

> RAO Bulletin Update

> 1 December 2007

>

>

> THIS BULLETIN CONTAINS THE FOLLOWING ARTICLES

> == CA Vet Homeowner ----- (Foreclosure Problem)

> == VA Retro Pay Project [10] ----- (Deadline Missed)

> == Wreaths Across America ----- (National Campaign)

> == VA Data Breaches [39] ----- (Indianapolis Med Ctr)

> == VA Data Breaches [40] ----- (VA Auditor Theft)

> == VA Data Breaches [41] ----- (Lawsuit Mediation)

> == Legislation of Interest [08] ----- (COLA/ Suicide Measures)

> == Legislation of Interest [09] ----- (NDAA & Medicare)

> == CA Chula Vista Vet Home ----- (Construction Concerns)

> == Mobilized Reserve 28 NOV 07 ----- (Net Decrease 2022)

> == Veteran Charities Review [02] ----- (VVA Solicitation)

> == Social Security Myths] ----- (Insolvency)

> == Nursing Homes [04] ----- (CMS Worst List)

> == VA Facility Expansion [11] ----- (Las Vegas Vet Hospital)

> == Agent Orange Lawsuits [11] ----- (VA Win-Win Maneuver)

> == VA Claim Backlog [13] ----- (No Improvement FY 07)

> == Medicare [05] ----- (Long Term Cost Outlook)

> == Vista Business Concerns ----- (Microsoft Image Impacted)

> == Tricare Prime [02] ----- (New Website Options)

> == PTSD [16] ----- (PTSD & Asthma Link)

> == Overseas Holiday Mail [01] ----- (2007 1st Class Deadline)

> == Shingles [04] ----- (Tricare Vaccination Coverage)

> == VA Hospice Care [01] ----- (Patients Living Longer)

> == VA Claim Representation [04] ----- (Gratis Assistance)

> == DFAS 2008 COLA Pmts ----- (Pay Adjustments)

> == Pennsylvania VSO Support ----- (\$450K State Funding)

> == VA Benefits Video ----- (Video News Magazine)

> == Retirement Tax Considerations [03] ---- (Inheritance/Estate)

> == CA/Fed Disabled Benefits (0% SC) ----- (Entitlement List)

> == CA/Fed Disabled Benefits (10% SC) ----- (Entitlement List)

> == Veteran Legislation Status 29 NOV 07---- (Where We Stand)

>

>

> Editor's Note: I have returned to the United States and can be reached at (760) 839-9003 until further notice.

>

>

> How Much Is A Billion?

> ---A billion hours ago, humans were making their first tools in the Stone Age.

> ---A billion minutes ago, it was 104 A.D. and the Chinese first invented paper.

> ---A billion seconds ago, it was 1975 and the last American troops had pulled out of Vietnam.

> ---A billion dollars ago, it was only 3 HOURS and 32 MINUTES at the rate our government spends money.

>

>

> CA VET HOMEOWNER OPTIONS: Governor Arnold Schwarzenegger on 29 NOV launched a public awareness campaign to educate homeowners about options that can help them avoid losing their homes to foreclosure. The message he wants to get to California veterans and other homeowners is that lenders are willing to work with borrowers on finding a solution. "Some of these homes could have been saved, but right now we are seeing homeowners who are afraid to even talk with lenders. In fact, loan officials have not been able to reach borrowers in more than half of all foreclosures", he said. The \$1.2 million campaign - funded through existing consumer education efforts within the Business, Transportation and Housing Agency and the State and Consumer Services Agency - will:

> . Inform borrowers about their options.

> . Urge borrowers to work with lenders before foreclosure.

> . Encourage the use of nonprofit housing counselors.

> . Partner with local leaders and trusted organizations, like churches and community groups, to spread the message.

>

> To assist California's veterans and active military personnel who are at risk of foreclosure, the Governor directed the state's Department of Veterans Affairs to work with his non-traditional mortgage task force to address this issue. The group will explore ways the CalVet Home Loan program can provide a fixed rate CalVet loan to active military personnel and veterans who qualify and currently have subprime loans. A half million Californians have subprime loans that will jump to higher rates within the next two years. Seven of the top sixteen metropolitan areas with the highest rates of foreclosures in the nation are in California, according to the latest data from RealtyTrac. Earlier this month, Governor Schwarzenegger announced an agreement with four loan servicers - representing 25% of the market - to streamline the loan modification process for subprime borrowers living in their home, making timely payments and likely to default when their loan jumps to a scheduled higher rate. All lenders are asked to subscribe to that agreement, which may be found at <http://www.corp.ca.gov/notices/subprime.html>. Additional resources available for homeowners are:

> . The "HOPE Hotline" (1-888-995-HOPE or <http://www.995hope.org/>), which provides free mortgage counseling 24 hours a day, seven days a week.

> . A website with helpful information for prospective homebuyers, as well as homeowners who are experiencing difficulty in keeping payments current: <http://www.yourhome.ca.gov/> and the Spanish language version: <http://www.sucasa.ca.gov/>.

> [Source: Imperial Valley News Finance Desk article 29 Nov 07 ++]

>

>

> VA RETRO PAY PROJECT UPDATE 10: Many retirees have been frustrated for months by a lack of information on the VA Retro Pay program coming from the Defense Finance and Accounting Service (DFAS). And for some this frustration turned to anger when a 15 NOV self-imposed deadline for DFAS was not attained. The deadline was to complete a review of pay records for 133,000 disabled retirees, that original pool of retirees potentially eligible for retroactive "concurrent receipt" payments was missed without explanation. The retro pay program, which so far has paid catch-up amounts worth \$200 million to disabled retirees, has been marred by several missed deadlines and shoddy communication. But those failings will be addressed, a senior DFAS official vowed in a 28 NOV interview with Military Update. Monies due retirees resulted from a period when DFAS and the Department of Veterans

Affairs were still debating how to implement Combat-Related Special Compensation (CRSC) and Concurrent Retirement and Disability Pay (CRDP). The laws were enacted in 2003 and 2004 to begin to dismantle a ban on concurrent receipt of military retirement and VA disability compensation. VA and DFAS still struggle with the complexity of the payments, particularly with compensating eligible retirees retroactively. Individual retro payments so far have averaged about \$1,800.

>

> DFAS and VA officials, when they launched the VA Retro Pay effort in SEP 06, said all payments would be made within a year. In August, as that year drew to a close, officials said all but 33,000 files had been reviewed. DFAS set a new deadline of mid-November to fully pay the original pool of eligible retirees, many of whom are owed thousands. DFAS officials now acknowledge that they didn't have a firm grasp on the facts when they revised that deadline three months ago. As of 15 NOV, a total of 48,760 files of disabled retirees still needed to have pay reviews completed to determine retro pay eligibility. Also, DFAS officials say they don't have enough facts yet to set a new completion of payment deadline. Lee Krushinski, the senior executive has been acting director of operations for DFAS for three weeks, since replacing Patrick Shine who retired 31 OCT. He said, "We have not met customer expectations. I personally find that unacceptable and apologize to all the VA Retro-eligible recipients." Krushinski promises to address VA Retro Pay problems. One of his first steps is to improve communication. Letters are being sent immediately to all retirees with files being reviewed and to 46,000 retirees whose files have been reviewed but have no back pay due. It is "just unacceptable" that these retirees weren't informed earlier. Communication with our customers was not what I would call adequate, at all," he said.

