

> RAO Bulletin Update

> 1 September 2007

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> THIS BULLETIN CONTAINS THE FOLLOWING ARTICLES

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- > -- VA Retro Pay Project [07] ----- (75% Processed)
- > -- NDAA 2008 [08] ----- (Unresolved Issues)
- > -- SSA Congressional Coverage ----- (Who Contributes?)
- > -- Military Travel Discounts & Offers ----- (Vacation Ideas)
- > -- Agent Orange Dig in Alaska ----- (Buried 40 Years)
- > -- Complementary & Alternative Medicine ---- (FDA Limits)
- > -- Alzheimer's [03] ----- (Heart Impact on Brain)
- > -- Army Retired Soldiers Pin [01] ----- (Mailing Complete)
- > -- AER Scholarships ----- (Retired USA Dependents)
- > -- AFRC Garmisch Partenkirchen ----- (Specials for Retirees)
- > -- VA Homeless Vets [06] ----- (Housing is Key)
- > -- AXPOW Hq Data Breach ----- (Personal Info Stolen)
- > -- NMCRS Scholarships ----- (What's Available)
- > -- VA Mileage Reimbursement [02] ----- (H.R.760 Impact)
- > -- Medicare Fraud [01] ----- (\$2 Million Wheelchair)
- > -- Filipino Vet Inequities [06] ----- (SMP Benefit Loss)
- > -- AO Compensation Package ----- (ExGratia Payment)
- > -- Purple Heart Hall of Honor ----- (Recipients Sought)
- > -- IRS Consumer Warning [01] ----- (Identity Theft)
- > -- SBP Automatic Coverage & Options ----- (Clarification)
- > -- TRICARE Reserve Select [07] ----- (Revamped Program)
- > -- Military Divorce & Separation ---- (A Private Civil Matter)
- > -- VA Facility Expansion [06] ---- (Canandaigua Campus NY)
- > -- VA Facility Expansion [07] ----- (Harlingen TX)
- > -- VA Facility Expansion [08] --- (New Orleans Medical Ctr)
- > -- VA Facility Expansion [09] ----- (Los Angeles CA)
- > -- VDBC [21] ----- (QoL Issues)
- > -- DoD Disability Evaluation System [05] - (Bush's Proposal)
- > -- DoD Disability Evaluation System [06] ----- (Unique)
- > -- Vet Cemetery Hawaii ----- (Kona Expansion)
- > -- Shingles [02] ----- (Vaccine Available at VA)
- > -- DoD Genetic Illness Policy ----- (Genetic Discrimination)
- > -- COLA 2008 [06] ----- (0.1% Below June's)
- > -- Tricare Step Therapy Regime ----- (Sleep Aids Experiment)
- > -- Retirement Tax Considerations [01] ----- (SS & Pensions)
- > -- Referral Bonus [03] ----- (Funds Run Dry)
- > -- Tricare Prime Networks ----- (Too Costly To Keep)

> -- AF JROTC Needs Retirees [01] ---- (Active Duty Pay Level)  
> -- Presidential Dollar Coins ----- (New Dollar Series)  
> -- Merchant Marine WWII Comp ----- (\$1000 Mo Pension)  
> -- VA Clinic Openings [07] ----- (Cape Coral FL)  
> -- Retiree Seminars 2007 ----- (Where to Go)  
> -- Veteran Legislation Status 30 AUG 07 ---- (Where We Stand)  
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> Editor Note: I have ceased using the email addree [raoemo@mozcom.com](mailto:raoemo@mozcom.com)  
<<mailto:raoemo@mozcom.com>>  
because spam messages at this addree have reached 150 daily. My email addree  
[raoemo@sbcglobal.net](mailto:raoemo@sbcglobal.net) <<mailto:raoemo@sbcglobal.net>> will be the primary  
addree I will be monitoring after 15  
SEP. I am activating [raoemo1@mozcom.net](mailto:raoemo1@mozcom.net) <<mailto:raoemo1@mozcom.net>> as  
a backup in the event comms via  
the primary addree should become disrupted.  
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> VA RETRO PAY PROJECT UPDATE 07: On 1 SEP 06 the Defense Finance  
and  
Accounting Service (DFAS) and the Department of Veterans Affairs (DVA)  
finalized plans for disabled military retiree retroactive pay, commonly  
called the VA Retro program. The program is designed to pay eligible  
military retirees any retroactive money due as a result of increases in  
their percentage of disability. These payments include adjustments to  
Combat-Related Special Compensation (CRSC), Concurrent Retirement and  
Disability Payments (CRDP), and DVA disability compensation. Individual  
amounts will vary based on differences in disability amount and length of  
retroactive period. No action is required by the retiree to initiate the VA  
Retro investigation. DVA is providing DFAS with the eligible retiree Social  
Security Number. Both organizations are working together to provide  
eligible retirees with their full entitlements to both DVA compensation and  
CRSC or CRDP. As of August 2007, over 98,000 cases have been processed or  
about 75% of the original 133,000 cases. To date, the DVA has paid \$133  
million and DFAS has paid \$28 million with the average payment being \$1,638.  
DFAS is now processing what are considered to be the more complex accounts.  
These involve multiple DVA rating adjustments, shifts by retirees between  
CRDP and CRSC, ex-spouse pay entitlements, and other issues that require  
lengthy record searches. Completion of all the original cases is  
anticipated to be no later than 15 NOV 07. Military retirees may call  
1(877) 327-M-F from 08-1630 (EST). Questions concerning disability  
percentages should be directed to DVA at 1(800) 827-1000. For all other  
questions regarding military retired pay, regular recurring CRSC or CRDP  
payments, allotments, taxes or any other retired pay-related business, call  
1(800) 321-1080 where service is available from 07-1900 M-F (except Federal  
holidays). Military retirees can also find periodic updates concerning VA

Retro on the DFAS web site <http://www.dfas.mil> . [Source: DFAS Retired Pay Newsletter Aug 07 ++]

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> NDAA 2008 UPDATE 08: Both the House and Senate versions of the 2008 National Defense Authorization Act (H.R. 1585 and S. 1547) have deficiencies which must be reconciled by Joint Committee this September. Neither version adequately addresses the following issues:

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> 1. Military SBP/DIC Offset, the Widows Tax, where the military Survivor's Benefit Payments (SBP) are offset dollar-for-dollar of VA Dependency Indemnification Compensation (DIC). SBP is purchased by the retiree from retirement pay; DIC is awarded based on death from service connected causes. The SBP/DIC offset impacts 61,000 surviving spouses. True, H.R. 1585 would award the survivor a small gratuity of \$40/month compared to the typical offset of approximately \$1000/month. Why bother? Repeal the SBP/DIC offset.

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> 2. Paid up SBP. Under current law, passed in 2003, one is considered "paid in full" after having paid 360 premiums and is at least 70 years of age. However, those who enrolled between 1972 and 1978, get no relief until APR 08 when the law takes effect ... some retirees will have over-paid 34% in premiums.

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> 3. Concurrent Receipt of military retirement pay and VA disability compensation. Under current law, approximately 30% of disabled retirees are eligible for either Concurrent Disability Retirement Pay (CRDP) or Combat Related Special Compensation (CRSC). Some 432,000 are excluded from CRSC because their disability is service connected (not combat related) and from CRDP because their disability less than 50% service connected.

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> 4. Another 161,000 retirees are excluded from CRSC/CRDP because they were medically retired under Chapter 61 with less than 20 years of retirement service. Section 653 of S. 1547, passed by the Senate Armed Services Committee, but not the Senate, would authorize 2.5% of basic pay for each year of service. Thus the Chapter 61 receives recognition for his earned retirement and would also be eligible for VA disability compensation. This is all that was asked for in the original concurrent receipt legislation. Section 653, of S. 1547 must be retained in the final legislation.

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> 5. Ten year phase in of CRDP. The original legislation provided for a 10-year phase in the amount offset by the prohibition against concurrent receipt. According to that schedule, the maximum increment was received in 2007 (restoration 60% complete) after which the increments progressively decrease; restoration will be 95% complete in 2009; the average monthly increment in 2014 will be less than \$0.30 per month per retiree which is not

cost effective to the government.

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> Veterans are requested to contact their representatives and urge them to sponsor and/or support any amendments to what will become the 2008 National Defense Authorization Act that will correct these deficiencies. One means of doing this is to refer to

[http://capwiz.com/usdr/issues/alert/?alertid=10241471&queueid=\[capwiz:queue\\_id\]](http://capwiz.com/usdr/issues/alert/?alertid=10241471&queueid=[capwiz:queue_id])

where a preformatted letter is available for editing and forwarding automatically. [Source: USDR Action Alert 29 Aug 07 ++]

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> SSA CONGRESSIONAL COVERAGE: Despite rumors to the contrary Congressman do

contribute to Social Security and their retirement program and have done so since 1984. Basically, they have the same plan as federal employees. If under the Civil Service Retirement System (CSRS) they do not pay into Social Security and do not receive Social Security benefits. If under the Federal Employees Retirement System (FERS) they do pay into Social Security and thus receive Social Security benefits. They have the same retirement plan as those under CSRS or FERS. They are also under the Federal Employees Health Benefit Plan (FEHBP). Therefore, for purposes of Social Security, retirement and medical care, they are treated the same as federal government employees. Like all workers, members under FERS pay Social Security payroll taxes equal to 6.2% of the taxable wage base, and the government (the U.S. taxpayers) covers the other 6.2%. But Members do not pay Social Security taxes on their entire \$165,200 annual salary. The maximum Social Security taxable wage base is \$97,500. Thus, by law, Members do not pay Social Security on the \$67,700 in annual wages they receive over the taxable wage base. Eligibility for Social Security benefits applies to Members of Congress the same way it applies to all citizens. But in addition to receiving Social Security benefits, members also receive generous Congressional pensions. They are eligible for a Congressional pension at age 62 with as little as five years of service. To receive Social Security, an age 62 worker must have paid into the system for at least 10 years to become fully vested. The amount of Social Security benefits a worker receives is based on a Social Security benefit formula that uses 35 years of highest earnings to determine the average earnings. Congressional pensions, on the other hand, depend on the number of years served and the highest three years of salary, yielding a much higher initial retirement amount.

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> By law Title 5, United States Code (Government Organization and Employees) defines under Section 2101 "For the purposes of this title - (1) the "civil service" consist of all appointive positions in the executive, judicial, and legislative branches of the Government of the United States, except positions in the uniformed services." Section 2106 defines a Member

of Congress "For the purposes of this title, "Member of Congress" means the Vice President, a member of the Senate or the House of Representatives, a Delegate to the House of Representatives, and the Resident Commissioner from Puerto Rico." Section 2107 defines a Congressional Employee as "For the purpose of this title, "Congressional Employee" means:

> - An employee of either House of Congress, or a committee of either House, or of a joint committee of the two houses;

> - An elected officer of either House who is not a Member of Congress;

> - The Legislative Council of either House and employees of his office:

> - A member of the Capitol Police;

> - An employee of a member of Congress if the pay of the employee is paid by the Secretary of the Senate or the Chief Administrative Officer of the House of Representatives.

