their primary care physicians, but were recruited with prescriptions for drugs, cash and fast food. The three clinics -- Blessed Medical Clinic, Alpha and Omega Medical Clinic, and Manuel Medical Clinic -- then billed Medicare for various, unnecessary diagnostic tests, prosecutors said. After a one-week trial, Agbebiyi was convicted on six counts of health care fraud, and one count of conspiracy to commit health care fraud. U.S. District Judge Arthur J. Tarnow sentenced him on 6 NOV to 60 months in prison followed by two years of probation, and to pay $2.98 million restitution. Overall, the scheme defrauded the Medicare program of $5.4 million.

- **Chicago IL** - Federal prosecutors are claiming a psychiatrist took illegal kickbacks from pharmaceutical companies and submitted at least 140,000 false claims to Medicare and Medicaid after prescribing antipsychotic medications to mentally ill nursing home patients. The U.S. Attorney's Office in Chicago filed a lawsuit 15 NOV against 69-year-old Dr. Michael Reinstein of Skokie. Prosecutors claim Reinstein also submitted 50,000 false claims to Medicare and Medicaid stating he provided "pharmacologic management" for patients at more than 30 area care facilities. Reinstein's office is in Chicago's Uptown neighborhood, which has the densest concentration of mentally ill nursing home residents in Illinois. Prosecutors say he prescribed drugs knowing pharmacies would submit claims to Medicaid and Medicare Part D, and got kickbacks from pharmaceutical companies. They say he over-prescribed clozapine, a drug with potentially serious side effects.

- **Miami FL** - A federal jury 15 NOV convicted a Miami-area program director and a Miami-area therapist for their participation in a Medicare fraud scheme involving more than $205 million in fraudulent billings by mental health care corporation American Therapeutic Corporation (ATC). Program director Lydia Ward, 47, and therapist Nichole Eckert, 35, were each found guilty of one count of conspiracy to commit health care fraud. The defendants were charged in an indictment returned on Feb. 8, 2011. ATC, the management company associated with ATC and 20 individuals, including the ATC owners, have all previously pleaded guilty or have been convicted at trial. Evidence at trial demonstrated that the defendants and their co-conspirators caused the submission of false and fraudulent claims to Medicare through ATC, a Florida corporation headquartered in Miami that operated purported partial hospitalization programs (PHPs) in seven different locations throughout South Florida and Orlando. A PHP is a form of intensive treatment for severe mental illness. The defendants and their co-conspirators also used a related company, American Sleep Institute (ASI), to submit fraudulent Medicare claims. ATC billed Medicare for hundreds of millions of dollars in false and fictitious services, for thousands of patients who were not qualified, based on fraudulent documents created by Ward, Eckert and others. Throughout the course of the fraud conspiracy, tens of millions of dollars in kickbacks were paid in exchange for Medicare beneficiaries, who did not qualify for PHP services, to attend treatment programs that were not legitimate PHP programs. ATC and ASI billed Medicare for more than $205 million in services to patients who did not need the services and to whom the appropriate services were not provided. According to the evidence, Ward, Eckert, and co-conspirators personally altered and caused the alteration of patient files and therapist notes for the purpose of making it appear, falsely, that patients being treated by ATC were qualified for PHP treatments and that the treatments provided were legitimate PHP treatments. Evidence further revealed that doctors at ATC signed patient files without reading them or seeing the patients. Included in these false and fraudulent submissions to Medicare were claims for patients in neuro-vegetative states, along with patients who were in the late stages of diseases causing permanent cognitive memory loss and patients who were suffering from substance abuse addiction without a severe mental illness – all of whom were ineligible for PHP treatment.
• **New York NY** - Two Brooklyn residents have pleaded guilty in a $71 million scheme to defraud Medicare. Katherina “Katya” Kostiochenko, 34, and Sergey Shelikhov, 51, pleaded guilty in U.S. District Court in Brooklyn to conspiracy to commit health care fraud. Kostiochenko also pleaded guilty to health care fraud and conspiracy to pay kickbacks. A co-conspirator, Leonid “Lenny” Zheleznyakov, 28, pleaded guilty 27 NOV to one count of conspiracy to commit health care fraud. Court documents said the three were employees of a Brooklyn clinic that paid cash kickbacks to Medicare beneficiaries. They also used the beneficiaries’ names to bill Medicare for more than $71 million in services that were unnecessary or never provided. They were arrested in the takedown of a health care fraud ring that snared a dozen people, including doctors. The suspects allegedly worked with people posing as patients to defraud Medicare of more than $95 million, officials said. WCBS 880 reporter Irene Cornell said last year that, according to federal officials, several doctors worked with members of the health care fraud ring, who would pose as patients. They would submit phony health care claims for nonexistent ailments to Medicare. According to the indictments, those involved provided services such as massages, facials, lunches and dancing classes to Medicare beneficiaries to get them to allow their Medicare numbers to be billed for medical services that were never provided and not medically necessary. Kostiochenko faces up to 25 years in prison and Shelikhov and Zheleznyakov both face up to 10 years in prison.