>

> The missed deadlines, and the inaccurate statements on progress made earlier by DFAS and VA officials, were blamed in part on a misunderstanding of data being supplied by Lockheed Martin, the contractor hired to review files and calculate payments. The payments reported by Lockheed often only partially compensated retirees for total retro pay due. For example, some retirees are eligible for both CRSC or CRDP and can switch between the programs each year based which will pay more for their personal circumstances. A retiree might be due two or three payments. DFAS officials had misinterpreted Lockheed's monthly payment totals to mean total retiree pay files reviewed and cleared. This fooled Pat Shine before he retired. It also left Thomas J. Pamperin, deputy director of the VA compensation and pension service, misinformed. These two senior officials routinely briefed the media on progress with the program. Krushinski said he too misunderstood the data when briefed on VA Retro Pay just a few weeks ago. It was only after he "sat down with everybody and really went through the numbers, drilling into them, that I definitely saw the problems we have here." Wrong numbers given "the media," he said, "led many people to believe we were closer to finishing the project than we actually were." Lockheed Martin personnel trained to screen retiree pay files have cleared 128,000 payments through 15 NOV. But only 84,300 potentially eligible retirees from the original 133,000 pool have had pay files reviewed. Lockheed has been told to raise the number of full-time personnel hired for the project by 16, to reach 98 in December, an official said. Another factor for November's missed deadline was computer software developed to automate retro pay calculations. It had an error rate of 17% and had to be scrapped. "We really counted on that automation to allow us to get out of manual processing," Krushinski said. DFAS officials couldn't explain why that information wasn't shared

with retirees before now. [Source: Stars & Stripes 1 Dec 07 Tom Philpott article ++]

>

>

> WREATHS ACROSS AMERICA: The Department of Veterans Affairs' national cemeteries will again participate in this year's annual Wreaths Across America initiative scheduled to take place at noon on Saturday, 15 DEC 07. That date marks the 16th anniversary of Maine wreaths being donated to decorate the graves at Arlington National Cemetery and the second year of a national campaign, dubbed Wreaths Across America, that will bring the same remembrance wreaths to over 230 National and State Veterans cemeteries and monuments across the nation. The Worcester Wreath Company has donated 5,000 wreaths for placement by volunteers on gravesites in Arlington National Cemetery, in a mission to Remember - Honor - and Teach the value of freedom in the world today. Participants include veterans groups, companies, school children and individuals. The truck carrying the wreaths, flanked by a contingent of Patriot Guard Riders, is scheduled to arrive at Arlington National Cemetery at 9:00am. The volunteers will then lay the wreaths, and a ceremony will be held at the Tomb of the Unknown Soldiers at noon. This year, all 125 VA national cemeteries will participate with wreath-laying ceremonies for six wreaths - one for each Service and one for POW/MIAs. The wreaths are made and decorated by the employees of Worcester Wreath Company. Through this program, company president Morrill Worcester wanted to recognize veterans, active duty military, and their families. For more information on this event, refer to: www.wreaths-across-america.org <<http://www.wreaths-across-america.org>> or <<http://wreaths-across-america.org/civil>>- air-patrol. html.

> [Source: NAUS Weekly Update 20 Nov 07 ++]

>

>

> VA DATA BREACHES UPDATE 39: On the evening of 10 NOV thieves stole three computers from the offices of the Richard L. Roudebush Veterans Affairs Medical Center. The theft was discovered when staff reported to work on 12 NOV. It is not known how the thieves gained access to the locked offices at this time. The Department of Veterans Affairs Office of Inspector General is investigating the theft, in cooperation with local and state law enforcement authorities and the FBI. One computer was used as part of a medical device to analyze data. The other two computers were used for office purposes. VA IT staff determined the date of the theft upon a review of when the computers were disconnected from the internal network. The files of approximately 12 thousand patients could be affected. While it is likely that one of the office computers stored personally identifiable information of patients, the computers did have strong password protection as is the policy of the medical center. The Medical Center is in compliance with VA IT Security Policy. Back-up files at the medical center will allow VA officials to determine which patients' information was potentially compromised, and VA is notifying these patients individually. There is no need for veterans to contact the facility on this issue unless otherwise notified. The Department of Veterans Affairs will provide one year of free credit monitoring to people whose sensitive personal information may have been stolen in the incident. Should additional information become available during the investigation, the VA will notify those potentially affected. Anyone with any knowledge of these stolen computers should contact the VA Police at 317-988-2200. [Source: VA Press Release 14 Nov 07 ++]

>

>

> VA DATA BREACHES UPDATE 40: A man who purchased \$5,600 in jewelry at a store in Tustin using three fraudulent credit cards was arrested in Los Angeles after a months-long investigation. The investigation also uncovered from his home computer about 1.8 million Social Security numbers from the U.S. Department of Veteran Affairs, where he had been employed as an auditor. Veterans Affairs' officials have said only 185,000 numbers are at risk because many were repeated in the file. Tae Kim, 28, was booked at Orange County Jail and is being held in lieu of \$1 million bail after being arrested at a car wash in Koreatown, police said. On 7 APR, two Asian men identified as Kim and Justin Hong, purchased jewelry from Jewelry Exchange at 15732 Tustin Village Way using three skimmed cards belong to three different victims. Kim was on formal probation and a search was conducted at his Los Angeles residence 14 JUN where a computer was taken as evidence. After a search warrant was obtained, police found the Social Security numbers hidden in a computer file. Kim had worked at the Veteran Affairs office since 2003 when he was a student at USC but quit in February of this year when he discovered a background check would be conducted. The U.S. Department of Veteran Affairs verified that Kim did not have permission to possess the Social Security numbers. Officials have notified several victims from Orange County, police said. Authorities from the Orange County District Attorney's Office, LAPD and U.S. Marshalls have been attempting to arrest Kim since August. Kim is believed to be a member of Koreatown Gangsters, police said. He faces eight different charges, including commercial burglary, fraudulent use of an access card, identity theft, criminal street gang activity and computer access fraud. Justin Hong is in L.A. County Jail awaiting trial for a gang related murder. A warrant for his arrest is also pending filing with the court. For more information about VA data theft refer to

> <http://www.vawatchdog.org/va%20data%20theft%20news.htm>. [Source: The Orange County Register Erika M. Torres article 16 Nov 07 ++]

>

>

> VA DATA BREACHES UPDATE 41: Lawyers for people who sued the Veterans Affairs Department over last year's data breach will begin mediation with government attorneys in the weeks ahead and will update the federal judge overseeing the case in early 2008. Earlier this month, U.S. District Judge James Robertson dismissed several aspects of the case but said the handful of plaintiffs sufficiently made the claim that the department failed to safeguard their personal information, as required by the Privacy Act. The action was brought to the U.S. District Court for the District of Columbia as a potential class-action representing each of the estimated 26.5 million veterans whose data could have been jeopardized in the incident. The FBI eventually recovered the stolen equipment and said the files were not accessed. The mediation must be verified by the court by 7 DEC, and a status conference will be held after a 60-day work period, Robertson said at a 28 NOV hearing. The Justice Department, which is representing the VA, previously asked that the case be dismissed.

>

> Federal privacy law requires agencies to establish appropriate administrative, technical and physical safeguards to insure the security and confidentiality of records to protect against any anticipated threats or hazards to their security or integrity. The plaintiffs alleged that the VA's failure to enact such protocols "left their personal information unprotected [and] caused them to suffer emotional and pecuniary harm." If the suit is successful, each veteran impacted would get a minimum of \$1,000 in damages. The government sought to have the claim dismissed on the grounds that the

veterans failed to plead intentional or willful violations of the act, according to court documents. That would require proving that the VA acted with something greater than gross negligence. "Clearly, the VA is eager to convince veterans that while egregious security breaches occurred, they suffered no harm," plaintiff Tod Ensign wrote on his Citizen Soldier Web site. "At a minimum, all the veteran groups are committed to forcing the VA to adopt reforms that ensure this kind of privacy invasion doesn't occur again." American Civil Liberties Union Legislative Counsel Tim Sparapani said Robertson's decision to allow the lawsuit proceed is a wake-up call to the federal government. Safeguard the data you gather on the public and put it in a vault with protections like Fort Knox because the private data is like gold in identity thieves' hands. [Source: National Journal's Technology Daily Andrew Noyes article 29 Nov 07 ++]

>

>

> LEGISLATION OF INTEREST UPDATE 08: The President has signed into law (P.L. 110-111) the annual COLA adjustment for certain veterans benefits. The 2.3% hike is the same as the annual Social Security rate and military retired pay. The COLA applies to VA disability compensation payments, survivors' dependency and indemnity compensation (DIC), and a clothing allowance for certain veterans'. The change becomes effective on 1 DEC and will be reflected in checks mailed in early JAN 08. One example, the new basic monthly DIC rate for survivors of veterans who died of service-related causes after January 1, 1993 will increase to approximately \$1,091 from \$1,067. The President also signed into law a veteran suicide prevention measure (P.L. 110-110) that addresses training, screening and tracking of veterans at risk for suicide and other mental health illnesses. A large new study by Army researchers in the Journal of the American Medical Association (November 14, 2007) found significant levels of PTSD and other mental health concerns among combat veterans. The study concluded that the large clinical burden recently reported among veterans presenting to VA facilities seems to exist within months of returning home, highlighting the need to enhance military mental health care during this period. [Source: MOAA Leg Up 16 Nov 07 ++]

>

>

> LEGISLATION OF INTEREST UPDATE 09: The Uniformed Services Disabled Retirees (USDR) organization is requesting veterans "TAKE ACTION" on the following:

>

> This Tuesday, 4 DEC the 110th Congress will return to "work" after a 14-day Thanksgiving vacation during which nothing was accomplished. Further, they intend final adjournment of the 1st Session on 21 DEC. That leaves 17 calendar days (maybe 15 work days if they work Monday-Saturday) for them to enact major money legislation to keep the government funded. Some of this important legislation directly affecting the retiree community includes:

>

> 1. Legislation to again defer the mandatory 10% cuts in Medicare reimbursements that will otherwise take effect this 1 JAN 08. Tricare reimbursement ratios are directly keyed to Medicare reimbursement ratios, so military retirees will take a hit whether or not they have Medicare. Many physicians have already stated that they will be unable to accept new Medicare patients and others will seek other lines of work.