> - The Architect of the Capitol and any employee of the Architect of the Capitol, employees of the Botanic Gardens and employees of the Capitol Guide Service

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> Fortunately for taxpayers, Members cannot retire with full salary. By law the starting amount of a Member's retirement pension may not exceed 80% of his or her final salary. Under Social Security, members would receive an initial benefit that's about 30% of their average earnings. And even convicted Members of Congress, like former Representative Randy Cunningham, continue to draw handsome pensions while in jail at the taxpayers' expense. Under existing law, pensions can only be taken away if a lawmaker commits treason or espionage. Cunningham was sentenced to more than eight years in prison after pleading guilty to conspiracy and tax evasion and admitting to accepting \$2.4 million in bribes, not to mention a Rolls Royce. According to The National Taxpayers Union, which tracks Congressional pensions, Cunningham who is 65 and served eight terms in the House, could receive about \$64,000 a year. Recently the Senate and the House grudgingly approved major ethics and lobbying reform legislation that would deny pensions to Members of Congress convicted of crimes such as bribery, perjury and similar crimes. [Source: TSC Social Security and Medicare Advisor 29 Aug 07 ++]

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> MILITARY TRAVEL DISCOUNTS & OFFERS: Before you start planning your next

trip, check out

[http://www.moaa.org/serv/serv\\_travel/serv\\_travel\\_offers/index.htm](http://www.moaa.org/serv/serv_travel/serv_travel_offers/index.htm) for offers on travel, lodging and activities. Although some are for active duty only many are available to veterans. Following are some of the present offers:

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> - Battleship Missouri Memorial: During each service branch's birthday week, active duty, reserve, and retired military personnel get complimentary admission (half-off for family members) to the Battleship Missouri Memorial at Pearl Harbor. "Mighty Mo" salutes these branches as follows: USCG Aug.

4-12, USAF Sept. 15-23, USN Oct. 13-21, USMC Nov. 10-18, and National Guard

Dec. 8-16 (Check next year for information about the Army's birthday week in June 2008.) If it's not your branch's birthday, military admission is \$10. Military members in uniform always get complimentary admission. Guided tours are \$7. Exclusive \$29 tours go below deck to restricted off-limits areas. For more information, call (877) 644-4896 or visit [www.ussmissouri.org](http://www.ussmissouri.org) <<http://www.ussmissouri.org>>.

Also, on 2 SEP, ceremony commemorating the 62nd anniversary of the end of World War II will be held on the ship's deck with patriotic music, Color Guard, a military salute and keynote speaker Adm. Timothy J. Keating, commander U.S. Pacific Command. Call (808) 423-2263 and press 7 to learn more.

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> - The Grand Ole Opry: One of the nation's best live country music shows -- in Nashville is honoring the U.S. military with a special "Summer Salute." Through SEP 07, just show your military ID when you pick up your ticket, and you'll receive coupons for a free family photo, free concession item, and discounts, offers and raffle tickets. To reserve tickets, call (800) 733-6779, and mention code MIL110X. As part of the Summer Salute, anyone can submit the names of soldiers close to them, and their names will be read live during special "Soldier Salutes" at Opry performances. Just write a note about the person and why you would like him or her to be recognized over the Opry airwaves. E-mail your dedication to [oprymail@opry.com](mailto:oprymail@opry.com) <<mailto:oprymail@opry.com>>, and include your name, city, and state. Opry performances are aired on the American Forces Television and Radio Networks and on more than 200 country radio stations across the country. For more info refer to <<http://www.opey.com>>.

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> - Cirque du Soleil: If Las Vegas is in your travel plans, you will want to see Cirque du Soleil, a gravity-defying unbelievable spectacular. *Mystère* at the Treasure Island Hotel & Casino is the original Cirque du Soleil production. Since 1993, its high-energy acrobatics and inspiring imagery have amazed spectators. *KÀ* at the MGM Grand is newer and even more awe-inspiring, with acrobatic feats, dance, puppetry, martial arts, and aerial adventures on a colossal, 360-degree rotating stage. Military members and veterans get a 50% discount. Your price for *Mystère* ranges from \$30 to \$47.50; for *KÀ*, \$49.50 to \$75 -- half the regular ticket price. Call (877) 274-6958 or visit a Cirque du Soleil box office and ask for the military discount (not available online.) You'll need proof of military service ready when you call and when you pick up your tickets.

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> - Skamania Lodge: This mountain resort in the Columbia River Gorge National Scenic Area, offers a great summer deal for military members

(retired or active), plus 20% discounts on golf and whitewater rafting. With its waterfalls, lakes, rivers, and forests, Columbia Gorge is truly an outdoor playground. Hiking and mountain biking trails surround the lodge, and nearby rivers offer great kayaking. If you are not the adventurous type you can cruise the Columbia Gorge Sternwheeler, or take a scenic train ride through the Hood River Valley aboard the Mount Hood Railroad. Stay Sunday through Thursday, and rates for a forest-view room start at \$99 for two adults and two children. This promotion continues through 5 SEP. Ask for "Promo Code MIL07" and present your military ID upon check-in. Skamania Lodge is 45 minutes from Portland OR. For information, call (800) 221-7117 or visit [www.skamania.com](http://www.skamania.com) <<http://www.skamania.com>>.

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> - JW Marriott Desert Ridge Resort: This resort in Phoenix AZ offers a "Welcome Home" package for military heroes which includes a deluxe guestroom upgrade, bottle of Champagne and 50-minute massage or other spa treatment. With summer rates starting at \$129, that's a 40% savings. The resort has a gorgeous spa, five swimming pools, and two 18-hole championship courses. Four acres of waterways weave through the property, with waterfalls, fountains, lakes, and whirlpools at every turn, plus a "Lazy River" and toe-cooling wet deck. When it's time to dine, choose from ten restaurants offering elegant indoor or al fresco dining. Advance reservations are required. Upon check-in you'll be asked to show Military Travel Deployment Orders (or any documentation that proves you served overseas -- whether it was during the past month or the last century). The package is good through 29 DEC 07. Visit [www.jwdesertridgeresort.com](http://www.jwdesertridgeresort.com) <<http://www.jwdesertridgeresort.com>> or call (480) 293-5000.

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> - La Costa Resort: This golf, tennis and spa resort in the coastal foothills of Carlsbad, just north of San Diego offers military men and women, as well as retired veterans a special rate of \$250 per night (plus \$21 daily resort fee). That's more than a \$100 savings. In December, the 552-room Spanish-colonial resort completed a top-to-bottom, multi-million-dollar renovation which unveiled not only a new indoor/outdoor spa, but also newly remodeled guestrooms, a clubhouse with fitness center and daily fitness classes, seven swimming pools, two restaurants, and enhancements to the two championship golf courses. La Costa is also home to the world-renowned Chopra Center, which offers leading-edge programs, services, lifestyle workshops, and products for mind/body healing. The offer is valid 1 SEP through 15 NOV 07; identification required. Call (800) 854-5000 or visit [www.lacosta.com](http://www.lacosta.com) <<http://www.lacosta.com>>.

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> - Colorado Vacation Packages: Gunnison County, Colo., offers a variety of excursions to help summer travelers enjoy Gunnison-Crested Butte. Packages include: Family Rafting: Two nights in a two-bedroom condo, plus a half-day rafting on the Gunnison River, for \$232 a night (\$58 a person); Horseback Adventure: Two nights' lodging and a 90-minute horseback ride starting at

\$65 a person; and Guys-only and ladies-only fishing trips. For more information about these and other vacation packages, visit <http://www.gunnisoncrestedbutte.com/> or call (800) 814-7988.

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> - Amusement Parks: Anheuser-Busch is offering a single day's free admission to any one SeaWorld or Busch Gardens park, Sesame Place, Adventure Island, or Water Country USA for servicemembers and up to three direct dependents. Any active duty, active reserve, ready reserve servicemember, or guardmember is entitled to free admission under the program. He or she need only register, either online at [www.herosalute.com](http://www.herosalute.com) <http://www.herosalute.com> or in the entrance plaza of a participating park, and show a DoD photo ID.

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> - Choice Hotels: Travelers over 50 can save 10% at participating Choice hotels with the 50+ Mature Travelers Rate; those over 60 can save 20% to 30% with advance reservations by requesting the Sixty-Plus Rate when they book. For more information or to make reservations, call (800) 424-6423 or visit <http://www.choicehotels.com/ires/en-US/html/MatureProgram>. Offer subject to availability; expires 31 DEC 07. Advance purchase requirements, minimum/maximum stays, blackout dates, and further restrictions may apply.

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> - Ireland B&B Vacation: Dooley Vacations' Ireland West package includes airfare, first night hotel, five nights in B&Bs, Irish breakfast daily, plus (manual) car rental for as little as \$799 (for departures from New York in June or October 2007). Rate is per person, double occupancy, and does not include taxes, surcharges, or fees. Subject to availability; some restrictions may apply. Visit <http://www.dooleyvacations.com/vacations/ireland-west/> or call (877) 331-9301 for more information.

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> - Revisit Korea: The Korea Veterans Association in Seoul, Korea, has substantially expanded eligibility for veterans and their families to visit Korea on the official Republic of Korea government-subsidized "Revisit Korea" tours. Effective immediately, widows and children of Korean War veterans killed during the war are eligible to participate in the Revisit Korea program. In addition, widows and children of Korean War veterans who have died since the war, or of veterans who because of health reasons cannot travel, also are eligible to participate in the name of their veteran husband/father. The name, unit, and dates of service of the veteran will be required to register for an official Revisit Korea tour under this revised eligibility criteria. For more information, call Military Historical Tours, (800) 722-9501 or e-mail [mht@miltours.com](mailto:mht@miltours.com) <mailto:mht@miltours.com>.

> [Source: MOAA Travel Discounts & Services Aug 07 ++]

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> AGENT ORANGE DIG IN ALASKA: The U.S. Army Corps of Engineers has begun

its search for Agent Orange at an old military equipment yard in Tok Alaska. Rumors have persisted for years that something awful was buried at an old construction site at the small community well down the Alaska Highway. In 2003, a former employee for a contractor working in the area 30 years ago provided something more than rumor when he told government officials that the Army ordered his employer to dig a hole and bury six barrels of what he believed to be the defoliant Agent Orange, a chemical that has since been linked to cancers and birth defects. The worker was familiar with Agent Orange. He said, in a Daily News-Miner story from 2003, that he helped spray Agent Orange at several sites of the military's White Alice Communications System, developed in the 1950s to transfer data from aircraft and missile early warning systems to the North American Aerospace Defense Command in Colorado. State and federal officials took his claim seriously. The work under way this week in Tok is further evidence of that seriousness, which itself is born from the immense health risks associated with Agent Orange. The government, in particular the Corps of Engineers, is acting responsibly in the public interest. The corps has hired environmental firm Jacobs Engineering to conduct the investigation. Officials say the corps will proceed cautiously, alternating between machinery and hand shoveling. If drums are found, tests will be performed to determine the contents and disposal methods. Plans call for transporting the drums to a disposal facility in Canada. The site where the excavation is occurring is under a gravel pad owned by a commercial construction company and used to store heavy equipment. A former Department of Defense employee has said that drums

of the cancer-causing herbicide were buried there 40 years ago. The cleanup effort is being coordinated with the Alaska Department of Environmental Conservation. Tok is 206 miles from Fairbanks and 328 miles from Anchorage. [Source: The Associated Press 23 Aug 07 ++]

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> COMPLEMENTARY AND ALTERNATIVE MEDICINE: New regulatory threats, some at

the urging of the pharmaceutical industry, could make it impossible for seniors to purchase certain products like vitamins and minerals without a prescription. It may sound outrageous, but seniors could soon be limited in their access to things as simple as protein shakes, vegetable juice and even herbal hand lotion without a prescription. The U.S. Food and Drug Administration (FDA) recently began imposing new regulations on products used in "Complementary and Alternative Medicine" (CAM). The Senior Citizens League (TSCCL) is concerned the expensive federal regulations will restrict seniors' access to commonly available items and drive up costs for those that remain on the market. In a draft of regulations the FDA gave the following example: "if a person decides to produce and sell raw vegetable

juice for use in juice therapy to promote optimal health, that product is a food subject to the requirements for foods . including the hazard analysis and critical control point system requirements for juices. If the juice therapy is intended for use as part of a disease treatment regimen instead of for general wellness, the vegetable juice would also be subject to regulation as a drug under the act." According to the FDA, CAM encompass a wide array of health care practices, products, and therapies that are distinct from conventional medicine. Examples include botanical and animal-derived extracts, vitamins, minerals, amino acids and proteins, just to name a few. In addition there would be new regulations of medical devices used by alternate medicine practitioners like chiropractors, massage and acupuncture therapists.