[Source: Fraud News Daily 15-30 Nov 2012 ++]

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**Medicaid Fraud Update 75:**

• **East Orange NJ** - The New Jersey Office of the State Comptroller (OSC) is seeking recoveries from a dental practice that forged Medicaid reimbursement documents to conceal that its owner, who was no longer physically able to treat patients, who had been replaced with a dentist who was debarred from the Medicaid program. Anicia Cruz-Sledge assumed control of the Gentle Dental Group in East Orange in 2007 after her husband, the owner and primary dentist for the practice, suffered a medical condition that left him incapacitated and no longer able to treat patients, according to a notice filed by the OSC's office.

The investigation by OSC's Medicaid Fraud Division found that Gentle Dental submitted Medicaid reimbursement claims using the individual Medicaid provider number of her husband, Edward Sledge, DMD; signatures purporting to be from Dr. Sledge; and certification forms stating that Dr. Sledge had performed the medical services in question. However, those services were actually provided by Carl McGloster, DDS, a dentist hired by Cruz-Sledge to treat patients at the dental practice although he was debarred from participating in the Medicaid program. According to the OSC, Cruz-Sledge admitted to OSC investigators that she signed her husband's name on the reimbursement claim forms submitted to the state even though her husband did not treat the patients. OSC investigators also determined that Cruz-Sledge continued to order new prescription pads under her husband's name long after he became incapacitated. Dr. McGloster issued 290 prescriptions to Medicaid patients utilizing Dr. Sledge's prescription pad, including 63 prescriptions for controlled dangerous substances, the OSC claims. Dr. McGloster was not legally authorized to treat Medicaid patients or apply for Medicaid reimbursements for any such treatment.

Cruz-Sledge also admitted to performing dental assistant and hygienist services without possessing the required state licenses. Two other dentists who were not approved to provide services to Gentle Dental Medicaid patients also were hired by Cruz-Sledge and provided such services. All Medicaid payments to Gentle Dental were suspended by OSC in March 2012. OSC is seeking from the company more than $1.3 million for improperly reimbursed claims, damages, and penalties. The OSC also is seeking more than $510,000 from Dr. McGloster personally for improper Medicaid claims. According to the OSC, Dr. McGloster wrote a total of 427 prescriptions to Medicaid patients while excluded from the Medicaid program.

[Source: Fraud News Daily 15-30 Nov 2012 ++]
State Veteran's Benefits: The state of Iowa provides several benefits to veterans as indicated below. To obtain information on these refer to the "Veteran State Benefits – I" attachment to this Bulletin for an overview of the benefits listed below. Benefits are available to veterans who are residents of the state.

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


Military History: On 7 August 1942, Allied forces (primarily U.S. Marines) landed on Guadalcanal, Tulagi, and Florida Islands in the Solomon Islands. Their mission was to deny the Japanese use of the islands as bases for threatening the supply routes between the U.S. and Australia, and to secure the islands as starting points for a campaign to isolate the major Japanese base at Rabaul while also supporting the Allied New Guinea campaign.

The landings initiated the six-month-long Guadalcanal Campaign. The Japanese were taken by surprise, and by nightfall on 8 August the 11,000 Allied troops—under the command of Lieutenant General Alexander Vandegrift—secured Tulagi and nearby small islands as well as an airfield under construction at Lunga Point on Guadalcanal. The Allies later renamed the airfield Henderson Field. To protect the airfield, the U.S. Marines established a perimeter defense around Lunga Point. Additional reinforcements over the next two months later increased the number of U.S. troops at Lunga Point on Guadalcanal to more than 20,000.