> 2. The 2008 National Defense Authorization Act to authorize funding to the Department of Defense. This bill presently before a conference Committee requires agreement of that committee's membership on the following:

- > . The Lautenberg amendment to prohibit increases in TRICARE fees for FY2008 and to express the sense of the Senate that military service is unique and that military members have earned their benefit by virtue of their service and sacrifices.
- > . The Nelson amendment to eliminate the SBP/DIC offset and accelerate 30-year paid-up Survivor Benefit Plan (SBP) coverage to 1 OCT 07.
- > The Reid amendment providing full, immediate concurrent receipt to disabled retirees deemed "unemployable" by the VA retroactive to 1 JAN 05.
- > . An amendment by Sen. Lott concerning the Armed Forces Retirement Home. This amendment would prohibit "privatization" of the Home into a non-government charitable institution.
- > . The Chambliss amendment to reduce the Reserve retirement age by three months for each 90 days served on active duty since 9/11/01.
- > . The Lincoln amendment to authorize Guard or reserve members to use their mobilization GI Bill benefits up to 10 years after separating from the Selected Reserve.
- >
- > At least one military department has already initiated planning to go to minimum manning by furloughing both civil service and contract employees. Certain factions in Congress seek to sabotage the 2008 NDAA by including controversial "hate crimes" legislation that has nothing to with National Defense. The reasons none of this important legislation has been passed boils down to politics where the anti-war faction has tied passage of just about all legislation to that issue whether or not that legislation has anything to do with the on going hostilities. So, beginning this Monday, 3 DEC, let's begin a telephone campaign to support passage of this important legislation. Make the phones ring all day, everyday. Using the below procedure, use any of the following toll-free numbers to call your Senators and Representatives concerning the above issues.
- > 1-800-833-6354 (provided by AMA)
- > 1-800-846-6225 (provided by AARP)
- > 1-866-272-6622 (provided by EANGUS)
- > 1-800-828-0498
- > 1-866-340-9281
- > 1-866-220-0044
- >
- > 1. When the Capitol Operator answers, tell her which Senate or House office you want.
- > 2. When the office answers, tell the staffer that you are a constituent and that you want your Senator/Representative to support and vote for the following -
- >
- > a. Stop the 10% cuts in Medicare physician reimbursements to take effect 1 January 2008.
- > b. Pass the 2008 National Defense Authorization Act as a "clean bill" without the non-relevant controversial "hate crimes" amendment. Support the Troops!
- >
- > 3. Provide additional information requested by the staffer. Generally this will be your name and ZIP code.
- > 4. Be polite and courteous, remember the staffer is simply the "messenger".
- > [Source: USDR Action Alert 30 Nov 07 ++]
- >
- >
- > CALIFORNIA CHULA VISTA VETERAN' HOME: Lawmakers on 28 NOV opened a series

of hearings on some of the problems that have plagued the 400-bed Chula Vista Veterans home, pledging to avoid a repeat of those mistakes as the state prepares to build several new facilities from Los Angeles to Redding by 2010. "I'm fearful this could happen again," said Assemblywoman Mary Salas, D-Chula Vista. Salas and other lawmakers grilled state Veterans Affairs officials, including the top administrator and his aides, for more than three hours over the state's response to shoddy construction and the department's policy of dipping into general operating funds to cover repairs - a practice that may keep some patients from being admitted because of tight budgets. Tom Johnson, secretary of the California Department of Veterans Affairs testified that at no time was resident care or safety compromised. Salas, the chairwoman of the Assembly Veterans Affairs Committee, said she plans to challenge the administration to flesh out more details of what went wrong, to hold contractors more accountable and to be more forthcoming on budget shortfalls. "I wasn't satisfied with all the answers they gave, nor was I comfortable with all of their solutions," she said later in an interview. "If we can't take care of the three homes we have, we have no business opening new ones until we get the systems in place to guarantee the operations of the veteran's homes."

>

> The department has asked the governor and lawmakers for \$1 million in emergency funding immediately and an additional special allocation of \$2.2 million in 2008-09 to pay for the shower repairs alone. Salas says she will support the request to avoid "punishing" current residents. Salas expressed irritation that the state's general fund may have to cover costs that could be traced back to construction defects. The contractor has since gone out of business and the state is attempting to piece together claims against the company. However, poor record keeping and lax oversight on the part of Veterans Affairs and the Department of General Services may prevent the state from collecting, legislators said. Some defects also may have gone undetected for several years, which inflated maintenance bills, lawmakers charged.

> Though he wasn't in charge at the time, Johnson candidly conceded that the department supervised the construction poorly, and audits have highlighted budget shortcomings. In response, the state has stepped up inspections at the current construction sites and two managers will be hired to oversee needs before the doors are open, Johnson said.

>

> "We are doing business differently from when the Chula Vista home was constructed," Johnson said.

> There was some sparring. Salas was armed with minutes from a 2001 meeting that appeared to note maintenance problems then and contradicted some of the department's explanations yesterday. She also pointed out that staff members had to forage through many unmarked boxes to examine some of the construction records. There was "no rhyme no reason" to the filing system, she said. Lawmakers also are disturbed that state officials could not fully explain the status of the contractor's surety, or performance, bond designed to ensure quality. Salas agreed that "the quality of care has not suffered" at the homes. However, she is convinced the department has had to limit admissions to stay within budget. There are 367 residents in the 400-bed home in Chula Vista, according to state figures.

>

> Located on a 30-acre site off Telegraph Canyon Road, adjacent to Sharp Chula Vista Medical Center, the Veterans Home of California, Chula Vista (VHC-Chula Vista), is the only veterans home located in coastal, urban Southern California. With views of the Pacific Ocean and downtown San Diego,

VHC-Chula Vista's location provides residents with numerous cultural and recreational opportunities. Completed in May 2000, VHC-Chula Vista is a long-term care facility providing options for Domiciliary - Independent Living, Licensed Residential, and Skilled Nursing Care. Employed physicians provide medical care in both the licensed outpatient clinic and the inpatient skilled nursing settings. Acute care is provided at either the La Jolla U.S. Department of Veterans Affairs Medical Center, or at the nearby Sharp Hospital in Chula Vista. Veterans desiring to be considered for membership must be residents of California, age 62 or older (or younger if disabled), and have served honorably. Veterans seeking admission should call 1-888-857-2146 or write to: Veterans Home of California, Chula Vista Attn: Admissions, 700 East Naples Court Chula Vista, CA 91911. [Source: Copely News Service Michael Gardner article 28 Nov 07 ++]

>

>

> MOBILIZED RESERVE 28 NOV 07: The Army, Air Force and Marine Corps announced the current number of reservists on active duty as of 28 Nov 07 in support of the partial mobilization. The net collective result is 2,022 fewer reservists mobilized than last reported in the Bulletin on 7 NOV 07. At any given time, services may mobilize some units and individuals while demobilizing others, making it possible for these figures to either increase or decrease. The total number currently on active duty in support of the partial mobilization of the Army National Guard and Army Reserve is 70,859; Navy Reserve, 5,467; Air National Guard and Air Force Reserve, 7,243; Marine Corps Reserve, 7,310; and the Coast Guard Reserve, 361. This brings the total National Guard and Reserve personnel who have been mobilized to 91,240, including both units and individual augmentees. A cumulative roster of all National Guard and Reserve personnel, who are currently mobilized, can be found at <http://www.defenselink.mil/news/Nov2007/d20071128ngr.pdf>. [Source: DoD News Release 28 Nov 07 ++]

>

>

> VETERAN CHARITIES REVIEW UPDATE 02: The following was reported by Tom Waskovich, former Executive Director of the Special Operations Association: "The last week I have received calls from the VVA soliciting money for homeless veterans and also a Navy affiliate wanting money to send packages to the troops. I checked on both and our veterans and the public should be aware that after expenses such as mailings rent etc., 80% of the money being raised through these solicitations will be going to the telemarketer (i.e. if you donate a dollar , only 20 cents go to the charity). When anyone is solicited by phone it is recommended that they ask what percentage goes to the Charity and what percentage to the fundraiser so they can make a conscious decision on where to best place their contributions. [Source: twaskovich@hotmail.com <<mailto:twaskovich@hotmail.com>> Waskovich 28 Nov 07 msg ++]

>

>

> SOCIAL SECURITY MYTHS: Following are five myths about the causes and impact of Social Security's anticipated Insolvency:

>

> 1. Social Security isn't a big-deal problem because, absent any change, the system will be able to pay 75% of promised benefits in 2041. Even those reduced benefits would be larger, in real terms, than what current retirees receive: Those numbers are correct; the implication isn't. Social Security represents the only source of income for one-third of elderly households and more than half the income for another third. No one wants to see those benefits suddenly slashed by a quarter -- least of all those who care about

preserving what Franklin Roosevelt called "some measure of protection . . . against poverty-ridden old age."