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> TSCCL believes the regulations could be costly to seniors and to Medicare. Alternative therapy and medical approaches are used by millions of Americans. The Centers for Disease Control and Prevention estimated, that the U.S. public spent between \$36 billion to \$47 billion on CAM therapies in 1997, an amount that was more than the U.S. public paid out-of-pocket for all hospitalizations in that year, and an amount that was approximately one-half of that paid by the U.S. public for all out-of-pocket physicians' services. TSCCL recently submitted comments on the draft FDA regulations, stating "classifying CAM products as drugs, the cost of access would increase, as consumers may have to visit and pay a doctor for a prescription, instead of being able to choose their own vitamins, minerals and dietary supplement intake." TSCCL is further concerned about the impact such regulation would have upon Medicare beneficiaries. Currently, Medicare reimburses few CAM therapies and products and seniors must pay out of pocket. Most Part D drug plans, for example, don't cover vitamins and supplements. TSCCL called on the FDA to withdraw the regulations. [Source: TSCCL Social Security and Medicare Advisor 29 Aug 07 ++]

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> ALZHEIMER'S UPDATE 03: Treating the heart may help the brain, scientists are learning. A new study suggests that treating risk factors for heart disease and stroke, such as high blood pressure and diabetes, may slow the progression of Alzheimer's disease. Researchers found that, among the dementia patients studied, those who had their vascular risk factors treated declined less than those who did not. "By slowing dementia progression, vascular risk factors treatment may delay the severe stages and have a significant impact on reducing the burden of dementia," said researcher Yan Deschaintre. The findings are important because they provide new hope for slowing the disease that currently has no cure. There are now more than 5 million people in the United States who suffer from Alzheimer's and the risk increases steadily with age, according to the Alzheimer's Association. Experts estimate that nearly half of those 85 and older may have the disease. The cognitive risk factors included in the study were high blood

pressure, diabetes, high cholesterol, atherosclerotic disease (which reduces the oxygen supply to the brain and could cause stroke), and tobacco smoking. Treatment was defined as receiving blood pressure medication, insulin or drugs to lower blood sugar, cholesterol-lowering drugs, or anti-clotting medications. Legislation introduced in the Senate by Barbara Mikulski (MD), "The Alzheimer's Breakthrough Act" (S. 898), with companion legislation H.R.1560 introduced in the House by Rep. Edward Markey (MA), would dramatically increase federal funding for Alzheimer's research and prevention; and "The Family Assistance Act" (S. 897), also introduced by Senator Mikulski (MD), which would create a \$3,000 tax credit for families caring for a loved one with a chronic condition like Alzheimer's to help pay for prescription drugs, home health care and special day care. Veterans are encouraged to ask their Members of Congress to support these bills. In addition, for those needing help, contact the Alzheimer's Association at 1(800-) 272-3900, or visit it on the web at: [www.alz.org](http://www.alz.org) <<http://www.alz.org>>.

[Source: TSCL

Social Security and Medicare Advisor 29 Aug 07 ++]

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> ARMY RETIRED SOLDIERS PIN UPDATE 01: The mailing of the Army Retired pin

packets is complete. These packets were sent to every Retired Soldier receiving or eligible to receive retired pay and every "gray area" Reserve Retired Soldier not yet 60 and not yet eligible to receive retired pay as of JAN 07. Soldiers retired after JAN 07 should have received their pins from their Retirement Services Officer. Addresses for the mailing came from the DFAS Retired Pay Center in Cleveland and Human Resources Command-St. Louis.

If you did not receive a packet, write to: Army Retirement Services, ATTN: DAPE-HRP-RSO (Retired Pins), 200 Stovall St., Alexandria, VA 22332-0470.

[Source: Army Echoes Sep - Dec 07 ++]

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> AER SCHOLARSHIPS: The Army Emergency Relief (AER) offers financial aid for full-time post-secondary study for dependent children of retired soldiers. Scholarships are awarded based on financial need, academic and leadership achievement. To ensure your child will be considered mail the application and all requested documents by 1 MAR 08. In the 2007-2008 Academic Year (AY), 2,780 students with complete applications were awarded scholarships, while 1,466 with incomplete applications did not receive scholarships. Aid ranges from \$1,000 to \$2,500 for financial need, plus various amounts for academics and leadership. AER administers the MG James Ursano Scholarship Fund for full-time students at an undergraduate, technical or vocational institution accredited by the Department of Education or for first-year expenses of service academy cadets. Students can be starting or continuing undergraduate or vocational studies for the 08-09

AY, AUG through JUN only. Funds may be used for classroom or online classes, tuition, books, fees, or room and board at the school accepting the funds. Students must reapply each year and carry a grade point average of at least 2.0 on a 4.0 scale. A student applying for the 2008-2009 AY may not reach age 23 before 1 MAY 09. The applicant must be an unmarried dependent child of an active duty or retired Soldier or a Soldier who died in either status. All Soldiers and students must be registered in the Defense Eligibility Enrollment Reporting System (DEERS). You can verify the student's DEERS status at 1(800) 538-9552. Applications for the 2008-2009 AY scholarships, will be available from 1 NOV 07 - 21 FEB 08 by writing to: HQ, Army Emergency Relief; MG James Ursano Scholarship Fund; 200 Stovall St.; Alexandria, VA 22332-0600. The application will also be at <http://www.aerhq.org> from 1 NOV 07 - 1 MAR 08. Mailed applications and/or supporting documentation must be postmarked no later than 1 MAR 08. Other deadlines are in the instructions. Applications and supporting documentation are not accepted by FAX or e-mail. Letters mailed in JUN 08 will notify on-time applicants about scholarship awards.

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> AER's Stateside Spouse Education Assistance Program is available to spouses of retired soldiers and surviving spouses of retired soldiers who died while residing in the U.S. All

> spouses must be registered in DEERS. This program does not apply to second undergraduate or graduate degrees. Those who receive free tuition through their jobs may not receive AER tuition assistance. They may apply for assistance for fees, supplies and books (no duplicates) for classes in which they're enrolled as full-time students which aren't covered by other funding. Stateside financial assistance is awarded based on financial need as shown by income, assets, family size, special financial obligations and circumstances. Scholarships are awarded annually for up to four academic years of full-time undergraduate study. Students must reapply each year. Funds may be used for classroom or online classes, tuition, fees, supplies and books (no duplicates) and will be paid by AER to the college or university. Students must maintain a grade point average of at least 2.0 on a 4.0 scale. Applications for the 2008-2009 AY will be available at <http://www.aerhq.org> from 1 NOV 07 - 1 MAR 08 or by writing to: HQ, Army Emergency Relief; Stateside Spouse Education Assistance Program; 200 Stovall St.; Alexandria, VA 22332-0600. Students can apply online and mail the supporting documents or print the instructions and application. Material mailed to AER must meet the deadline on the instructions. [Source: Army Echoes Sep - Dec 07 ++]

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> AFRC GARMISCH PARTENKIRCHEN (EUROPE): The Edelweiss Lodge and Resort

Armed Forces Recreation Center (AFRC) in the Bavarian Alps is offering two special packages to retirees and their guests. The first European Escape

package will run from 26 NOV - 6 DEC 07; the second will run from 6 DEC - 16 DEC 07. The packages include airport transportation, a welcome reception, 10 nights stay with breakfast, special European Escapes tours and a farewell dinner and gift. The cost is \$1,800 single occupancy; \$2,300 double occupancy. Retirees may sponsor a maximum of three rooms. AFRC officials caution that these packages sell out quickly. For more information, go to <http://www.edelweisslodgeandresort.com> or call (011-49) 8821-9440 from USA,

(49) 8821-9440 from Europe, or 08821-9440 from Germany. They add that they offer retiree packages year round and invite retirees to sign up for their e-mail newsletter through their homepage. [Source: Army Echoes Sep - Dec 07 ++]

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> VA HOMELESS VETS UPDATE 06: Nationwide, nearly half of today's homeless

veterans served in Vietnam. Many struggled for decades with drug dependency or post-traumatic stress disorder before finding themselves on the streets. Now veterans of the Iraq War are returning home, and a new report by the advocacy group Swords to Plowshares says many already are seeking emergency

housing. A recent federal study found that female veterans are especially vulnerable to homelessness. As chairwoman of the subcommittee that funds federal housing programs, U.S. Sen. Patty Murray (D-WA) was able to include \$75 million in a 2008 federal spending bill to provide more resources for homeless veterans. The bill has passed the Senate Appropriations Committee and will advance to the full Senate when Congress returns in September. In the wake of revelations about poor treatment of wounded soldiers and veterans, the Senate recently passed the Wounded Warriors Act, which directs the departments of Defense and Veterans Affairs to work together to make sure injured veterans don't fall through the cracks. Housing is key, said Doug Reid, Washington state director of Veterans of Foreign Wars. "There's nothing more important than housing. Veterans' mental health issues don't get better under a bridge. They get better with stable housing." Yet meeting the needs of homeless veterans requires more than providing them with a place to sleep, said Dr. Peter Hauser, chief of psychiatry at the Portland VA Medical Center. The vast majority of homeless veterans suffer from mental illnesses or substance abuse problems, he said. "An integrated approach is necessary." And symptoms of traumatic brain injury may not become apparent for years, Hauser said. Tim Montague, an outreach worker at the transitional housing unit who until recently worked in Walla Walla, said he has found families of veterans trying to survive on the fringe of society. "They hide out in the woods," he said. "I found a whole family in the national forest living out of the back of a station wagon. They were out there because the programs don't help the whole family." Larry Brennan, program director at the veterans' facility, said he doesn't see many families in crisis, but

when he does, resources are scarce. He tries to place them with the Salvation Army or the YWCA. [Source: Military.com Veterans Report 27 Aug 07 ++]

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> AXPOW HEADQUARTERS DATA BREACH: On 11 or 12 AUG 07 there was a break-in

at National Headquarters for the American Ex-Prisoners of War, 3201 East Pioneer Parkway, Suite 40, Arlington, Texas 76010. All computer hard drives were stolen, along with several days of mail, checks and cash awaiting deposit and assorted paper files and records. These records include National Service Officer work, protected under Federal law. The Arlington Police Department, IRS, Department of Veterans Affairs, the United States Federal Attorney in Dallas and the USPS Postal Inspector were all notified. The concern is the database of members. These records, approximately 35,000, have social security numbers, dates of birth and VA claim numbers in them, along with names, addresses and other personal information. AXPOW members need to be alert for any fraudulent activities concerning their finances.

[Source: Military.com Veterans Report 27 Aug 07 ++]

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> NMCRS SCHOLARSHIPS: The Navy-Marine Corps Relief Society's (NMCRS) education programs help eligible Navy and Marine Corps families pursue their academic goals by providing a source of education financing through scholarships, loans, and/or grants. Awards are provided solely on the basis of the applicant's financial need, in accordance with policies established by the Society's Board of Directors. Depending on the type of program its administration is accomplished by either NMCRS Headquarters or local NMCRS offices. Following are the programs offered and administered by NMCRS Headquarters:

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> - Vice Admiral E. P. Travers Scholarship and Loan Program: Provides scholarships and interest-free loans to the dependent children of active duty and retired Navy and Marine Corps personnel, as well as spouses of active duty Navy and Marine Corps service members. The Travers scholarship provides students with grants ranging from \$500 up to \$2,500 for an academic year. The Travers loan offers interest-free loans from \$500 up to \$3,000 (for an academic year) to students' service member sponsors. One application form is used to apply for both the scholarship and the loan. The Travers application package is posted at <http://www.nmcrs.org/travers.html> each October for the following academic year.

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> - USS Tennessee Scholarship Fund, which was established upon the commissioning of USS Tennessee (SSBN 734). The scholarship provides grants of up to \$2,000 for an academic year to dependent children of service members who are serving or have served aboard USS Tennessee. The

Tennessee

application package is posted at <http://www.nmcrs.org/spec-prgm.html>. Students who apply for the Tennessee Program may also apply for the Travers Program.