In response to the Allied landings on Guadalcanal, the Japanese Imperial General Headquarters assigned the Imperial Japanese Army's 17th Army—a corps-sized command based at Rabaul and under the command of Lieutenant-General Harukichi Hyakutake—with the task of retaking Guadalcanal. Units of the 17th Army began to arrive on Guadalcanal on 19 August to drive Allied forces from the island. The first Japanese attempt to recapture Henderson Field failed when a 917-man force was defeated on 21 August in the Battle of the Tenaru. The next attempt took place from 12-14 September, ending in the defeat of the 6,000 soldiers under the command of Major General Kiyotake Kawaguchi at the Battle of Edson's Ridge. Kawaguchi and the surviving Japanese troops then regrouped west of the Matanikau River on Guadalcanal.

Carlson's patrol, also known as The Long Patrol or Carlson's long patrol, was an operation by the 2nd Marine Raider Battalion under the command of Lieutenant Colonel Evans Carlson against the Imperial Japanese Army from 6 November through 4 December 1942. In the operation, the 2nd Raiders attacked forces under the command of Colonel Toshinari Shoji’s 230th Infantry Regiment forces, which were escaping from an attempted encirclement in the Koli Point area on Guadalcanal and attempting to rejoin other Japanese army units on the opposite side of the U.S. Lunga perimeter. In a series of small unit engagements over 29 days, the 2nd Raiders killed almost 500 Japanese soldiers while suffering only 16 killed. The raiders also captured a Japanese artillery cannon that was delivering harassing gunfire on Henderson Field, the Allied airfield at Lunga Point on Guadalcanal. A summary of the action seen by this patrol and the impact it had on the overall Guadalcanal campaign is included in the attachment to this Bulletin titled, "The Long Patrol". [Source: http://en.wikipedia.org/wiki/Carlson%27s_patrol Nov 2012 ++]
Military History Anniversaries:  Significant December events in U.S. Military History are:

- Dec 01 1918 – WWI: An American army of occupation enters Germany.
- Dec 01 1959 – Cold War: Opening date for signature of the Antarctic Treaty, which sets aside Antarctica as a scientific preserve and bans military activity on the continent.
- Dec 01 1964 – Vietnam: U.S. President Lyndon B. Johnson and his top-ranking advisers meet to discuss plans to bomb North Vietnam.
- Dec 01 1969 – Vietnam: America’s first draft lottery since 1942 is held.
- Dec 02 1943 – WW2: A Luftwaffe bombing raid on the harbor of Bari, Italy, sinks numerous cargo and transport ships, including an American Liberty ship, the John Harvey, with a stockpile of World War I-era mustard gas.
- Dec 02 1944 – WW2: General George S. Patton’s troops enter the Saar Valley and break through the Siegfried line.
- Dec 03 1775 – The USS Alfred became the first vessel to fly the Grand Union Flag (the precursor to the Stars and Stripes); the flag is hoisted by John Paul Jones.
- Dec 03 1950 – Korea: The Chinese close in on Pyongyang, Korea, and UN forces withdraw southward. Pyongyang falls 2 days later.
- Dec 03 1942 – WW2: U.S. planes make the first raids on Naples, Italy.
- Dec 05 1943 – WW2: U.S. Army Air Force begins attacking Germany's secret weapons bases in Operation Crossbow
- Dec 05 1944 – WW2: Allied troops occupy Ravenna.
- Dec 06 1941 – WW2: President Franklin D. Roosevelt issues a personal appeal to Emperor Hirohito to use his influence to avoid war.
- Dec 07 1862 – Civil War: Battle of Prairie Grove, Arkansas.
- Dec 07 1917 – WWI: The United States declares war on Austria–Hungary with only one dissenting vote in Congress.
- Dec 07 1941 – WW2: Japanese attack Pearl Harbor without a declaration of war and land forces in Northern Borneo.
- Dec 07 1942 – WW2: The U.S. Navy launches USS New Jersey, the largest battleship ever built.
- Dec 08 1861 – Civil War: CSS Sumter captures the whaler Eben Dodge in the Atlantic. The American Civil War is now affecting the Northern whaling industry.
- Dec 08 1941 – WW2: Roosevelt declares war on Japan noting the previous day’s events mark it as a date that will live in infamy.
- Dec 08 1944 – WW2: The United States conducts the longest, most effective air raid on the Pacific island of Iwo Jima.
- Dec 09 1775 – American Revolution: British troops lose the Battle of Great Bridge, and leave Virginia soon afterward.
- Dec 09 1835 – The Texan Army captures San Antonio, Texas.
- Dec 09 1941 – WW2: The 19th Bombardment Group attacks Japanese ships off the coast of Vigan, Luzon
- Dec 09 1950 – Cold War: Harry Gold gets 30 years imprisonment for passing atomic bomb secrets to the Soviet Union during World War II.
- Dec 09 1992 – Operation Restore Hope: U.S. Marines land in Somalia to ensure food and medicine reaches the deprived areas of that country.
- Dec 10 1898 – Spanish American War: The U.S. and Spain sign the Treaty of Paris, ending the war and ceding Spanish possessions, including the Philippines, to the United States.
Dec 10 1941 – WW2: Japanese troops invade the Philippine island of Luzon.