> Advocating thumb-twiddling as sensible strategy ignores the reality that acting sooner spreads the burden of change across more generations, allows changes to be phased in gradually and lets future retirees plan ahead.

>

> 2. Social Security isn't a big deal because the shortfall is small (less than 2% of taxable payroll), smaller when measured as a share of the economy (less than 1% of gross domestic product): The shortfall is small, and it's a lot smaller than the Medicare shortfall. But increasing taxes or cutting benefits by an amount equal to 2% of payroll shows only what it would take to make Social Security solvent if that change were made immediately. Even then, this is only the amount needed to shore up the program for the 75-year actuarial period, leaving it suddenly strapped for cash at the end of that time. Waiting decades would require a much bigger tax bite or benefit cut. Social Security isn't the biggest budgetary challenge, but it's the largest single federal program and the most easily fixable.

>

> 3. Social Security isn't as big a deal as it was a few years ago because the insolvency date has been pushed back, from 2029 (the projection in 1996) to 2041 (the projection this year): The projections have improved, but the problem remains. Those who thought Social Security was a significant problem in 1996 with insolvency projected in 33 years can't cavalierly dismiss the matter today with insolvency projected in 34 years. The bottom line is that the long-run outlook has remained virtually unchanged for the last thirteen years.

>

> 4. Social Security isn't a big deal because the trustees' projections are based on unduly pessimistic assumptions, including anticipated economic growth that is slower than has been the case for the past several decades: The projected slowdown in economic growth is based largely on the slower growth of the workforce, which is inevitable unless fertility rates or immigration soar beyond all predictions. Better-than-expected growth cuts both ways: It increases the amount of payroll taxes coming into the system but also the amount of benefits owed. Even if the economy were to grow significantly faster than predicted, that growth would push insolvency back by only six years. Weighing in the opposite direction: The trustees' projections on life expectancy may be too low -- good news overall, bad for Social Security. Yes, the trustees' optimistic scenario shows Social Security solvent for more than 75 years, but that is so unlikely (fertility would have to return to pre-1970s levels, for one) that Social Security puts the chances at less than 2.5%. Furthermore, Social Security's intermediate projections are in line with those of other experts. "There is a greater than 99% probability that total outlays over 100 years will exceed total revenues," the Congressional Budget Office found last year.

>

> 5. Social Security wouldn't be a big deal if politicians would stop raiding the trust fund for other purposes, such as financing President Bush's tax cuts: This point conflates the Social Security shortfall with the larger question of fiscal discipline: using the trust fund to underwrite current spending (especially Bush's unaffordable tax cuts) and mask the real deficit. Eventually, the government's borrowing is going to have to be repaid, adding budgetary pressure at precisely the wrong time -- a strong argument for a more prudent fiscal policy. But Social Security would face the same shortfall even if the now-forgotten lockbox had not been picked.

> [Source: Washington Post Ruth Marcus article 28 Nov 07 ++]

>

>

> NURSING HOMES UPDATE 04: The Luther Home in Marinette and the Willows Nursing and Rehabilitation in Sun Prairie are among the "54 worst nursing homes in the nation," according to a new study by the U.S. Centers of Medicare & Medicaid Services. U.S. Senate Special Committee on Aging Chairman Herb Kohl (D-WI) commended the public disclosure of the list by the CMS. The facilities named are enrolled in the agency's "Special Focus Facility" program, having exhibited a history of providing poor care to residents based primarily on the results of federally financed state inspections. Kerry Weems, acting administrator for CMS, said the list of nursing homes was released in response to a forthcoming nursing home bill crafted jointly by Kohl and Sen. Charles Grassley (R-IA). Disclosing the program participants, considered to be among the most troubled nursing homes in the country, is included in the bill that will be introduced in coming weeks. The Nursing Home Transparency and Improvement Act of 2007 would allow consumers timely access to accurate information on nursing homes - including the results of government inspections, the number of staff employed at a home, and information about the home's ownership. To view the complete list of the nation's worst nursing homes, refer to <http://www.cms.hhs.gov/CertificationandCompliance/Downloads/SFFList.pdf>. [Source: Small Business Times article 29 Nov 07 ++]

>

>

> VA FACILITY EXPANSION UPDATE 11: The Department of Veterans Affairs (VA) has awarded contracts for the next two phases of the new medical center under construction in North Las Vegas. The Phase II contract, for constructing foundations for the medical center and accompanying warehouse, was awarded to Whiting-Turner Construction Company, Las Vegas in the amount of \$9,170,000. Completion of this phase is scheduled for JUN 08. VA awarded the Phase III contract in the amount of \$47,800,000 to Clark Construction Group, LLC of Las Vegas for the design and construction of a new 100,000 square foot, 120-bed nursing home care unit which will be built adjacent to the future medical center. Completion of Phase III construction is scheduled for SEP 09. Phase IV construction on the main medical center is scheduled for completion in mid-2011. In Nevada, VA operates two major health care systems -- the VA Sierra Nevada Health Care System in Reno and the VA Southern Nevada Healthcare System in Las Vegas. In fiscal year 2007, VA facilities in Nevada treated about 40,000 patients, accounting for more than 2,400 inpatient admissions and nearly 435,000 outpatient visits. The current project is a result of VA's Capital Asset Realignment for Enhanced Services (CARES) plan, which included the recommendation to construct a new VA medical center complex that would include a 90-bed inpatient hospital, 120-bed nursing home care unit, and a large outpatient clinic to meet future demand. Ground was broken for that facility in OCT 06. Funding necessary to support the contracts was authorized and appropriated in FY 2006. [Source: VA News Release 28 Nov 07 ++]

>

>

> AGENT ORANGE LAWSUITS UPDATE 11: On 19 NOV Acting VA Secretary Mansfield approved a notice for publication in the Federal Register to rescind provisions of its Adjudication Procedures Manual, M21-1 that were found by the U.S. Court of Appeals for Veterans Claims (CAVC) not to have been properly rescinded. The notice can be reviewed in the 27 NOV issue (Volume 72, Number 227) Page 66218-66219. The notice in effect says that since a 2001 change to the manual's 1991 provisions has been ruled illegal by the

CAVC it would be further changed if the VA lost their appeal to this ruling. The provision in question allowed veterans who received the Vietnam Service medal and served offshore in Vietnam during that war the presumption of exposure to Agent Orange in accordance with a 1991 ruling of the Veterans Court. The VA subsequently changed the rules in their M-21 manual in 2002 taking away this right which brought on the Haas v. VADC-Nicholson lawsuit which the VA lost and is currently appealing. Now the VA is seeking to correctly alter the M-21 provisions by giving notice and a time for comment as required when an agency makes a "substantive change".

>

> The VA is in effect trying to wipe out both the 1991, and 2002 M-21 manual provisions laying the groundwork for a new provision which will allow the VA to continue denying Blue water Navy the same rights as their fellow veterans who received the Vietnam Service medal. And at the same time they say that if they win their appeal to the Federal Courts, they will withdraw this change and keep the M-21 change of 2002 which denies presumption of exposure. Bottom line either way NO COMPENSATION for Blue Water Navy veteran's Agent Orange related disabilities. Veterans are encouraged to exercise their right to comment on the change. Written comments must be received by VA on or before 28 JAN 08. > They may be submitted through online at <http://www.Regulations.gov>; or by mail or hand-delivery to the Director, Regulations Management (00REG), Department of Veterans Affairs, 810 Vermont Ave., NW. Room 1068, Washington, DC 20420; or by fax to (202) 273-9026. Comments should indicate that they are submitted in response to "Rescission of Manual M21-1 Provisions Related to Exposure to Herbicides Based on Receipt of the Vietnam Service Medal." Copies of comments received will be available for public inspection in the Office of Regulation Policy and Management, Room 1063B, between the hours of 08-1630 M-F (except holidays). To review call (202) 273-9515 for an appointment. In addition, during the comment period, comments may be viewed online through the Federal Docket Management System (FDMS) at <http://www.Regulations.gov>. [Source: <http://www.valaw.org> Editor Ray B Davis Jr. 27 Nov 07 ++]

>

>

> VA CLAIM BACKLOG UPDATE 13: New records show the Department of Veterans Affairs fell further behind this year in its attempts to give veterans timely decisions on their disability claims. The latest numbers are in an annual report the VA prepares for Congress detailing a range of short- and long-term goals for its disability, health and other benefit programs. Overall, the agency either has fallen behind or has made no progress in improving its performance in more than half of what it lists as its key goals. In the benefits measure the VA has said is "most critical to veterans" -- the speed of processing disability claims -- the agency lost ground for the third year in a row. Moreover, McClatchy News Service has found that the VA put a positive spin on many of its numbers and in two instances provided Congress with incorrect or incomplete figures. The agency said it took an average of 183 days to process a claim in fiscal 2007, longer than in any of the five years tracked in the report. Processing exceeded its 2007 goal of 160 days and its long-term goal of eventually reducing processing time to 125 days.