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> - Dependents of Deceased Service Members Scholarship Program: Provides grants for an academic year to children and unremarried spouses who are military dependents of deceased service members. Awards are determined by NMCRS Headquarters Education Division. . The Dependents application package

is posted at <http://www.nmcrs.org/child-dec.html> each October for the following academic year. Eligible applicants include:

> a. Dependent children of retired deceased service members.

> b. Dependent children of service members who died while on active duty not in a hostile fire zone.

> c. Dependent children and unremarried spouses of crewmembers who died as a

result of the missile attack on the ship in the Persian Gulf on May 17, 1987. (i.e. USS STARK Memorial Fund).

> d. Children and unremarried spouses of crewmembers who perished as a result of the terrorist attack of October 12, 2000 (i.e. The USS COLE Memorial Fund).

> e. Dependent children of deceased military personnel who perished as a result of the terrorist attack September 11, 2001 (i.e. The Pentagon Assistance Fund).

> f. Dependent children and unremarried spouses of active duty service members who died under hostile fire in a theater of combat operations during the Global War on Terrorism.

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> - Admiral Mike Boorda Scholarship Program: Provides grants ranging from \$500 up to \$2,500 for an academic year to students in the Marine Enlisted Commissioning Education Program (MECEP), Medical Enlisted Commissioning Program (MECP), and/or Meritorious Commissioning Program (MCP).

Applications

must be reviewed and endorsed by the student's commanding officer. The Boorda application forms are posted on <http://www.nmcrs.org/boorda.html> each

November. Application forms must be received by Headquarters no later than 1 MAY each school year. Note: In AUG 02, the Navy's Seaman to Admiral 21 Commissioning Program (STA-21) replaced the ECP and fleet accession NROTC

Programs. This Program provides full pay and allowances and up to \$10,000 in assistance for tuition, fees, and books. Consequently, STA-21 selectees are not eligible for the need-based Boorda Program.

> All applicants must have at least a 2.0 grade point average. All applications except those for the Boorda scholarships must be received at

Headquarters no later than 1 MAR each school year (about six months before the start of the fall semester). [Source: NMFA Government & You E-News 28 Aug 07 ++]

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> VA MILEAGE REIMBURSEMENT UPDATE 02: Section 5 of The Filipino Veterans

Equity Act of 2007 (H.R.760) would increase the travel allowance available to certain veterans for medical or vocational rehabilitation appointments. Veterans with a low income and veterans seeking treatment for a service related disability are currently eligible to receive 11 cents per mile for medical appointments at VA facilities with a \$3 deductible each way. Those traveling for a disability rating examination receive 17 cents a mile. Section 5 would eliminate the deductible and link the mileage reimbursement rate to that used by the federal government to reimburse employees for work-related travel in their personal vehicles. That rate is currently 48.5 cent per mile. In 2006 VA spent about \$55 million to reimburse veterans for travel to medical appointments and about \$5 million for veterans traveling for disability rating examinations. Based on information available from the VA the Congressional Budget Office (CBO) estimates that, in 2008, increasing the mileage rates and eliminating the deductible for medical appointments would require the appropriation of about \$340 million in that year alone. The cost reflects CBO's expectation that increasing the mileage rate would also increase the number of claims for reimbursement by about 10%. Assuming the mileage reimbursement rate would increase by 2% each year CBO estimates that implementing section 5 of H.R. 760 would cost about \$1.7 billion over the 2008-2012 period, assuming the appropriation of the necessary amounts. [Source: CBO Cost Estimate revised 21 Aug 07 ++]

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> MEDICARE FRAUD UPDATE 01: A Medicare beneficiary who has a prosthetic foot due to an amputation should not need a brace for a leg that no longer exists. Yet from OCT 02 through MAR 05, Medicare paid over \$2 million for braces after the program had paid for prosthetics for the same beneficiaries' legs, feet, or ankles. Just how many home-use hospital beds does Medicare think one senior needs? Because the government wasn't checking the bills closely, apparently quite a few. The Government Accountability Office said earlier this year that Medicare could have saved almost \$71 million from JAN 03 through JUN 05 if the program had limited payments to just one bed per beneficiary per month. If that's not enough, Medicare also paid \$868.85 apiece for powered pressure-reducing air mattresses. And Medicare also spent an astounding \$2 million as a result of repeated billings for a single wheelchair. For the past two years federal agents have visited dozens of sham medical equipment companies in southern Florida and Los Angeles, California, that charged Medicare for prosthetic limbs, air mattresses, diabetic supplies, wheel chairs, urinary collection

bags, and other medical equipment. Some of the companies existed only on paper. Investigators reported examples of finding little more than a broom closet and a broken oxygen machine. Eduardo Moreno, for example, owned multiple medical-equipment firms in south Florida and allegedly billed Medicare for more than \$1.9 million in equipment that was not medically necessary, including \$865.85 for air mattresses. His 2004 Rolls Royce was recently seized. Feds have also seized dozens of other bank accounts with total balances exceeding \$40 million.

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> The crackdown is part of an effort to protect Medicare beneficiaries from fraudulent suppliers of durable medical equipment. Nationwide, such fraud is estimated in the billions. Unscrupulous medical equipment dealers sometimes fraudulently bill Medicare without the knowledge of the Medicare beneficiaries, and sometimes offer money for the use of Medicare numbers in order to bill the government for services the patients don't need or never receive. Others provide equipment, but bill Medicare for more expensive equipment than the patient received. Questions about Centers for Medicare & Medicaid Services (CMS) oversight have persisted for months. Industry insiders say that it's relatively easy to get a provider's billing number from Medicare and that supervision has been lacking. According to a report earlier this year, companies continued to bill the government a total of \$400,000 even after staff of the Health and Human Services Inspector General visited their offices and determined that the businesses did not exist. In south Florida, investigations have led to the suspension of 634 suppliers out of 1,472 investigated. In Los Angeles, 770 out of 2,000 suppliers had their billing privileges revoked. CMS recently announced a series of steps to strengthen requirements for medical equipment dealers, including stringent background checks and more frequent follow-up visits. Fraud costs both taxpayers and beneficiaries. TSCl Advisor editor Mary Johnson estimates that waste, fraud and abuse cost every Medicare beneficiary about \$72 in higher premium costs in 2005, the most recent year for which government data is available. TSCl supports tough enforcement and prosecution of those convicted of fraud. In addition, TSCl believes Congress must ensure that Medicare has the investigation staff and tools required to combat fraud, which has been proven to save the program about ten dollars for every one dollar invested. [Source: TSCl Social Security and Medicare Advisor 29 Aug 07 ++]

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> FILIPINO VET INEQUITIES UPDATE 06: House Committee on Veterans' Affairs

Ranking Member Steve Buyer (R-IN) commended the membership of The American

Legion on 24 AUG for their opposition to a bill which would cut nearly \$1 billion in benefits for elderly, disabled and financially disadvantaged wartime veterans. "In opposing benefits cuts to one group of veterans to

pay for another group, The American Legion has taken a forthright and principled stand for veterans," Buyer said. He referred to an 17 AUG letter from the Legion's national legislative director, Steve Robertson, to committee chairman and author of the bill H.R. 760, as amended, Bob Filner (D-CA). The letter also went to all members of the House. The bill, H.R. 760, as amended, would grant an \$8,400 annual pension for a married, non-U.S. citizen Filipino World War II veteran living outside the United States. A single Filipino veteran would get \$6,000 per year and a surviving spouse would receive \$3,600. Additionally, section 2 of the bill would qualify eligible Filipino veterans for VA medical care in the Philippines. Based on information from the VA the congressional Budget Office (CBO) estimates there will be about 30,000 eligible Filipino veterans living in the Philippines in 2008 and that their numbers will decline to about 24,000 by 2012. In 2006 the VA's average annual cost of providing medical care to veterans in the Philippines was about \$1700 per person and after accounting for inflation that average would increase to about \$2100 per person by 2012. According to the VA estimates 25% of all veterans use VA medical care. CBO estimates that implementing section 2 of the bill would increase VA health care cost by \$5 million in 2008 and \$55 million over the 2008-2012 period, subject to appropriation.

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> Special Monthly Pension (SMP) is a program administered by the VA for low income totally disabled, war veterans whose disabilities are unrelated to their service. Eligible veterans who have more than one disability may receive a higher payment in the form of a SMP at either the aid and attendance (A&A) level or the lower housebound level. Those whose second disability is rated 100% are eligible to receive the A&A SMP; those whose second disability is rated 60 to 90% are eligible for the housebound level. As of 2001 veterans over 65 are presumed to be totally disabled for the purposes of receiving the basic pension. Till a recent court hearing that presumption did not extend to SMPs. Veterans over 65 were required to have two disabilities rated at 100% each or one at 100% and one rated at 60% or greater to receive the A&A or housebound SMPs respectively. The Court of Appeals for Veterans' Claims found that the presumption of disability eliminated the need for the initial disability rating of 100%, significantly expanding the number of veterans eligible to receive the more costly SMP. Pursuant to that holding, VA began to pay the A&A SMP to veterans over 65 who have one disability rated at 100% and to pay the housebound SMP to veterans with a single disability of 60% or greater.

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> Section 3 of H.R.760 would change the eligibility requirements for SMPs to those in force before the court ruling thus reducing the number of veterans eligible for SMP and subsequently reducing the cost of the pension program. Based on data from VA, CBO estimates that over the next 3 years, of the 20,570 veterans over 65 who are receiving the basic pension because they were presumed disabled, 75% or 15,400 will apply for and receive a SMP.

From VA input CBO estimates 12,800 of those qualifying pensioners under current law will be found eligible for the A&A SMP and the remaining 2600 will receive the housebound SMP. Estimates are that about 3000 new pension recipients will qualify for the SMPs because of the court ruling. Thus under current law a total of 10,350 additional veterans will receive SMPs in 2008 and using normal mortality rates an additional 13,500 will receive SMPs by 2017 because of the court ruling. Using present and projected pension rates and adjusting for cost of living increase CBO estimates by 2017 the court ruling will increase direct spending on veteran's pension by \$485 million over the 2008-2012 period and by \$965 million over the 2008-2017 period. Enacting section 3 would undo that expected increase under current law, resulting in an equal amount of savings that would pay for the proposed new Filipino veteran benefits.

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> "Paying extremely generous benefits to Filipino veterans where the median annual Filipino family income is about \$2,500, shows the Chairman's priorities are wrong and paying for it by cutting benefits for elderly, poor, disabled U.S. veterans add insult to injury," Buyer said. "We would need to pay pension recipients over \$100,000 to match the buying power being given to residents of the Philippines." Budgetary offsets are necessary under the "PAYGO" rules of Congress for such spending. To create the offsets needed for H.R. 760, Filner amended his original bill by restricting eligibility for VA special monthly pension (SMP) benefits for about 20,000 severely disabled, economically disadvantaged and elderly wartime veterans. In restricting SMP eligibility, Chairman Filner "found" offsets totaling \$965 million. Committee Republicans were not allowed to offer amendments to preserve these pension benefits for U.S. veterans. "I look to other veterans advocates to recognize and oppose the shell game at play in this bill," Buyer said. "This is not a question about the valor and contribution of the Philippine armed forces in the Second World War. That is beyond debate and I note that the Legion does not oppose increased benefits for these veterans. However, to fund such increases by cutting benefits for elderly, poor and severely disabled or house-bound U.S. veterans who need it most - many themselves who served in World War II - crosses the line and I agree with the Legion's opposition to the funding provision. The American Legion clearly recognizes this injustice, as has AMVETS and the National Association for Uniformed Services in previous statements." [Source: HCVA Press Release 24 Aug & CBO Cost Estimate revised 2 Aug 07 ++]

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> AGENT ORANGE COMPENSATION PACKAGE: Speculation is rampant as to when