Dec 11 1862 – Civil War: Union General Ambrose Burnside occupies Fredericksburg and prepares to attack the Confederates under Robert E. Lee. The battle ends two days later with the bloody slaughter of onrushing Union troops at Marye’s Heights.

Dec 11 1941 – WW2: Germany and fascist Italy declare war on America. The U.S. reciprocates.

Dec 12 1863 – Civil War: Orders are given in Richmond, Virginia, that no more supplies from the Union should be received by Federal prisoners.

Dec 13 1775 – The Continental Congress authorizes the building of 13 frigates.

Dec 13 1774 – Mass militiamen successfully attacked arsenal of Ft. William and Mary.

Dec 15 1864 – Civil War: In the Battle of Nashville, Union forces under George H. Thomas almost completely destroy the Army of Tennessee under John B. Hood.

Dec 15 1942 – WW2: The Battle of Mount Austen, the Galloping Horse, and the Sea Horse begins during the Guadalcanal campaign.

[Source: Various Nov 2012 ++]

Military Trivia 63: The Great War

Questions
1. Which was NOT part of the Triple Alliance? Germany, Italy, Austria, or Russia.
2. Which wasn’t in the Triple Entente? France, United States, Britain, or Russia.
3. Which was the name of the Archduke of Austria who was assassinated on June 28, 1914 that was the “spark” that started the war? Sergei Hunera, Franz Ferdinand, Adolf Hitler, or Samuel Lemar.
4. What was the name of his assassin? Rustavia, Grintec, Princip, or Vladimir.
6. What was the name of the war plan Germany had developed in 1905? Hindenburg, Kaiser, Moltke or Schlieffen.
7. In January of 1917, General Plumer ordered his men to dig 20 tunnels, he got a whole lot more than 20 tunnels. How many were actually dug? 270, 999, 3,500, or 6,000.
8. What was the name of the ultra long range gun that was developed by the Germans and was used in WW1? Italy gun, Paris gun, Gatling gun, or Machine gun.
9. What was the deadliest type of poison gas used in WW1? Chlorine, Mustard, Tear, or Laughing.
10. What was the name of the first tank developed in the war? Little Willie, Large Tom, Big Bertha, or Small Sally.
11. Who was the most famous German fighter pilot of WW1?
12. Who was the most famous American pilot?
13. What British passenger liner was sunk in 1915? Lusitania, Coal, Titanic, or The Sydney.
14. Which French ship was torpedoed and nearly sunk in March 1916? Normandie, Lusitania, Sussex, or The Pinto.
15. Who was the Republican candidate in the election of 1916 trying to beat Wilson? Phillips, Redman, Downy, or Hughes.
16. Who was the German foreign minister in 1916-17? Jakob, Arthur, Edmund, or Walter Zimmermann.
18. What word did Americans use during WW1 to replace anything German to show their dislike of the Germans? For example German measles became __________ measles.
19. Who was the head of the US food administration? Hoover, Roosevelt, Cleveland, or Carter.
20. Which offensive was a major American victory? Tet, Argonne, Wilson, or Maginot.
21. What was the date of Armistice Day?
22. Who was the British diplomat involved in the Big Four? Clemenceau, Orlando, Lloyd George, or Wilson.
23. What were American soldiers called during WW1?
24. If you wanted to be a WW1 fighter pilot and have the distinction of being an ace just how many planes would you have to shoot down?
25. Who was the US president at the start of WW1? Coolidge, Truman, Wilson, or Roosevelt.

**ANSWERS:**

1) Russia - In fact, Italy never fought for the Triple Alliance. Initially, it remained neutral then joined the war in 1915 on the side of Triple Entente.