>

> Congress and veterans closely watch the time it takes the VA to process claims, and the agency has vowed in previous years to pick up the pace. When it was asked about its processing speed last year, for example, the VA told McClatchy that hiring new workers would help it increase

production and decrease its backlog of claims in 2007. In fact, processing time increased by an average of six days, and the backlog of pending claims rose from 377,681 to 391,257, the agency's records show. The VA said this week that it was aggressively tackling the issue, hiring more than 1,000 workers, boosting overtime and revamping training. The agency also said it was receiving more disability claims than it had at any time in recent history, and that it had received more than it had expected in 2007. Beyond that, the agency said that meeting or exceeding its goals wasn't always the best measure of success. "The VA sets goals to measure how we are doing so that we can continuously improve performance," said Bob Henke, the assistant secretary for management. "We use goals to move and improve performance." But for Sen. Patty Murray (D-WA) the report is more evidence that the agency hasn't been upfront with Congress about its performance or its needs. Murray, a member of the Senate Veterans' Affairs Committee said, "It is extremely frustrating to hear the song and dance that we are doing better when the reality is we are not. I want to say I'm surprised. But I'm not."

>

> In many sections of the report, the VA looks past the missed goals to put the best face on its efforts.

> The VA reports that 95% or more of outpatient visits are scheduled within 30 days of patients' desired dates, a fact it's touted to Congress repeatedly. The agency's inspector general, however, found this year that only 75% of the visits it examined took place within 30 days. The VA said it didn't agree with that finding and was examining the issue. The VA also claimed that customer-satisfaction ratings by inpatients at VA hospitals are 10 points higher than ratings from private-sector hospitals. In fact, the number the agency used as a comparison is wrong, and as a result the advantage for VA hospitals is half as big as the VA claims. The VA said that the mistake was made by a transposition error and they will be fixing that as soon as possible. [Source: McClatchy News Service Chris Adama article 28 Nov 07 ++]

>

>

> MEDICARE UPDATE 05: The increasing cost of health care, driven primarily by the cost of emerging medical technologies, is a greater threat to the financial sustainability of Medicare than the aging of baby boomers, according to a recent Congressional Budget Office (CBO) report. The Long-Term Outlook for Health Care Spending, released this month by the CBO, projects that medical coverage for a growing aged population will account for only 25% of Medicare spending growth through 2030. On the other hand, the rapid growth of health care spending, rooted in the rising cost of medical technology and increased use of services, will account for 75% of Medicare spending increases through 2030, and 90% through 2082. The CBO predicts that by 2082 spending on Medicare and Medicaid alone could account for one-fifth of the nation's gross domestic product. The projections, which were 50% higher than those released by the Medicare trustees, left federal regulations unchanged to demonstrate the long-term fiscal effects of current Medicare and Medicaid policy, which the report describes as "unsustainable". The CBO recommends expanding research on cost-effective care and reimbursement methods that provide incentives for low-cost interventions and penalize providers who opt for high-cost and unnecessary care. According to Peter Orszag, director of the CBO, between 5 and 50% of health care spending could be eliminated without harming health outcomes, with 30% given as a common estimate. In response to the report, Senator Max Baucus (D-MT) and chairman of the Finance Committee, vowed to jump-start hearings on health

care costs and methods to overhauling the health system. He concluded that finding ways to make the health care system more efficient and cost-effective will reduce costs for all health care users, public and private, and . . . will pave the way toward getting Federal spending truly under control. [Source: Medicare Rights Center Newsletter 27 Nov 07 ++]

>

>

> VISTA BUSINESS CONCERNS: Microsoft is struggling with business concerns over their Vista operating program. The majority of IT professionals worry that migrating to Windows Vista will make their networks less stable and more complex, according to a new survey. Ninety percent of 961 IT professionals surveyed said they have concerns about migrating to Vista and more than half said they have no plans to deploy Vista. "The concerns about Vista specified by participants were overwhelmingly related to stability. Stability in general was frequently cited, as well as compatibility with the business software that would need to run on Vista," said Diane Hagglund of King Research, which conducted the survey for systems management vendor Kace. The survey, echoing one from Forrester last week, shows most IT professionals are worried about Vista and that 44% have considered non-Windows operating systems, such as Linux and Macintosh, to avoid the Microsoft migration. "Clearly many companies are serious about this alternative, with 9% of those saying they have considered non-Windows operating systems already in the process of switching and a further 25% expecting to switch within the next year," the report "Windows Vista Adoption and Alternatives" reads. Macintosh leads the pack of Vista alternatives, with support from 28% of respondents. About a quarter said they would opt for Red Hat Linux, with SUSE Linux and Ubuntu each garnering 18% of the vote. Another 9% cited other Linux operating systems and 4% were unsure. IT professionals also said that virtualization is one of the technologies making a move away from Microsoft possible. About two-thirds reported that the use of virtualization has made it easier to implement an alternative. Yet heterogeneous systems management could be a barrier to going with a provider other than Microsoft, the survey found. Respondents reported that challenges include the need to manage multiple operating systems (49%) and the need to learn a different set of management tools (50%). Sixty percent manage their Windows systems with tools that don't support non-Windows environments. "Almost half of all participants (45%) cited challenges with system management in non-Windows operating systems as preventing them from adopting" alternatives, the report states. [Source: Federal Report 11-20-2007 ++]

>

>

> TRICARE PRIME UPDATE 02: Tricare Prime and Prime Remote beneficiaries in the United States, including Hawaii and Alaska, can manage their health care online. Prime and Prime Remote beneficiaries can log on to <https://www.dmdc.osd.mil/appj/bwe/> to enroll, disenroll, choose primary care managers, transfer regions, update personal information, add other health-care information and request enrollment cards. The site also allows Standard beneficiaries to update personal information, add other health care information and enroll in Prime. The site's link to the Defense Eligibility Enrollment Reporting System allows beneficiaries to update their personal information for both Tricare and DEERS at the same time. Retirees can use their Defense Finance and Accounting Service "myPay" personal identification number, or family member account PIN. Enrollments and PCM changes are pending until approved, and approval may take up to six calendar days. Beneficiaries can log on to the site to view the status of their account

anytime and can cancel pending enrollments and/or PCM changes within 48 hours of initiating the transaction. To date, the US Family Health Plan, a Tricare Prime option, is not available for enrollment on this Web site. In addition to the new Web service, enrollment forms are still available at <http://www.tricare.mil/mybenefit/home/overview/Enrollment/WebEnrollment> to fill out and mail to a Tricare regional office. Beneficiaries can also visit a Tricare Service Center to enroll and get assistance with other health-care needs. [Source: Tricare News Release No. 11-05-07 dtd 16 Nov 07 ++]

>

>

> PTSD UPDATE 16: For the first time, a study has linked asthma with post-traumatic stress disorder (PTSD) among adults in the community. The study of male twins who were veterans of the Vietnam era suggests that the association between asthma and PTSD is not primarily explained by common genetic influences. The study included 3,065 male twin pairs, who had lived together in childhood, and who had both served on active military duty during the Vietnam War. The study found that among all twins, those who suffered from the most PTSD symptoms were 2.3 times as likely to have asthma compared with those who suffered from the least PTSD symptoms. The research was published in the first issue for NOV 07 of the American Journal of Respiratory and Critical Care Medicine, published by the American Thoracic Society. The study included both monozygotic (identical) twins, who share all the same genetic material, and dizygotic (fraternal) twins, who share only half of the same genetic material. The lead researcher Renee D. Goodwin, Ph.D., M.P.H., Assistant Professor of Epidemiology at the Mailman School of Public Health at Columbia University in New York City said, "If there had been a strong genetic component to the link between asthma and PTSD, the results between these two types of twins would have been different, but we did not find substantial differences between the two."