Canadian Prime Minister Stephen Harper's Conservative government will announce a compensation package for victims of Agent Orange and other herbicides at Canadian Forces Base Gagetown. Sources told The Daily Gleaner plans were afoot for an announcement late next week, but that has now

changed. Any compensation announcement is widely expected to be an ex gratia payment in the range of \$20,000 to \$24,000. Ex gratia means the funds are being paid voluntarily and the government accepts no liability. The uncertainty as to when such an announcement may be made follows the release 21 AUG of the latest health report. The document states cancer rates in the area in and around the base are no higher than in other parts of the province. The study prepared for Base Gagetown Fact-Finders Project did determine, however, that those involved in the preparation and distribution of the herbicide mix were at greater risk of developing a variety of health problems, including cancer. Agent Orange was tested at Canadian Forces Base Gagetown for four days in 1966 and for three days in 1967. The base also used commercially available chemicals known as 2-4-5-T and 2-4-D on its ranges to keep forest growth down. Using the province's cancer registry, the recent report examined mortality rates in the Gagetown area dating from the 1980s to 2003. While rates of soft-tissue sarcoma and non-Hodgkin lymphoma differed little when compared to the rest of the province, cancers of the breast, bone, larynx and brain were slightly more prevalent. Dr. Judith Guernsey, the author of the report, said there was no consensus within the scientific community that herbicides were responsible for the development of those types of cancer. The report is the last in a series that downplays health risks for people living near and working on the base. The final report from the fact-finders project is expected to be on the desk of Defense Minister Peter McKay in early SEP. [Source: Daily Gleaner Michael Staples article 23 Aug 07 ++]

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> PURPLE HEART HALL OF HONOR: The National Purple Heart Hall of Honor is

conducting a nationwide effort to register Purple Heart recipients in the museum's database. So far, 70,000 recipients have been registered since the Hall of Honor opened in New Windsor, NY in November, but organizers hope to enroll as many as 1.5 million, said Sergio Morales, a member of the museum's board of directors. Hall visitors can access the list of Purple Heart recipients on the museum's 15 computers that chronicle photos and stories about those who have earned the medal. The Defense Department does not keep

an official database of Purple Heart recipients. Hall of Honor organizers hope their efforts will create as complete a list as possible of those who have earned the medal to ensure they are not forgotten, Morales said. To register with the Hall of Honor, recipients must prove they received the medal by submitting the appropriate official documentation, including a DD-214, DD-215, WD AGO-53-55, General Orders or a Letter of Transmittal. Hall officials also requested recipients send a written narrative of how they earned their medal, any newspaper articles written about them receiving the medal, and any photographs of them while in the service. Although it's not required, recipients can also tape an interview at the Hall of Honor

chronicling their service and the events that led to their Purple Heart. An unedited copy of the DVD is given to the recipient, while an edited version is kept at the Hall and stored with that individual's record. Recipients can contact the Hall of Honor at (845) 561-1765 and 1-877-28HONOR, or on its website [www.thepurpleheart.com](http://www.thepurpleheart.com) <<http://www.thepurpleheart.com>>. [Source: NavyTimes Michael Hoffman article 27 Aug 07 ++]

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> IRS CONSUMER WARNING UPDATE 01: Federal agencies increasingly have been

the subject of phish scams this summer, and there seems to be no end to it. A phishing email allegedly sent by the IRS is being forwarded to many taxpayers. It says that the recipients are entitled to an IRS refund and to obtain that refund they must click on the form indicated in the email and complete it. The email successfully eludes the spam filters on many servers and the filters installed in recipient's computer email programs such as Outlook. Here is a copy of one I received:

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> "After the last annual calculations of your fiscal activity we have determined that you are eligible to receive a tax refund of \$109.30. Please submit the tax refund request and allow us 6-9 days in order to process it. A refund can be delayed for a variety of reasons. For example submitting invalid records or applying after the deadline. To access the form for your tax refund, please [Click here](#).

> Regards, Internal Revenue Service"

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> The IRS confirms that the email is a fraud, making it part of the 161 phishing scams that the IRS has identified this year, an IRS spokeswoman says. The IRS has received 14,000 emails from individuals who have forwarded on suspicious looking emails to [phishing@irs.gov](mailto:phishing@irs.gov) <<mailto:phishing@irs.gov>>, a mailbox the IRS set up

last year for individuals to send emails that look like they may be scams.

IRS has issued a number of warnings in the past 18 months alerting individuals about fraudulent emails coming from the IRS. Phishers are also using the Justice Department and Federal Trade Commission to launch attacks designed to trick individuals to give up personal information or to download malware. The agencies report that emails look quite sophisticated. Although, the latest IRS email doesn't look quite professional enough to come from the IRS, many individuals would be fooled by the official IRS logo and the screened copyright statement at the bottom. [Source: GOVExec.com 28 Aug 07 ++]

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> SBP AUTOMATIC COVERAGE & OPTIONS: DFAS reports that there appears to be

some confusion regarding the application of the automatic coverage provision under the Survivor Benefit Plan SBP and the SBP options available to the military retiree after retirement. The information below serves as guidance on these issues.

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> 1. Member with Beneficiaries at Time of Retirement: Automatic SBP coverage applies only at retirement. The automatic coverage provision does not apply to any situation which may occur after the member's retirement date.

Automatic coverage does apply to any member who, on the date of retirement, 1) did not make a valid SBP election, that is, an election for full coverage, less than full coverage, or declined coverage; and, 2) has a qualified spouse and/or child beneficiary.

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> 2. Member with No Beneficiaries at Time of Retirement: A member who has no eligible beneficiaries at retirement is not required to submit an SBP election. Automatic coverage does not apply in this case since the member has no eligible beneficiaries. However, if such member later acquires a spouse and/or child he may elect SBP coverage. The member would have one year from the date of acquisition to make an election to cover the newly acquired beneficiary. An election may be submitted by letter provided the intent to elect is clear and all information required for an election is provided. A letter which only notifies us that the member has married does not constitute an election of SBP. Again, there is no automatic coverage for any spouse and/or children newly acquired after retirement. In order to provide SBP coverage in this situation, the member must submit a valid positive written election which is received within the election period prescribed by law.

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> 3. Member Who Had SBP Coverage for Spouse and/or Child at Retirement: A member fitting this situation who later loses a beneficiary will have SBP coverage suspended during the period in which there is no eligible beneficiary. Should the member subsequently acquire a new beneficiary in the same class as was originally provided at retirement, the original coverage is reinstated for the newly acquired beneficiary. Reinstatement of coverage is not the same as automatic coverage. The reinstatement will happen when that person qualifies as an eligible beneficiary. For a new spouse, it would be on the first anniversary date, or sooner, if a child is born of the marriage. For a new child, it would be the date of birth (if a natural child) or the date of acquisition (if other than a natural child).

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> It should be noted that upon acquisition of a new spouse the member does have the option to either increase the level of coverage (base amount), or to terminate coverage. Such a request must be made by the member before the first anniversary date of the marriage. [Source: DFAS Retired Pay Newsletter Aug 07 ++]

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> TRICARE RESERVE SELECT UPDATE 07: TRICARE Reserve Select (TRS),  
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premium-based health plan that qualifying National Guard and Reserve members may purchase, was first authorized by Congress in 2005. The plan has improved every year, but changes for 2007 are the most significant yet. A streamlined TRS health care program launches 1 OCT 07. The revamped version

is affordable and simpler, with one premium level instead of the current three-tier system. Monthly premiums will be \$81 for the service member and \$253 for member and family coverage. TRS offers coverage comparable to TRICARE Standard and Extra. Members of the Selected Reserve can find out more about TRS and locate their TRICARE regional contractor contact information by entering their profile at the "My Benefits" portal at [www.tricare.mil](http://www.tricare.mil) <<http://www.tricare.mil>>. The revamped TRS also includes expanded survivor coverage, continuously open enrollment and much more. Gone are service agreements and differing qualifications for each of the three tiers.

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> There are now only two qualifications for TRS under the restructured program. First, the member must be a Selected Reserve member of the Ready Reserve. Second, the member must not be eligible for the Federal Employee Health Benefits (FEHB) program or currently covered under FEHB (either under their own eligibility or through a family member with FEHB). National Guard and Reserve members can contact their Reserve Component points of contact if they have 30 SEP 07. In essence, the old TRS ceases to exist and the new TRS starts 1 OCT 07. A letter from Secretary Hall was sent to the approximately 11,500 members currently covered by TRS. The letter explained the program changes and how to continue TRS coverage under the restructured program. All qualified members of the Selected Reserve who wish to purchase TRS under the restructured program must fill out the new form and forward it to the appropriate TRICARE regional contractor. If the member is new to TRS, or currently mails the monthly premium payment, then one month's premium must be sent with the form. Two forms, for the old TRS program in effect through 30 SEP and the new TRS program beginning 1 OCT, are available to eligible members of the Selected Reserve from the National Guard and Reserve Web portal located at <https://www.dmdc.osd.mil/appj/trs/index.jsp>. Since the current Tier program is in effect until 1 OCT, eligible members who wish to purchase TRS coverage now, and then continue under the new program, will need to send in both forms. [Source: MHS News Release 13 Aug 07 ++]

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> MILITARY DIVORCE & SEPARATION: Overall, it's important to realize that the military considers divorce and separation to be a private civil matter, best resolved by the courts. Sometimes military spouses expect too much out

of military authorities. They think they can contact their spouse's commander, and the commander will waive a magic wand and make everything better. In most cases, that's unrealistic. The commander has limited authority in the area of divorce & separation. The military only becomes involved in domestic situations in very limited, specific ways -- procedures which are authorized under law or military regulation -- usually when it concerns pay, benefits, property, etc., which are regulated by federal law. In a vast majority of military domestic situations, the correct procedure is to obtain an attorney, and take it to court. Military personnel and family members all have access to free legal services provided by the legal office (JAG). What most people don't realize, however, is the JAG is of very little help when it comes to divorce and separation. At most, the JAG can give you general advice. They cannot prepare divorce or separation documents, they cannot represent you in court, they cannot file legal divorce or separation paperwork for you. Quite often, even the general advice may be of little use, as there is no requirement that a military lawyer be licensed to practice law in the state they are stationed in, so the lawyer's knowledge of divorce laws of that particular state may be limited. For military divorce, separation, or child support situations, you need to consult with a civilian attorney, knowledgeable of the divorce laws of your particular state. The lawyer you choose should also have extensive experience with military-related family law because many things are different between military-related and civilian domestic situations. A family lawyer with military-related family law experience will have knowledge of the provisions of the Servicemembers Civil Relief Act (SSCRA) and the Uniform Services Former Spouse Protection Act (USFSPA), as well as specific provisions required for garnishment of military pay. Start by calling your local bar association, and ask them for a list of divorce lawyers in your area who specialize in military-related divorce situations. Some lawyers who specialize in military-related divorce situations advertise on the Internet (i.e. [http://usmilitary.about.com/od/divlawyers/Divorce\\_Lawyers.htm](http://usmilitary.about.com/od/divlawyers/Divorce_Lawyers.htm)). Many lawyers offer free initial consultations. Take advantage of that. Interview several lawyers and choose the best one for your particular situation.

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> Military ID Cards. Often military members mistakenly think that because regulations require them to submit an application for family member ID cards, and because they are listed as the sponsor, that they can confiscate their spouse's ID card any time they choose. However, family member ID cards (and the privilege granted by such cards) are an entitlement, granted by congressional law (not the sponsor). In other words, it's Congress who gets to decide who can and cannot have an ID card, not the military sponsor. A military member who unlawfully takes an military identification card away from his/her spouse can be charged for Larceny under the provisions of Article 121 of the Uniform Code of Military Justice (UCMJ). All of the services use the same joint regulation which governs the issuance of military identification cards. If the military member refuses to sign the

application for an ID for a military dependent, the regulation contains provisions where the Personnel Office may indicate such on the application form, and issue the ID card anyway. In most cases, the nonmilitary spouse will lose his/her ID card (and privilege) once the divorce is final, with two exceptions:

> a.) 20/20/20 former spouse. Full benefits (medical, commissary, base exchange, theater, etc.) are extended to an unremarried former spouse when the parties had been married for at least 20 years; the member performed at least 20 years of service creditable for retired pay; and there was at least a 20 year overlap of the marriage and the military service. If the former spouse is covered by an employer-sponsored health care plan, medical care is not authorized. However, if coverage is terminated, military medical care benefits may be reinstated upon application by the former spouse.