2) United States - Entente means 'understanding, agreement' in French. The Triple Entente was also known as the Allied Powers during WW1.

3) Franz Ferdinand - It was on June 28, 1914, in the town of Sarajevo. The three Black Hand assassins at Savajevo were all teenagers suffering from tuberculosis.

4) Gavrilo Princip - He was part of the Black Hand group. It was a secret society of Serbian nationalists.

5) 1917 - The Russian monarchy had just been overthrown in the Russian Revolution of March 1917 when the US entered the war.

6) The Schlieffen Plan - Germany planned to invade quickly and knock France out of the war in six weeks before fighting Russia. Too bad it didn't work.

7) 6,000 - The technique of tunneling was used to dig underground until troops were under enemy trenches, then they would load in the explosives, run and detonate them.

8) Paris gun - It could fire at targets 75 miles away, but it wasn't very accurate at that range.

9) Mustard gas - Of the various types of gas used in World War I, mustard gas had the highest rate of fatalities per soldier affected. Poison gas was banned from warfare in 1925.

10) Little Willie - It was developed by the British and it went at 3 mph.

11) Red Baron - He shot down 80 planes.

12) Eddie Rickenbacker - He shot down 26 planes.

13) The Lusitania - It had Americans on board. It was, at that time, second to the Titanic in the loss of lives. From the German point of view the sinking of this ship was a propaganda disaster.

14) The Sussex - Wilson obtained the Sussex Pledge from Germany as a result of this incident. He told Germany if they sank another passenger ship the U.S. would join the war. Early in 1917 Germany adopted a policy of unrestricted submarine warfare and repudiated the Sussex Pledge.

15) Hughes - He lost. Wilson had 49% and Hughes had 46% of the vote.

16) Arthur Zimmermann - He sent a telegram to Mexico trying to get them to join the war.

17) Selective Service Act - It drafted men ages 21-31 and then began to draft ages 18-45.

18) Liberty - They also used liberty for non-German words such as liberty loans and liberty gardens.

19) Herbert Hoover - He saved food in America and sent it to the troops. He used this later to help him win the election of 1928.

20) Argonne Offensive - America lost a lot of troops in this battle due to their inexperience.

21) November 11, 1918 - It came into effect at 11:00hrs - the 11th hour of the 11th day of the 11th month.

22) Lloyd George - The other three were: Clemenceau (France), Wilson (United States), and Orlando (Italy).

23) Doughboys - There are many myths as to why they were called this but two of these myths are that the soldiers ate a lot of donuts & another possibility is they used a "playdough" type substance to clean their clothes.

24) Five - The pilots in WW1 only lived about for six weeks due to the dangerous aspect of their jobs. They often took bombs with them in their planes, they would light them in the air and then they would pick them up and drop them towards their intended target.

25) Wilson - Wilson tried to make the League of Nations in order to prevent future wars, but his plans didn't work, especially as the U.S. didn't join.

Tax Burden for Pennsylvania Retirees: 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 Pennsylvania:

**Sales Taxes**
- **State Sales Tax:** 6% (food, clothing, text books, heating fuels, prescription and non-prescription drugs exempt)
- **Other taxing entities may add up to 2%**.
- **Gasoline Tax:** 32.2 cents/gallon
- **Diesel Fuel Tax:** 39.2 cents/gallon
- **Cigarette Tax:** $1.60/pack of 20

**Personal Income Taxes**
- **Tax Rate Range:** Flat rate of 3.07%
- **Personal Tax Exemptions:** None
- **Standard Deduction:** None
- **Medical/Dental Deduction:** None
- **Federal Income Tax Deduction:** None
- **Retirement Income Taxes:** Retirement income is not taxed after age 59 1/2 if the person has reached retirement, based on years of service or age. Retired means meeting the requirements of a Pennsylvania eligible plan and separated from service by retiring. Eligible employer-sponsored retirement plans can, but do not necessarily, include employer-sponsored deferred compensation plans; 401(k) plans, thrift plans, thrift savings plans, and eligible welfare plans. Income not taxed includes Social Security benefits and Railroad Retirement benefits; commonly recognized pension, old age retirement benefits paid after becoming eligible to retire, and then retiring. It also includes United Mine Workers’ pensions, military pensions, and civil service annuities. For more information refer to [https://revenue-pa.custhelp.com/app/answers/detail/a_id/466](https://revenue-pa.custhelp.com/app/answers/detail/a_id/466).