>

> Several other studies have found a relationship between asthma and other anxiety disorders, Dr. Goodwin noted. This new research also confirmed previous findings that linked asthma with a higher risk of depression. She said, "No one knows the reason for the association between asthma and mental disorders. Asthma could increase the risk of anxiety disorders, or anxiety disorders might cause asthma, or there could be common risk factors for both asthma and anxiety disorders. Our study found the association between asthma and PTSD does not appear to be primarily due to a common genetic predisposition." The researchers found the association between asthma and PTSD existed even after they took into account factors such as cigarette smoking, obesity and socioeconomic status, all of which are associated with both anxiety disorders and asthma. It is conceivable that traumatic stress, which has been associated with compromised immune functioning, leads to increased vulnerability to immune-system-related diseases, including asthma. Dr. Goodwin and colleagues wrote, "Alternatively, it may be that having asthma places adults at increased risk for PTSD as it increases the likelihood that they will be exposed to a traumatic situation because they have a life-threatening chronic medical condition. The findings suggest that a person with asthma who experiences a traumatic event may benefit from seeking professional help, because they could be more vulnerable to developing post-traumatic stress disorder." [Source: Vets Voice 16 Nov 07 ++]

>

>

> OVERSEAS HOLIDAY MAILING UPDATE 01: According to the Military Postal

Service Agency (MPSA), holiday letters and cards going first-class to military APO/FPO addresses overseas must be sent by Dec. 10 to arrive by Dec. 25, 2007. Each country has customs regulations that apply to all incoming mail, pertaining to everything from food items to reading materials. Military units may also have additional restrictions concerning incoming mail imposed by unit commanders relative to size and weight to ensure logistics support can handle the heavy mail load. And, all packages and mail must now be addressed to individual service members as required by U.S. Department of Defense regulations. For more information, refer to the MPSA website at <http://hqdainet.army.mil/mpsa/>. [Source: Military.com 26 Nov article ++]

>

>

> SHINGLES UPDATE 04: The Tricare website now includes the following in their Frequently Asked Questions section:

>

> Does TRICARE pay for the shingles vaccine? Ans: Yes. As of 19 OCT 07, Zostavax, the vaccine that helps reduce the risk of getting shingles (herpes zoster) is reimbursable under TRICARE. The Centers for Disease Control and Prevention (CDC) recommends a single dose of the vaccine for adults age 60 or older regardless of whether they report a prior episode of shingles (herpes zoster). For more information on the vaccine, refer to FDA's Questions & Answers on Zostavax www.fda.gov/Cber/products/zosmer052506qa.htm <http://www.fda.gov/Cber/products/zosmer052506qa.htm>. Tricare deeductable and copay will apply as follows:

>

> . TRICARE Prime Beneficiary: As long as you get your shingles vaccine from your primary care manager you won't be responsible for a deductible or copay.

> . TRICARE Standard/Extra Beneficiary: You may get your shingles vaccine from any Tricare-authorized provider (network or non-network) who is licensed to give the vaccine. Standard/Extra deductibles and cost shares apply.

> . TRICARE For Life Beneficiary: Medicare covers the shingles vaccine under Medicare Part D. If you don't have Medicare Part D, Tricare will be the primary payer for the vaccine. You may get the shingles vaccine from any Tricare-authorized provider (network or non-network) who is licensed to give the vaccine. Standard/Extra deductibles and cost shares apply.

> [Source: <http://www.tricare.mil/faqs/question.aspx?ID=1741> 19 Nov 07 ++]

>

>

> VA HOSPICE CARE UPDATE 01: Hundreds of hospice providers across the country are facing the catastrophic financial consequence of what would otherwise seem a positive development: their patients are living longer than expected. Over the last eight years, the refusal of patients to die according to actuarial schedules has led the federal government to demand that hospices exceeding reimbursement care limits repay hundreds of millions of dollars to Medicare. The charges are assessed retrospectively, so in most cases the money has long since been spent on salaries, medicine and supplies. After absorbing huge assessments for several years, often by borrowing at high rates, a number of hospice providers are bracing for a new round that they fear may shut their doors. In the early days of the Medicare hospice benefit, which was designed for those with less than six months to live, nearly all patients were cancer victims, who tended to die relatively quickly and predictably once curative efforts were abandoned. But in the

last five years, hospice use has skyrocketed among patients with less predictable trajectories, like those with Alzheimer's disease and dementia. Those patients now form a majority of hospice consumers, and their average stays are far longer - 86 days for Alzheimer's patients, for instance, compared with 44 for those with lung cancer, according to the Medicare Payment Advisory Commission.

>

> The commission, which analyzes Medicare issues for Congress, recently projected that 220 hospices - about one of every 13 providers - received 2005 repayment demands totaling \$166 million. The National Alliance for Hospice Access, a providers' group that is lobbying for a three-year moratorium on the collections, places the numbers at 250 hospices and \$200 million. Because fewer than a tenth of all hospice providers have faced repayment, Medicare officials suggest that management might have been an issue. But Lois C. Armstrong, president of the hospice access alliance, said that if the cap on Medicare reimbursements was not lifted, the availability of care would tighten at a time when demand for hospice care was exploding and when new research suggests it saves money for the runaway Medicare program. Medicare's coverage of hospice, which began in 1983, has become one of the fastest growing components of the government's fastest growing entitlement. Spending nearly tripled from 2000 to 2005, to \$8.2 billion, and nearly 40% of Medicare recipients now use the service. To be eligible, patients must be certified by two doctors as having six months or less to live, assuming their illness runs a normal course. They must agree not to bill Medicare for curative procedures related to their diagnosis. Medicare, which pays the vast majority of hospice bills, reimburses providers \$135 a day for a patient's routine home care. The hospice is then responsible for providing nurses, social workers, chaplains, doctors, drugs, supplies and equipment, as well as bereavement support to the family.

>

> Studies have reached various conclusions about whether hospice care actually saves money, especially for long-term patients. But a new study by Duke University researchers concluded that it saved Medicare an average of \$2,300 per beneficiary, calling hospice "a rare situation whereby something that improves quality of life also appears to reduce costs." In 1998, Congress removed limits on the number of days that an individual could receive Medicare hospice coverage, a move that encouraged physicians to refer terminal patients. But lawmakers did not remove a cap on the aggregate amount that hospice providers could be reimbursed each year, a measure designed to contain the program's cost. A hospice's total annual reimbursement cannot exceed the product of the number of patients it serves and a per-patient allowance set by the government each year (\$21,410 in 2007). For reasons that are not fully understood, problems with the cap have been most prevalent at small, for-profit hospices in Southern and Western states like Mississippi, Alabama and Oklahoma. Those programs typically have had higher proportions of noncancer patients and, thus, longer lengths of stay. But the Medicare advisory commission's analysis also determined that the average length of stay in the cap-busting programs was significantly higher for all types of patients, including those with cancer. Herb B. Kuhn, the deputy director of the Center for Medicare and Medicaid Services, said that finding was attracting attention at the center, which is eager to keep the hospice care benefit from morphing into a long-term care entitlement.

>

> Among the matters meriting review, he said, is whether doctors have been premature in certifying patients as terminal. Medicare has issued

disease-specific guidelines for the certifications, which must be made by both a personal physician and the hospice medical director. A number of hospice providers said ethical and legal constraints would prevent them from discharging patients who outlived their profit potential. But some said they sometimes delayed admission for those patients with illnesses that might result in longer stays. Like other providers, Richard R. Slager, the chairman and chief executive of VistaCare, which is based in Arizona and has programs in 14 states, said his company now aimed its marketing at cancer patients. After being hit with \$200 million in cap charges over four years - the equivalent of a year's revenues - Mr. Slager said he chose to close or sell 16 of 58 hospices. Some providers have survived only by aggressively recruiting new patients, using this year's Medicare reimbursements to pay off last year's cap charges, while stalling for Congressional relief.