> b.) 20/20/15 former spouse. The former spouse qualifies for medical benefits (no commissary, bx, etc.) for one year from the date of the divorce, dissolution or annulment, when the parties had been married for at least 20 years; the member performed at least 20 years of service creditable for retired pay; and there was at least a 15 year overlap of the marriage and the military service. If the former spouse is covered by an employer-sponsored health care plan, medical care is not authorized.

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> Base Housing. While on-base family housing is issued to the military member, the member does not have the authority to evict his/her military family members. Only the installation commander has that authority. In fact, in most cases, when a domestic situation has deteriorated to the point where physical separation is warranted, the first sergeant and/or commander will usually order the military member to reside in the dormitory (barracks). This is because the military has the authority to house in the dormitories at no charge to the military member, but it has no authority to provide no cost billeting to military spouses. However, military family housing, by law, can only be occupied by military members who reside with their family members (other than authorized exceptions, such as when the military member is deployed, at sea, or serving in a remote-tour area). The services all have regulations which require the family housing unit to be vacated (usually within 30 days) if the military members stops residing there, or if there are no family members residing there. So, in most cases, in the event of a separation, the party remaining in the base housing unit must vacate unless the remaining party is the military member and other dependents, such as children, remain. The military will not pay for such moves, however. While the Joint Travel Regulation (JTR), paragraph U5355C authorizes the military to pay for short-distance household good transportation in the event a military member is ordered out of base housing, the regulation specifically prohibits this provision to be used for personal problems. The regulation states: "A short distance HHG move, incident to moving to/from Government quarters, is not authorized to accommodate a member's personal problems, convenience, or morale." [Source: About.com: U.S. Military Rod

Powers article 21 Aug 07 ++]

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> VA FACILITY EXPANSION UPDATE 06: To provide better health care into the 21st century for New York state veterans, the Department of Veterans Affairs has announced several major enhancements at the Canandaigua VA Medical Center. VA is developing modernization plans for the Canandaigua campus that include construction of a new single-floor 120-bed nursing home, a new 50-bed residential rehabilitation facility and a renovated outpatient building to meet the current and anticipated needs of Finger Lakes area veterans. The new facilities will be designed to preserve the historic core of the campus by renovating buildings in one of the historic courtyards to retain the ambiance of the 171-acre campus. VA will also explore partnerships with the private sector to generate revenue and complementary services for veterans by leasing under-used buildings and land at Canandaigua. VA Secretary Nicholson also announced Canandaigua is being designed as a "VA Mental Health Center of Excellence," working in collaboration with the department of psychiatry at the University of Rochester. In this capacity, the facility will oversee a broad range of efforts (locally, regionally and nationally) to improve mental health care for veterans. As a Center of Excellence, the facility will focus on suicide prevention, post-traumatic stress disorder and other mental health issues. In the interim VA has officially opened its National Suicide Prevention Hot Line (1-800-273-8255) at Canandaigua, which provides round-the-clock national assistance for veterans. The program is an important collaboration between VA and the Substance Abuse and Mental Health Services Administration

in the Department of Health and Human Services. The new construction and modernization at Canandaigua was a result of the Capital Asset Realignment for Enhanced Services (CARES) review process, which began in 2004 to upgrade

VA health care facilities across the country. Plans for the Canandaigua VA Medical Center will be integrated into the Secretary's nationwide capital plan so that a timetable and budget can be established, followed by congressional consideration for authorization and funding. As VA develops construction plans for the future of the facility, the Department will examine the potential use of portions of the 171-acre campus to assist in the delivery of other complementary services for veterans. [Source: VA Media Relations 16 Aug 07 ++]

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> VA FACILITY EXPANSION UPDATE 07: A new Health Care Center in Harlingen TX

announced 20 AUG by the Department of Veterans Affairs (VA) will vastly improve care to Valley veterans in South Texas, eliminating the vast majority of trips required by veterans to VA medical facilities in San

Antonio. The plans will provide a new VA health care center on the campus of the University of Texas in Harlingen. The announcement, which came after an independent study on the future needs of Valley veterans requested by Senator Kay Bailey Hutchison, included plans to expand services by VA health care facilities in McAllen and Corpus Christi. Bill Feeley, VA's Deputy Under Secretary of Health for Operations and Management said, "Once completed, the new health care center in Harlingen will eliminate about 95% of the trips veterans currently have to make to San Antonio for medical services. This plan will allow us to start providing specialty services to Valley area veterans this year, with even more expansion of services next year." The plans call for increasing the current VA health facility space in Harlingen from 11,700 square feet to nearly 160,000 square feet by 2010. When the facility is completed in DEC 08, it will provide a full range of expanded services in collaboration with the University of Texas Regional Academic Health Center, including specialty and diagnostic services, such as pharmacy, digital x-rays, CT scans, MRIs and other services; and outpatient surgeries, such as cataract removals, diagnostic colonoscopies and prostate biopsies, supported by outpatient operating rooms. [Source: VA Media Relations 20 Aug 07 ++]

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> VA FACILITY EXPANSION UPDATE 08: On 21 AUG the Department of Veterans

Affairs (DVA) announced a preferred downtown site for reconstruction of a VA Medical Center in New Orleans LA. Secretary of Veterans Affairs Jim Nicholson said the preferred site is located on 34 acres of land bounded by South Rocheblave Street to the north, South Galvez Street to the south, Tulane Avenue to the west, and Canal Street to the east. VA continues to evaluate collaboration with other local health care providers for shared services based on physical, financial and programmatic viability, including support for overall health care redesign. The downtown site must now undergo a mandatory environmental assessment, along with another site under consideration located 4.5 miles away in Jefferson Parish. At the conclusion of the review, a final decision on the site and acquisition of the land will be concluded. This year, VA expects to spend more than \$1.2 billion in Louisiana for the state's 350,000 veterans. VA operates major medical centers in Alexandria and Shreveport, eight community-based outpatient clinics, Vets Centers in Kenner and Shreveport and a nursing home in Alexandria. [Source: VACO OPIA Early AM Rpt 21 Aug 07 ++]

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> VA FACILITY EXPANSION UPDATE 09: Modern facilities for the future health care needs of Los Angeles veterans, new services for local homeless veterans, a columbarium and a regional office for the Department of Veterans Affairs (DVA) are all closer to becoming reality. DVA Secretary Nicholson's announcement came as a VA contractor completed its study of the West Los

Angeles VA Medical Center under the Capital Asset Realignment for Enhanced Services (CARES) review process, which began in 2004 to upgrade VA health care facilities across the country. The study's conclusions will be presented to the public and to a Local Advisory Panel appointed by VA to help the Department with its capital master plan. That meeting is scheduled for 6 SEP from 17-2100 at the Wadsworth Theater on the campus of the West Los Angeles VA Medical Center at 11301 Wilshire Boulevard. Nicholson also announced his decision to designate buildings 205, 208 and 209 available for homeless veterans programs. Plans to build a VA columbarium and relocate the VA regional office to the site are also included in all the options. The new columbarium will provide critically needed space for the cremated remains of veterans. Relocating the regional office, which handles claims for disability pay and other VA benefits, from the Los Angeles Federal Building to the medical center campus will provide more convenient services for veterans who need to coordinate medical care with benefits claims processing.

> Agreement has been reached with the Veterans Park Conservancy to designate 16 acres of land for use on the West Los Angeles campus. All improvements and any changes will first be approved by VA. The designation will be considered as part of any final CARES decision. At the Local Advisory Panel meeting, the consultant who prepared the study for VA will present a detailed analysis of the modernization options for VA to consider as the Department prepares to meet the future needs of southern California veterans. These options include:

- > . Constructing a new VA hospital;
- > . Renovating the existing hospital;
- > . Building a new VA nursing home;
- > . Modernizing the hospital's inpatient and outpatient mental health facilities.

> The meeting is the third public forum the Local Advisory Panel has held since the beginning of the CARES process. Time will be set aside for questions, and for community members to provide VA with their input on the proposed modernization plans. All options will take into account land already set aside for a new California state nursing home for veterans. The recommendations of the Local Advisory Panel and community feedback will be submitted to VA with the final report. [Source: VACO OPIA Early AM Rpt 21 Aug 07 ++]

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> VDBC UPDATE 21: The Veterans' Disability Benefits Commission (VDBC) has moved closer to completing its October report to Congress, tackling a multitude of recommendations from the Institutes of Medicine (IOM). Most of IOM's 40-plus recommendations were accepted by the commission, including those concerning the impact a disability has on a veteran's quality of life (QoL) and changes to individual unemployability (IU) determination and compensation. Here are some highlights of the commission-approved

recommendations:

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> - VA should compensate for work disability, loss of ability of useful life activities, and loss in QoL.

> - VA should develop a tool for measuring QoL, including the effects of disability on family members.

> - Congress should increase compensation rates 25% as an interim measure to address loss of QoL, pending development and implementation of a QoL measure.

> - VA should develop and test incentive models that would promote vocational rehab and return veterans to gainful employment.

> - VA should require vocational assessments in determining unemployable eligibility.

> - VA should gradually reduce the unemployability portion of disability compensation for those able to return to employment rather than abruptly terminating it

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> The Commission also developed two recommendations addressing the Center for Naval Analyses' testimony highlighting that members who become severely disabled at younger ages face a greater financial penalty because their earning careers are cut short, vs. those whose severe disabilities develop later in life. It recommended increasing compensation rates for younger disabled veterans to help eliminate the disparity. It also proposed paying a "severely disabled stabilization allowance" during the first three years after leaving service, to better address out-of-pocket costs severely disabled servicemembers face in their transition to civilian life. [Source: MOAA Leg Up 24 Aug 07 ++]

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> DOD DISABILITY EVALUATION SYSTEM UPDATE 05: The Bush administration is

preparing a legislative proposal to present to Congress in SEP 07 that would establish a separate and, under most circumstances, a more generous disability package for service members who are injured in war or while training for war, sources said. Under the plan, recommended by the Dole-Shalala commission, service members found unfit for duty as a result of combat or combat-training injuries, regardless of the number of years served, would qualify for an immediate lifetime annuity from the Department of Defense. Annuity amounts would be based on the formula used to calculate regular retired pay: 2.5% of basic pay multiplied by years in service. A wounded warrior with two years of service thus would get 5% of basic pay. Likewise, a service member injured in combat training who had served 10 years when found unfit would get 25% of basic pay. These members also would be get lifetime TRICARE, the military health and pharmacy plan. Separately they would get disability compensation from the Department of Veterans Affairs for any and all service-connected injuries or ailments. VA

compensation likely would be raised under the plan to include a quality-of-life allowance. But the portion of VA compensation now provided, and intended only to cover reduced earnings capacity, would stop at age 65 when social security begins. Issues not addressed regarding ability to draw social security are:

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> 1. Unless something is done very soon, because of decades of bad accounting practices, the Social Security Trust Fund is projected to go bankrupt in 30 years. The President's plan transfers the disabled veteran to a rapidly sinking ship without a life jacket.

> 2. What of the disabled service member who has less than 10 years Social Security earnings? Those with less than 10 years earning receive no benefit. There are already laws in place that reduce the Social Security Benefits for having less than 30 years of Social Security Earnings . The Windfall Elimination Provision is one of these laws.

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> The legislation is being drafted by DoD and VA officials and they continue to work out critical details. One issue outstanding is whether the changes should be applied retroactively, perhaps to all combat-related disabled members injured since the attacks of 9-11. But the Bush administration has decided that these disability pay changes should apply only to members with injuries from combat or combat training. That, officials say, adheres to the theme of Dole-Shalala, also known as the President's Commission on Care of America's Returning Wounded Warriors. Because the commission's charter focused solely on the needs of combat wounded veterans, its recommendations do too. Under the White House plan, non-combat disabled members still would come under current service disability retirement, with percentage awards based only on conditions that make the individual unfit for service. Non-combat disabled members rated below 30% still would get a lump-sum severance payment instead of an annuity and would not qualify for TRICARE. This point is expected to be vigorously opposed by advocates for disabled members. Though they generally are excited about the changes planned for combat-related injuries, advocates see stark inequities in having separate disability packages, one for wounded warriors and one for members with other service-connected injuries or ailments.