**Retired Military Pay:** As long as you retire from the military with either years of service or age, your retirement income is not taxable.

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

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

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

**Property Taxes**
Property taxes are levied by local governments (counties, municipalities and school districts). The tax cannot exceed 30 mills on the assessed valuation of the property without special permission from the courts. Households with claimants or spouses 65 years of age or older, widows or widowers 50 years of age or older and the permanently disabled 18 years of age or older meeting income eligibility requirements may qualify for this program. Rebates of paid property tax or rent, up to a maximum of $975 per year, are available. To qualify, annual
household eligibility income must not exceed $35,000. Applicants can exclude, as income, one-half of Social Security, Supplemental Security Income and Railroad Retirement Tier 1 benefits. The Property Tax/Rent Rebate program [http://www.papropertytaxrelief.com/?f] allows residents to exclude 50% of Social Security payments and 50% of Railroad Retirement benefit payments from eligibility income. The maximum rebate is $650. Counties may levy an intangible personal property tax, which taxes stocks, bonds and other personal property taxpayers may own. Not all counties levy this tax. For more details refer to http://www.governor.state.pa.us/portal/server.pt/community/expanded_relief_for_seniors/3071.

**Inheritance and Estate Taxes**
The Pennsylvania inheritance tax is calculated at a percentage of the value of the assets transferred which is determined by the relationship of the heir to the decedent and the decedent’s date of death. The tax rate is 4.5% for transfers to direct descendants (lineal heirs), 12% for transfers to siblings, and 15% for transfers to other heirs (except charitable organizations, exempt institutions, and government entities). Property owned jointly between husband and wife is exempt from the tax, while property inherited from a spouse, or from a child 21 or younger by a parent is exempt. The estate tax is related to federal estate tax collection.

For further information, visit the Pennsylvania Department of Revenue site http://www.revenue.state.pa.us/portal/server.pt/community/revenue_home/10648 or call 717-787-8201. [Source: http://www.retirementliving.com Nov 2012 ++]

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**Aviation Art (18):**

- *Phantom Strike* by Robert Taylor
Phantoms attack the steel mills at Thai Nguyen on March 30, 1967. Shown are Robin Olds and his two wingmen seconds after the strike. Clearing the target all three F-4s let down to the deck as they hurtle through another onslaught of intense, accurate ground fire and flak. The two lead aircraft collect hits as they exit the area - number three miraculously escaping unscathed. [Source: http://www.brooksart.com/PhantomstrikeG.html Nov 2012 ++]

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Mobilized Reserve 27 NOV 2012: The Department of Defense announced the current number of reservists on active duty as of 27 NOV 2012. The net collective result is 2197 fewer reservists mobilized than last reported in the 1 NOV 2012 RAO Bulletin. At any given time, services may activate some units and individuals while deactivating others, making it possible for these figures to either increase or decrease. The total number currently on active duty from the Army National Guard and Army Reserve is 42,175; Navy Reserve 4,594; Air National Guard and Air Force Reserve 8,970; Marine Corps Reserve 2,563; and the Coast Guard Reserve 661. This brings the total National Guard and Reserve personnel who have been activated to 58,962 including both units and individual augmentees. Since 911 there have been 803,934 reservists deactivated. A cumulative roster of all National Guard and Reserve personnel who are currently activated may be found online at http://www.defense.gov/news/MobilizationWeeklyReport112812.pdf. [Source: DoD News Release No. 931-12 dtd 28 Nov 2012 ++]

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Veteran Legislation Status 27 NOV 2012: For a listing of Congressional bills of interest to the veteran community introduced in the 112th Congress refer to the Bulletin’s “House & Senate Veteran Legislation” attachment. Support of these bills through cosponsorship by other legislators is critical if they are ever going to move through the legislative process for a floor vote to become law. A good indication on that likelihood is the number of cosponsors who have signed onto the bill. Any number of members may cosponsor a bill in the House or Senate. At http://thomas.loc.gov you can review a copy of each bill’s content, determine its current status, the committee it has been assigned to, and if your legislator is a sponsor or cosponsor of it. To determine what bills, amendments your representative has sponsored, cosponsored, or dropped sponsorship on refer to http://thomas.loc.gov/bss/d111/sponlst.html.