[Source: New York Times Kevin Sack article 27 Nov 07 ++]

>

>

> VA CLAIM REPRESENTATION UPDATE 04: The recent gathering at Sidley Austin, a firm with 1,700 lawyers around the globe, is part of a growing effort to provide free legal help to thousands of veterans returning from Iraq and Afghanistan who are trying to win disability benefits from the Department of Veterans Affairs (VA). At the meeting which was covered by video to beam the meeting to other big law firms from Boston to Seattle lawyers were getting a tutorial in the arcane vagaries of veteran's law. "There are 100,000 veterans seeking benefits, and too many of them are waiting too long to get them," says Ron Abrams, who, with Bart Stichman, directs the National Veterans Legal Services Program, a non-profit group in Washington spearheading the effort. "These lawyers are going to treat these veterans the way they would treat their corporate clients." The approach marks the first time since the Civil War that attorneys have been recruited in large numbers to represent veterans. The lawyers hope their legal expertise will speed consideration of claims and result in better benefits for veterans, Stichman says. More than 50 of the largest law firms in the USA and more than 400 attorneys have signed up. Stichman and Abrams hope to start assigning veterans to the attorneys early next month.

>

> Amanda Smith, an attorney with the Philadelphia-based firm Morgan Lewis, says many of the participating lawyers are Vietnam veterans and "are appalled at the circumstances that they find veterans in today." Besides the push by big law firms, law schools in states such as the Carolinas, Virginia, Delaware, Michigan and Illinois also are offering free services to veterans. Craig Kabatchnick, who worked as a VA appellate attorney from 1990 until 1995, launched a clinic last January for veterans at North Carolina Central University's law school, where he now teaches. "We had all kinds of veterans who were very disabled, litigating against trained attorneys like myself who were defending the VA," Kabatchnick says. The VA would "win" if the claim was denied, Kabatchnick says. "Did we litigate to win? Absolutely. In cases where the veteran was representing himself, the VA win ratio was very high." Paul Hutter, the VA's general counsel, says its attorneys have an ethical obligation to fairly and justly review claims and settle meritorious cases quickly. "Our job is to ensure that veterans get the benefits allowed them by law," he says in an e-mail. Disability claims have increased from 578,773 in fiscal 2000 to 838,141 this year, according to VA figures. There are about 407,000 pending. The average processing time is 177 days, the VA says. Traditionally, veterans have represented themselves or sought assistance from a service organization, such as the American Legion or the Veterans of Foreign Wars. But many of the caseworkers in those groups

are overloaded with cases, Stichman says, and sometimes one volunteer oversees 1,000 veterans' claims.

>

> The approach has not led to quick compensation for veterans. Evidence supporting a veteran's claim - medical records or letters from colleagues - is not always submitted with the original claim. When that evidence is added later, it can lead to reversals or requests for reconsideration. That can add more than a year to the appeals process, the VA says. The Board of Veterans' Appeals either reverses or orders reconsideration of decisions made by VA regional offices 56% of the time, according to an analysis of VA figures by Stichman's group. Congress has long kept attorneys at arm's length from the veterans' disability process. Until last June, when federal law changed, paid attorneys could not work on cases until after a final decision by the Board of Veterans' Appeals. The VA is now considering regulations that would require all attorneys to pass a test in order to qualify to handle veterans' claims, according to Phil Budahn, a department spokesman. Service organizations, including the Disabled American Veterans and Veterans of Foreign Wars, vigorously fought the change in law. They are now pushing to repeal the law and support requiring a test, arguing that lawyers could turn what is supposed to be a non-adversarial process into a litigious one. "The fear was lawyers will dominate, and they'll ruin everything," says Thomas Reed, a law professor at Widener University in Wilmington, Del., who began offering free legal services to veterans in 1997. Joe Violante, national legislative director of the Disabled American Veterans, which represents 1.3 million veterans, says trained volunteers from the service organizations are far more experienced at representing veterans' claims than the newly recruited lawyers. "If the veteran is under the impression that an attorney is going to get their claim through faster, there's no proof of that," he says. Ron Flagg, a Sidley attorney involved in the pro bono veterans' project, says there are so many claims that the system is overwhelmed. "Lawyers are not the cure to all ills," he says. "But this is a problem where lawyers can be helpful." [Source: USA TODAY Laura Parker article 27 Nov 07 ++]

>

>

> DFAS 2008 COLA PAYMENTS: According to Defense Finance and Accounting Service (DFAS) officials based on the increase in the U.S. Consumer Price Index, there will be a cost-of-living adjustment increase for retired pay and Survivor Benefit Plan annuities effective 1 DEC. The COLA increase will be reflected in the 2 JAN 08 payment. Retirees being paid on an account where the retiree first became a member of the uniformed services before 8 SEP 80 and retired before 1 JUL 07 will receive a full COLA increase of 2.3%. The COLA increase for retirees being paid on an account where the retiree first became a member of the uniformed services on or after 8 SEP 80 will be as follows:

>

> -- 2.3% for those retiring before Jan. 1, 2007

> -- 2.3% for those retiring in the first quarter calendar 2007

> -- 2.3% for those retiring in the second quarter calendar 2007

> -- 0.2% for those retiring in the third quarter calendar 2007

> -- No increase for those retiring in the fourth quarter calendar 2007

>

> Retirees being paid on an account where the retiree first became a member of the uniformed services on or after 1 AUG 86 and retired on or before 1 JAN 07 but elected to receive a Career Status Bonus at 15 years of active service, will receive a COLA increase of 1.3%. Retirees being paid on an

account where the retiree first became a member of the uniformed services on or after 1 AUG 86, retired on or after 1 JAN 07, and elected to receive a Career Status Bonus at 15 years of active service will receive COLA as follows:

>

> -- 1.3% for those retiring before 1 JAN 07

> -- 1.3% for those retiring in the first quarter calendar 2007

> -- 1.3% for those retiring in the second quarter calendar 2007

> -- No increase for those retiring in the third or fourth quarter calendar 2007

> [Source: AFRN 21 Nov 07 ++]

>

>

> PENNSYLVANIA VSO SUPPORT: According to state Rep. H. William DeWeese (D-Waynesburg) Pennsylvania's four veterans' service organizations serving the state's 1.1 million veterans be able to provide expanded assistance and outreach through Veterans Services Officers (VSOs) under legislation that unanimously passed the House of Representatives 20 NOV 07. DeWeese noted that during the last few years, the federal government has not kept the promise of taking care of veterans. The legislation (S.B. 915), which now heads to Gov. Ed Rendell's desk, would provide \$450,000 in state funding for fiscal year 2006-2007 to the American Legion, Pennsylvania Department of Veterans of Foreign Wars, Disabled American Veterans and the Pennsylvania Department of American Veterans to continue to provide VSO support to veterans who need assistance securing Federal Veterans Benefits. VSOs assist veterans and their families in obtaining federal veterans' services and benefits (medical, prescription, and disability payments, etc.). They do all of the paperwork and help the veteran or their family navigate the red tape associated with applying for and receiving federal veterans benefits. The funding will be used to cover salaries, wages, benefits, training, and equipment associated with the hiring and retention of accredited veterans service officers and associated support staff. In 2004, the average annual benefit for a Pennsylvania veteran without a VSO was \$4,612 compared to \$11,122 when represented by a VSO. Pennsylvania veterans received \$1.1 billion in federal Veterans Administration compensation and pension benefits during fiscal year 2005. [Source: Herald Standard article 25 Nov 07 ++]

>

>

> VA BENEFITS VIDEO: The Department of Veterans Affairs is using a monthly half-hour video news magazine to inform military members, veterans and their families about the benefits earned through their service. The American Veteran tells the stories of veterans who have taken advantage of the many benefits and services available to them. The series is produced by the VA's Office of Public Affairs and the VA Learning University/Employee Education System. It is broadcast to VA facilities on the department's internal network and around the world on The Pentagon Channel and community cable services. The program is available on the VA Web site, www.va.gov <<http://www.va.gov>>. Click on "public affairs" and then "featured items." It can also be viewed on the Web site for The Pentagon Channel at www.pentagonchannel.mil <<http://www.pentagonchannel.mil>>. The American Veteran is produced for veterans of all eras and includes stories of heroism and sacrifice. The December edition includes an interview with a survivor of the Bataan Death March in World War II and a profile of a Vietnam veteran who lost a leg in combat, but has become an award-winning athlete and singer. [Source: Oted 16 Nov 07 ++]

>

>

> RETIREMENT TAX CONSIDERATIONS UPDATE 03:

> Inheritance Tax - An inheritance tax is an assessment made on the portion of an estate received by an individual. It differs from an estate tax which is a tax levied on an entire estate before it is distributed to individuals. It is strictly a state tax. Ten states still collect an inheritance tax. They are: Indiana, Iowa, Kansas, Kentucky, Maryland, Nebraska, New Jersey, Oregon, Pennsylvania and Tennessee. Connecticut was phased out after 2005. In all states, transfers of assets to a spouse are exempt from the tax. In some states, transfers to children and close relatives are also exempt.