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> The White House position also seems to be in conflict with a principle of the Veterans' Disability Benefits Commission, which will complete its two-year comprehensive study of disability benefits in OCT 07. That commission already has voted not to treat disability benefits differently based on whether an injury is received in combat, advocates point out. One administration official brought another warning. If the VA-portion of disability compensation is not boosted as much as envisioned by Dole-Shalala, then certain disabled warriors actually might receive less in overall disability pay than non-combat disabled peers with equal rated conditions. Though advocates for disabled veterans see the Dole-Shalala

disability pay reforms as overwhelming positive for service members, which is why they want Congress to apply the changes to all members being separated as physically or mentally unfit, there are anomalies to be addressed, they said. For example, an E-4 with four year's service and a 30% rated a disability that leaves him unfit for duty would get service disability retirement today of \$546.07 a month. Under Dole-Shalala, if VA compensation remains at current levels, with no qualify-of-life allowance, the same E-4 injured in war would receive longevity retirement of \$182.02 a month for his four years of service plus VA compensation of \$348. The total of \$530.02 a month would be \$16 less than awarded to the non-combat disabled member. Even in this case, however, VA compensation of \$348 a month is only for the unfitting condition. The VA typically will base compensation for any disabled veteran an average of 20% higher than the rating used for service retirement because the VA considers all service-connected conditions not just those that make the member unfit for continued service.

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> Several military associations and veterans groups met 31 JUL with Karen Guice, the Dole-Shalala commission's deputy staff director, to clarify what commissioners intended regarding two military disability systems. Retired Air Force Col. Mike Hayden, a benefits expert with Military Officers Association of America, said Guice assured the group that commissioners, if asked, would recommend that their disability pay reforms extend to all disabled members not just the combat injured. That seems in keeping with the report's criticism of the confusion and complexity that now exists with DoD and VA having separate disability systems. Dole-Shalala would end that dual track, removing DoD from the rating business. Yet the White House seeks to have separate disability systems within DoD itself, citing the same report. This has drawn criticism even within the administration as concerns rise over the impact on morale of categorizing disabled members based on where or when they are injured. President Bush, during a 13 AUG visit to the VA medical center in Washington D.C., said the Dole-Shalala recommendations "make a lot of sense, and we would ask for the Congress to pass those as quickly as possible, so I can sign them into law." To comment on how do you feel about this issue, e-mail [milupdate@aol.com](mailto:milupdate@aol.com) <<mailto:milupdate@aol.com>>, write Military Update, P.O.

Box 231111, Centreville, VA, 20120-1111 or visit: [www.militaryupdate.com](http://www.militaryupdate.com) <<http://www.militaryupdate.com>>?

Also, let your public officials know how you feel. This can be easily done by referring to

[http://capwiz.com/usdr/issues/alert/?alertid=10240471&queueid=\[capwiz:queue\\_id\]](http://capwiz.com/usdr/issues/alert/?alertid=10240471&queueid=[capwiz:queue_id])

to forward a preformatted message or one of our own making to your representatives. [Source: Military.com Tom Philpotts article 23 Aug 07 ++]

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> DOD DISABILITY EVALUATION SYSTEM UPDATE 06: The Military Officers

Association of America (MOAA) has informed their members that sources tell them the Bush Administration has directed the Defense Department to move out quickly and develop a legislative proposal to change the military disability retirement system. But the proposal would be strictly limited to people who are disabled by combat-related wounds, as recommended by the Dole-Shalala Commission on Care for America's Returning Wounded Warriors. MOAA agrees rapid action is needed, but believes strongly the need to slow down this train just a little, and think twice before pushing an idea that might follow the letter of a Commission recommendation, but would completely violate its spirit. MOAA has talked to the Dole-Shalala commission members and staff, and they say in no uncertain terms that they never intended to propose a unique retirement system for combat-disabled members. They only looked at combat-disabled members because that's who their charter covered, so that's who's addressed in their report. But they'll tell anyone who asks that they think the same retirement and compensation rules should apply to all service-connected disabled members, not just those wounded in combat. That view is echoed strongly by the Veterans' Disability Benefits Commission, a separate group that's been studying the military and VA disability systems for two years and is due to report to Congress this fall. They recognize that, if military service causes a disability, the impact on the servicemember is the same, whether it was caused by a bullet, a building fire, or a military vehicle accident. It should be kept in mind that one of the purposes of the Dole-Shalala commission was to help find solutions to the maze of administrative roadblocks that kept disabled members and families from understanding their options and benefits. Proposing a new unique disability process that only applies to a relatively small percentage of disabled members will hardly make the system any easier to navigate, and will only create major new inequities. As we try to expedite action on the valuable recommendations of these important commissions, we must make sure we listen to what they're actually saying. [Source: MOAA Leg Up 24 Aug 07 ++]

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> VET CEMETERY HAWAII: To ensure Hawaii veterans continue to have a final resting place that honors their service to the nation, a senior official of the Department of Veterans Affairs (VA) announced on 21 AUG the award of a \$743,035 grant to expand the West Hawaii Veterans Cemetery in Kona. The grant will pay for the initial development of a new burial section, including 306 full-casket burial sites, an automated irrigation system and sod. Full development will include a committal service shelter, an assembly area, an in-ground cremation burial section, a restroom facility, a service yard with a covered storage area, supporting roads, walkways and infrastructure. Hawaii has seven other VA-funded state cemeteries: Hawaii State Veterans Cemetery in Kaneohe; East Hawaii Veterans Cemetery I and Cemetery II in Hilo; Kauai Veterans Cemetery in Hanapepe; Maui Veterans Cemetery in Makawao; Molokai Veterans Cemetery in Hoolehua; and Lanai

Veterans Cemetery in Lanai City. Procedures, regulations and arrangements for burial in the Hawaii State Veterans Cemeteries can be found at <http://www.dod.state.hi.us/ovs/documents/HSVC/Arranging%20For%20Burial.pdf>

or by calling the Hawaii Office of Veterans Service at [808] 433-0420. VA's State Cemetery Grants Program complements VA's 125 national cemeteries across the country. The program helps states establish, expand or improve state veterans cemeteries. To date, the VA program has helped establish 66 veterans cemeteries in 34 states, Guam and the Commonwealth of the Northern Marianas, which provided more than 22,000 burials in fiscal year 2006. Since the program began in 1980, VA has awarded 157 grants totaling over \$287 million. Information on VA burial benefits can be obtained from VA's national cemetery offices, from the Internet at <http://www.cem.va.gov> or by calling VA regional offices toll-free at 1[800] 827-1000. [Source: VA Press Release 21 Aug 07 ++]

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> SHINGLES UPDATE 02: A vaccine for shingles, which Department of Veterans Affairs (VA) researchers helped develop, is available to veterans who are patients at VA medical facilities nationwide. Secretary of Veterans Affairs Jim Nicholson said, "Shingles can seriously degrade the quality of life for those who suffer from this disease. Offering this vaccine to our patients is further evidence of VA's commitment to provide world-class health care to America's veterans. VA will continue research that leads to real-life solutions like the distribution of this shingles vaccine for patients at VA facilities across the country." VA physicians will offer the vaccine to patients with appropriate medical conditions, usually those who are 60 years of age or older and have healthy immune systems. A single dose of the vaccine offers protection against shingles, which is scientifically named Herpes Zoster. VA researchers and patients from across the country participated in studies which led to the vaccine's approval by the Food and Drug Administration. The vaccine is available immediately to those who are recommended for the treatment.

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> Shingles is a miserable painful skin and nerve infection caused by a reactivation of the chickenpox virus. Each year more than 800,000 Americans develop shingles, also known as herpes zoster. About half of those who live to 85 will get the disease that had chickenpox as a child. When a young person recovers from chickenpox the varicella zoster virus continues to remain in clusters of nerve cells next to the spinal cord. The immune system causes the virus to lay dormant for many years but as we age the immune system weakens allowing the virus to reactivate. Factors other than age that can heighten the risk of reactivation are those that compromise the immune system. AIDS, Hodgkin's disease, intake of drugs that suppress the immune system, and stress can play a role in triggering the disease. Contact with an infected person does not cause another person's dormant

virus to reawaken. However, the virus from a shingles patient may cause chickenpox in someone who has not had the disease before. When the virus reawakens it travels through the nerves to the skin. The first symptoms can be flu-like such as fever, chills, headache, nausea, or upset stomach. Some people experience itchiness, a tingling feeling, or pain in the initial stage. Within a few days, a painful rash develops usually on the chest, back or face. When the rash is at its peak it can be intense and unrelenting. This rash develops into small, fluid filled blisters that begin to dry out and crust over after about a week. For most people the disease will resolve without treatment and after one attack the condition is unlikely to return. If treatment is provided with antiviral drugs within the first couple of days it can reduce the pain and may help prevent a shingles complication known as postherpetic neuralgia. This condition results from damaged nerves and can continue long after the rash heals. While not life threatening, Shingles can develop into chronic pain that may bring with it insomnia, weight loss, depression, and other medical problems. Fortunately, only about 10% of all people with shingles develop post herpetic neuralgia and in most cases the pain is not severe and goes away within a couple of months. If shingles appear on the face it can lead to vision or hearing problems. If the cornea becomes infected the result can cause permanent blindness. [Source: VACO OPIA Early AM Rpt 23 Aug 07 ++]

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> DOD GENETIC ILLNESS POLICY: While genetic discrimination is banned in most cases throughout the country, it is alive and well in the U.S. military. For more than 20 years, the armed forces have held a policy that specifically denies disability benefits to servicemen and women with congenital or hereditary conditions. The practice would be illegal in almost any other workplace. There is one exception, instituted in 1999, that grants benefits to personnel who have served eight years. "You could be in the military and be a six-pack-a-day smoker, and if you come down with emphysema, 'That's OK. We've got you covered,' " said Kathy Hudson, director of the Genetics and Public Policy Center at Johns Hopkins University." But if you happen to have a disease where there is an identified genetic contribution, you are screwed." Representatives from the Pentagon declined multiple requests to discuss the policy.

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> The regulation appears to have stemmed from an effort to protect the armed services from becoming a magnet for people who knew they would come down with costly genetic illnesses, according to Dr. Mark Nunes, who headed the Air Force Genetics Center's DNA diagnostic laboratory at Keesler Air Force Base in Mississippi. A 1999 military analysis estimated that about 250 service members are discharged each year for health problems involving a genetic component. Disability payments for them would amount to \$1.7 million the first year and rise each year after that as more veterans join the rolls. Healthcare expenditures would have added to the tab. But the cost for

individuals medically discharged can be high. While some eventually receive benefits from Veterans Affairs or private insurers, the policy leaves many scrambling to find treatment for complex medical conditions at the same time they are reestablishing their lives as civilians without having the benefit of Tricare, the military's health insurance. Alex Capron, a professor who studies healthcare law, policy and ethics at USC said, "It seems particularly draconian to say, 'Well, you're out with no benefits,' whereas another person with the same injury gets the coverage simply because we don't know there's a gene in there that's causing this".