Grassroots lobbying is perhaps the most effective way to let your Representative and Senators know your opinion. Whether you are calling into a local or Washington, D.C. office; sending a letter or e-mail; signing a petition; or making a personal visit, Members of Congress are the most receptive and open to suggestions from their constituents. The key to increasing cosponsorship on veteran related bills and subsequent passage into law is letting legislators know of veteran’s feelings on issues. You can reach their Washington office via the Capital Operator direct at (866) 272-6622, (800) 828-0498, or (866) 340-9281 to express your views. Otherwise, you can locate on http://thomas.loc.gov/bss/d111/sponlst.html your legislator’s phone number, mailing address, or email/website to communicate with a message or letter of your own making. Refer to http://www.thecapitol.net/FAQ/cong_schedule.html for dates that you can access your legislators on their home turf. [Source: http://www.loc.gov Nov 2012 ++]

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Have You Heard? BMCM Harris, USN (Ret)
BMCM Harris did his 30 years (mostly sea duty) and retired. Because of his prolonged absences his wife wanted them to spend time together and insisted that he accompany her on her trips to Target.

Unfortunately, like most men, he found shopping boring and preferred to get in and get out. Equally unfortunate, his wife, like most women, loved to browse leaving him to his own device to amuse himself until she was done. Eventually, his wife received the following letter from the local Target:

Dear Mrs. Harris,

Over the past six months, your husband has caused quite a commotion in our store. We cannot tolerate this behavior and have been forced to ban both of you from the store. Our complaints against your husband, Mr. Harris, are listed below and are documented by our video surveillance cameras:

1. June 15: He took 24 boxes of condoms and randomly put them in other people’s carts when they weren’t looking.

2. July 2: Set all the alarm clocks in Housewares to go off at 5-minute intervals.

3. July 7: He made a trail of tomato juice on the floor leading to the women’s restroom.

4. July 19: Walked up to an employee and told her in an official voice, ‘Code 3 in Housewares. Get on it right away’. This caused the employee to leave her assigned station and receive a reprimand from her Supervisor that in turn resulted with a union grievance, causing management to lose time and costing the company money.

5. August 4: Went to the Service Desk and tried to put a bag of M&Ms on layaway.

6. August 14: Moved a ‘CAUTION - WET FLOOR’ sign to a carpeted area.

7. August 15: Set up a tent in the camping department and told the children shoppers they could come in if they would bring pillows and blankets from the bedding department to which twenty children obliged.

8. August 23: When a clerk asked if they could help him he began crying and screamed, ‘Why can’t you people just leave me alone?’ EMTs were called.

9. September 4: Looked right into the security camera and used it as a mirror while he picked his nose.

10. September 10: While handling guns in the hunting department, he asked the clerk where the antidepressants were.

11. October 3: Darted around the store suspiciously while loudly humming the ‘Mission Impossible’ theme.

12. October 6: In the auto department, he practiced his ‘Madonna look’ by using different sizes of funnels.

13. October 18: Hid in a clothing rack and when people browsed through, yelled ‘PICK ME! PICK ME!’

14. October 22: When an announcement came over the loud speaker, he assumed the fetal position and screamed ‘OH NO! IT’S THOSE VOICES AGAIN!’

15. Took a box of condoms to the checkout clerk and asked where is the fitting room?
And last, but not least:

16.October 23: Went into a fitting room, shut the door, waited awhile, and then yelled very loudly, 'Hey! There's no toilet paper in here!' One of the clerks passed out.

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**Naval Lingo:** **Goat Locker.** Entertainment on liberty took many forms, mostly depending on the coast and opportunity. One incident which became tradition was at a Navy-Army football game. In early sailing years, livestock would travel on ships, providing the crew the fresh milk, meats, and eggs, as well as serving as ships' mascots. One pet, a goat named El Cid (meaning Chief) was the mascot aboard the USS New York. When its crew attended the fourth Navy-Army football game in 1893, they took El Cid to the game, which resulted in the West Pointers losing. El Cid (The Chief) was offered shore duty at Annapolis and became the Navy's mascot. This is believed to be the source of the old Navy term, "Goat Locker".

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In my many years I have come to a conclusion that one useless man is a shame, two is a law firm, and three or more is a congress.

--- **John Adams** (1725-1826 Second president of the United States)

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“GLAD YOU’RE SITTING DOWN. LISTEN, I MAY HAVE SAID SOMETHING AGAIN TODAY...”

RIP TWINKIES

Forward!
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