>

> Estate Tax - The Economic Growth and Tax Relief Reconciliation Act of 2001 (EGTRRA) phases out the federal estate tax that culminates in full repeal in 2010. On a much faster track, the Act repealed over four years (2002 thru 2005) the federal estate tax credit to which state estate taxes were tied. In most states, estate and inheritance taxes are designed in such a way that states faced either a full or partial loss of estate tax revenues as this credit was phased out. States could avert this loss of revenue by "decoupling." Decoupling means protecting the relevant parts of their tax code from the changes in the federal tax code, in most cases by remaining linked to federal law as it existed prior to the change. Seventeen states and the District of Columbia have retained their estate taxes after the federal changes. Of these, 15 states -- Illinois, Kansas, Maine, Maryland, Massachusetts, Minnesota, New Jersey, New York, North Carolina, Ohio, Oregon, Rhode Island, Vermont, Virginia, and Wisconsin -- and the District of Columbia decoupled from the federal changes. Two states -- Nebraska and Washington -- retained their tax by enacting similar but separate estate taxes.

> - Of these, 12 states acted to decouple from the federal changes.

Illinois, Maine, Maryland, Massachusetts, New Jersey, Rhode Island, and Vermont enacted legislation linking their estate taxes to the federal estate tax as in effect before the 2001 tax bill.

> - Minnesota, which passes a tax conformity package each year, explicitly elected not to change its estate tax to conform to the federal changes.

> - North Carolina elected to decouple at least through 2005, and Wisconsin has decoupled through 2007.

> - Nebraska decoupled by creating a separate state estate tax on estates that exceed \$1 million based on the federal law before the 2001 changes.

> - Washington enacted a separate tax in 2005 with a somewhat different rate structure that applies to estates that exceed \$2 million after the state's original decoupling was nullified in court.

> - Five states and the District of Columbia will remain decoupled unless they take legislative action. In five states -- Kansas, New York, Ohio, Oregon, and Virginia -- and the District of Columbia, estate tax laws are written in such a way that the state will not conform to the federal changes unless it takes legislative action.

> [Source: www.retirementliving.com/RLtaxes.html
<<http://www.retirementliving.com/RLtaxes.html>> Jul 07 ++]

>

>

> CALIFORNIA & FEDERAL DISABLED BENEFITS (0% SC): Veterans who are residents of California who are rated 0% overall disabled by the VA as a result of a service connected (SC) determination are entitled to the following state and federal benefits. This list was last updated OCT 06. For residents of other states the federal benefits are the same but the state benefits will be in

accordance with that state's laws. To determine what they are check the VA website associated with the state in question:

>

- > 1. VA fee basis outpatient medical card for SC condition(s) requiring treatment.
 - > 2. Enrollment in VA Healthcare Priority Group 5 (no co-payment for healthcare; pharmacy co-payments required for NSC medications), or Priority Group 7 or 8 (co-payments required for both healthcare and pharmacy), depending on veteran's income and net worth.
 - > 3. Eligibility for sensor neural aids-hearing aids, eyeglasses, contact lenses-for Purple Heart recipients and former POWs, without regard to whether the condition producing need for such is service-connected.
 - > 4. Eligibility for VA Nursing Home care for any (NSC) condition, provided income and assets are within specified limits.
 - > 5. Eligibility for Service-Disabled Veterans' Insurance (RH).
 - > 6. Possible eligibility for special monthly compensation for loss or loss of use of a creative organ.
 - > 7. Possible eligibility for payment of annual clothing allowance for specified SC disorders resulting in need for prosthetic appliance or use of a wheelchair, or for certain skin conditions.
 - > 8. Possible eligibility for 10-point preference for Federal Civil Service employment. (Noncompensable (0%) disability must have been incurred in combat or have ascertainable residuals, 38 CFR § 3.357.)
 - > 9. Eligibility for 10-point preference for State of California employment.
 - > 10. Possible eligibility for Home Improvement and Structural Alteration (HISA) home modification grant.
 - > 11. Eligibility for CAL-VET College Tuition and Fee Waiver for children (Plan B).
- > [Source: CA Dept of VA website Nov 07 ++]

>

>

> CALIFORNIA & FEDERAL DISABLED BENEFITS (10% SC): Veterans who are residents of California who are rated 10% overall disabled by the VA as a result of a service connected (SC) determination are entitled to the following state and federal benefits. This list was last updated OCT 06. For residents of other states the federal benefits are the same but the state benefits will be in accordance with that state's laws. To determine what they are check the VA website associated with the state in question:

>

- > 1. VA fee basis outpatient medical card for SC condition(s) requiring treatment.
- > 2. Enrollment in VA Healthcare Priority Group 3 or Priority Group 6 (veterans with multiple 0% conditions receiving compensation at the 10% rate, 38 CFR § 3.324). No healthcare co-payments required for either group; both groups pay pharmacy co-payments for NSC medications, except for former POWs.
- > 3. Eligibility for sensorineural aids-hearing aids, eyeglasses, contact lenses-without regard to whether the condition producing need for such is service-connected.
- > 4. Eligibility for Service-Disabled Veterans' Insurance (RH).
- > 5. Possible eligibility for special monthly compensation for loss or loss of use of a creative organ.
- > 6. Possible eligibility for payment of annual clothing allowance for specified SC disorders resulting in need for prosthetic appliance or use of a wheelchair, or for certain skin conditions.
- > 7. Possible eligibility for education or training under VA Vocational

Rehabilitation (showing of marked employment handicap required).

> 8. Golden Access Passport for U.S. National Parks.

> 9. Eligibility for 10-point preference for Federal Civil Service employment.

> 10. Eligibility for 15-point preference for State of California employment.

> 11. Home loan guaranty funding fee exemption.

> 12. Possible eligibility for Home Improvement and Structural Alteration (HISA) home modification grant.

> 13. Eligibility for CAL-VET College Tuition and Fee Waiver for children (Plan B).

> 14. Possible eligibility for DMV Disabled Person Parking Placard.

> 15. If a 20-year military retiree, possible eligibility for CRSC.

> 16. Possible eligibility for the California Disabled Veteran Business Enterprise (DVBE) and the Federal Service Disabled Veteran Owned Business (SDVOB) programs.

> [Source: CA Dept of VA website Nov 07 ++]

>

>

> VETERAN LEGISLATION STATUS 29 NOV 07: For a listing of Congressional bills of interest to the veteran community that have been introduced in the 110th Congress refer to the Bulletin's House & Senate attachments. By clicking on the bill number indicated you can access the actual legislative language of the bill and see if your representative has signed on as a cosponsor. 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. A cosponsor is a member of Congress who has joined one or more other members in his/her chamber (i.e. House or Senate) to sponsor a bill or amendment. The member who introduces the bill is considered the sponsor. Members subsequently signing on are called cosponsors. Any number of members may cosponsor a bill in the House or Senate. At <http://thomas.loc.gov> you can also 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/d110/sponlst.html>. The key to increasing cosponsorship on veteran related bills and subsequent passage into law is letting our representatives know of veteran's feelings on issues. At the end of some listed bills is a web link that can be used to do that.

Otherwise, you can locate on <http://thomas.loc.gov> who your representative is and his/her phone number, mailing address, or email/website to communicate with a message or letter of your own making. [Source: RAO Bulletin Attachment 29 Nov 07 ++]

>

>

> Lt. James "EMO" Tichacek, USN (Ret)

> Director, Retiree Assistance Office, U.S. Embassy Warden & IRS VITA Baguio City RP

> PSC 517 Box RCB, FPO AP 96517

> Tel: (760) 839-9003 when in U.S. & Cell: 0915-361-3503 when in Philippines.

> Email: raoemo@sbcglobal.net <<mailto:raoemo@sbcglobal.net>> Web:

> http://post_119_gulfport_ms.tripod.com/rao1.html

> AL/AMVETS/DAV/FRA/NAUS/NCOA/MOAA/USDR/VFW/VVA/CG33/DD890/AD37 member

>

> BULLETIN SUBSCRIPTION NOTES:

> == To subscribe first add the above RAO email addrees to your address book and/or white list and then provide your full name plus either the post/branch/chapter number of the fraternal military/government organization you are currently affiliated with (if any) "AND/OR" the city and state/country you reside in so your addee can be properly positioned in the directory for future recovery. Subscription is open to all veterans, dependents, and military/veteran support organizations. This Bulletin sent to 63,581 subscribers.

> == To automatically change your email addee or remove yourself from Bulletin distribution click the below or send a message which includes your full name plus your old & new email.

>

>

>

>

>

>

>

> _____
> Change address / Leave mailing list:

> <http://ymlp19.com/u.php?raoemo+wbalpost2@cox.net>

> Hosting by YourMailingListProvider

>