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> The fear of genetic discrimination coincides with early efforts to decode the human genome more than 25 years ago. It took no great insight to realize that a complete inventory of life's building blocks would not only revolutionize the practice of medicine, but also mark individuals whose genes put them at risk for myriad diseases. Congress took action in 1996, banning genetic discrimination in group health plans, and in 2000, President Clinton signed an executive order forbidding the practice against the federal government's nearly 2 million civilian employees. Similar laws against genetic discrimination swept through 31 states. Congress is working to extend the federal law with the Genetic Information Nondiscrimination Act, which would protect people with individual medical policies. The act has passed the House and awaits a vote in the Senate. Even if it becomes law, it will not apply to military personnel. Nunes said military doctors now discourage their patients from getting potentially life-saving genetic tests, undermining their ability to provide care. For many in the military, the best course is to simply refuse all genetic tests, even though they may be needed for an accurate diagnosis, she said. Getting genetic tests through civilian channels is not an option because it would violate the uniform code of military justice. "You could get court-martialed if it were revealed that you had sought medical treatment or testing outside the system," Nunes said.

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> The Defense Department's original policy did not consider genetics when determining whether a soldier deserved medical retirement, assuming that any disease discovered during service had been incurred in the line of duty. There was little reason to consider genetic mutations, since few were known. But by 1986, as scientists associated more sections of DNA with particular diseases, the military declared that it was not responsible for soldiers with "congenital and hereditary" conditions. According to Barbara Fuller, assistant director for ethics at National Human Genome Research Institute (NHGRI), which is part of the National Institutes of Health, DoD at the urging of the NHGRI proposed in 1999 that anyone who had served for 180 days be eligible for medical retirement, even if their health problem had a genetic component. But the Office of Management and Budget decided on the longer, 8-year term to conform with other military health and retirement guidelines, according to an OMB official. Nunes said, most soldiers have no idea about the genetic rule, much less have a reason to challenge it. For

those who choose to fight, it can be arduous process. [Source: Los Angeles Times Karen Kaplan article 19 Aug 07 ++]

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> COLA 2008 UPDATE 06: A surprising mid-summer decrease in energy prices drove a downturn in the July Consumer Price Index (CPI), the measure used to determine the annual cost of living adjustments (COLAs) for military retired pay, Social Security, and other federal annuities. On 15 AUG, the Bureau of Labor Statistics announced the July CPI value, indicating that inflation decreased 0.1% from the June figure. That means inflation has risen a cumulative 2.3% for the first 10 months of FY2007. In the past 30 years, the CPI only decreased twice between June and July (in 2001 and 2004). In both of those years, inflation rose only modestly during August and September. That's a small sample size and makes for an iffy projection, but if that experience holds true for the next two months of 2007, we're likely looking at a 2008 COLA in the range of 2.3% to 2.5%. To track the month-by-month fluctuation in the CPI refer to

[http://www.moaa.org/controller.asp?pagename=lac\\_issues\\_second\\_career\\_col](http://www.moaa.org/controller.asp?pagename=lac_issues_second_career_col)  
[a>](#).

[Source: MOAA Leg Up 17 Aug 07 ++]

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> TRICARE STEP THERAPY REGIME: On 1 AUG 07 the Tricare Pharmacy Program

(TMOP) started a step therapy regime for what is called the hypnotic class of medications. Hypnotics are what we would call sleep aids or sleeping pills. The class includes 4 drugs: Ambien, Sonata, Lunesta and Rozerem. If you have been taking any of these drug within the last 180 days this new program will not affect you (you are grandfathered). If this is a brand new prescription the Pharmacist is going to call the prescriber to see if regular Ambien may be substituted (Regular Ambien has gone generic-long term, Ambien CR is still under patent protection). It is a new experiment it its earliest stage. If Tricare saves a good deal of money with this program it is anticipated that they will want to use it with other drug classes.

[Source: TEA Washington Update 17 Aug 07 ++]

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> RETIREMENT TAX CONSIDERATIONS UPDATE 01:

> Social Security. Under federal law, taxpayers may be required to include a portion of their Social Security benefits in their taxable adjusted gross income (AGI). Most states begin the calculation of state personal income tax liability with federal AGI, or federal taxable income. In those states, the portion of Social Security benefits subject to personal income tax is subject to state personal income tax unless state law allows taxpayers to subtract the federally taxed portion of their benefits from their federal AGI in the computation of their state AGI. Many states exclude Social

Security retirement benefits from state income taxes. The District of Columbia and 26 states with income taxes provide a full exclusion for Social Security benefits -- Alabama, Arizona, Arkansas, California, Delaware, Georgia, Hawaii, Idaho, Illinois, Indiana, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Mississippi, New Jersey, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, and Virginia. The remaining 15 states with broad-based income taxes tax Social Security to some extent:

- > - Kansas, Minnesota, Missouri, Nebraska, North Dakota, Rhode Island, Vermont, and West Virginia tax Social Security income to the extent it is taxed by the federal government.

- > - Connecticut, Iowa, Montana and Wisconsin tax Social Security income above an income floor. Iowa will gradually phase out its Social Security tax levy from 2008 through 2014. Wisconsin will fully exclude Social Security beginning in tax year 2008.

- > - Colorado, New Mexico and Utah require that federally untaxed Social Security benefits be added back to federal AGI to calculate the base against which their broad age-determined income exclusions apply.

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- > Pensions. States are prohibited from taxing benefits of U.S. military retirees if they exempt the pensions of state and local government retirees. Most states that impose an income tax exempt at least part of pension income from taxable income. Different types of pension income (private, military, federal civil service, and state or local government) are often treated differently for tax purposes. States are generally free from federal control in deciding how to tax pensions, but some limits apply. State tax policy cannot discriminate against federal civil service pensions.

- > - Ten states exclude all federal, state and local pension income from taxation. These include Alabama, Hawaii, Illinois, Kansas, Louisiana, Massachusetts, Michigan, Mississippi, New York and Pennsylvania. Among these 10 states, only Kansas taxes any Social Security income, but only to the extent it is subject to federal taxation. These 10 states differ on the taxation of retirement income from private-sector sources.

- > - Kansas and Massachusetts do not exclude any private-sector retirement income, but most of the others allow a fairly broad exclusion. Pennsylvania allows a full exclusion. Alabama excludes income from defined benefit plans. Hawaii excludes income from contributory plans. Illinois and Mississippi exclude income from qualified retirement plans. Louisiana, Michigan and New York cap the private-sector exclusion at \$6,000, \$34,920 and \$20,000, respectively.

- > - Five states (California, Connecticut, Nebraska, Rhode Island, and Vermont) allow no exemptions or tax credits for pension and other retirement income that is counted in federal adjusted gross income. Most in-state government pensions are taxed the same as out-of-state government pensions. However, Arizona, Idaho, Kansas, Louisiana, New York, and Oklahoma provide greater tax relief plans than they do for out-of-state government pension

plans. The District of Columbia also provides greater tax relief for DC government pensions than for state government pensions.

> - Three states (New Jersey, Massachusetts, and Pennsylvania) do not allow IRA contributions to be deducted from taxable income. Of the three, only Pennsylvania does not tax IRA earnings of taxpayers age 59 ½ years or older, since earnings are treated like pension income, which is tax exempt.

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> Retired Military Pay: Some states provide special tax benefits to military retirees. Others simply follow the federal tax rules. The states that do not tax retired military pay are: Alabama, Alaska, Florida, Hawaii, Illinois, Kansas, Kentucky\*, Louisiana, Massachusetts, Michigan, Mississippi\*, Missouri\*, Nevada, New Hampshire, New Jersey, New York, North Carolina\*, Oregon\*, Pennsylvania, South Dakota, Tennessee, Texas, Washington, Wisconsin and Wyoming (\*With conditions).

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

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> REFERRAL BONUS UPDATE 03: Due to lack of funding, the Army National Guard

has cancelled enlistment and retention bonuses except for soldiers scheduled to deploy in 2008 or 2009, and it appears likely that its recruiting campaign will end on 31 AUG, unless it can do something about funding. Also running out of money at the end of August will be the Guard Recruiting Assistance Program, which pays soldiers up to \$2,000 for each individual they recruit into the Guard. That program has been the source of some 42% of the Guard's recruits. The dearth of funds also leaves in limbo Guard members whose re-enlistment windows expire before Congress provides the funds. Congress will be unable to fix the problem until sometime after it returns from summer recess on 4 SEP. In the interim Army officials have implemented a new bonus for recruits who sign up by the end of this fiscal year. The \$20,000 "quick-ship" bonus is for aspiring recruits with no prior military service who enlist for at least two years of active duty and report to basic training within 30 days of enlistment. The program ends 30 SEP 07.

[Source: Armed Forces News 17 Aug 07 ++]

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> TRICARE PRIME NETWORKS: More than 168,000 Tricare Prime enrollees -- those in managed care networks set up more than 40 miles from a military base or a base closure site -- could lose access to those networks and therefore pay higher out-of-pocket costs under new Tricare support contracts to take effect in 2009. Retiree advocates say a proposed change to the next generation of contracts, floated by Tricare in a draft bid proposal, would encourage contractors like Humana, TriWest and Health Net to make more cost-competitive bids by dismantling provider networks that are not near military treatment facilities or Base Realignment and Closure (BRAC) sites.

Cutting the number of Prime Service Areas, or PSAs, would save the government money, but it would hit thousands of beneficiaries in the wallet. Retirees, their spouses and survivors living more than 40 miles from base would lose access both to Tricare Prime and also to Tricare Extra, the military's preferred provider option. They would have to shift to Tricare Standard, which for beneficiaries is the most costly of Tricare's three options. The number of doctors willing to accept Tricare patients also could tighten in areas where PSAs no longer would exist.

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> Tricare officials declined to comment on the potential effect of the draft Request for Proposal, or RFP, which was released for review by potential bidders and other interested parties a few months ago. Officials said they do not want to influence comments from bidders they receive. An official did emphasize that the RFP is only a draft. But the comment period in fact closed 19 JUL with few filed. A final RFP is expected to be issued soon. The new contracts likely will be awarded next year, take effect in MAR 09 and run for six years. Such contracts are vital to Tricare, the health plan of 9.2 million military beneficiaries. More than half of all beneficiaries, roughly 5 million, are enrollees in Prime, the managed care option. Service members get care at no charge. Other Prime enrollees pay an annual fee of \$230 for individual or \$460 for family coverage and modest co-payments for doctor visits, lab tests and hospital care. Beneficiaries who prefer to choose their own doctors, or who cannot access Prime where they live, use Tricare Standard instead, the fee-for-service plan. Standard users pay an annual deductible of up to \$150 for individuals or \$300 for families, plus a hefty share of all medical bills -- 20 or 25% of "allowed charges" depending on patient category. Standard users can be stuck with additional costs if doctors will not accept Tricare allowable rates. But total medical costs per family cannot exceed a \$3000 a year catastrophic cap. A third option is Tricare Extra, also for patients not enrolled in Prime. Extra provides a five percent discount on co-payments set under Standard because beneficiaries agree to use a Prime network provider.

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> Because the military only has hospitals, clinics and staff to treat a fraction of its beneficiary population, it partners with large private-sector healthcare companies to run robust networks of healthcare providers. Support contracts for Prime alone cost DoD an estimated \$6 billion a year. When existing contracts were let, companies were allowed to add millions of dollars to their offers by promising to establish PSAs for beneficiaries living far from any base. Contractors were rewarded, or at least not punished, for such initiatives. Even if they could not claim to be the lowest bidder, they could still win the contract by claiming best value. The draft RFP for the next generation of contracts says specifically that bids will be judged on providing Prime networks only for government mandated PSAs (i.e. those near military treatment facilities and BRAC sites). Any additional PSAs will be evaluated as neutral which means a

contractor will not help their competitiveness in this round of bidding by promising to extend the number of PSAs beyond base catchment areas. Figures requested by Tricare officials from current contractors indicate the number of beneficiaries enrolled in PSAs that are more than 40 miles from bases or BRAC were: South region 90,281, North region 59,049, and West region 18,738 enrollees. Thus 168,000 current enrollees will be forced to revert to Tricare Standard or Tricare Extra and pay more out of pocket expense under the next generation of contracts. Tricare Prime Remote coverage would be unaffected by the new contracts. Veterans living outside the 40 mile radius of a PSA are encouraged to let their representatives know how they feel about DoD's plans. [Source: Military.com Tom Philpott article 16 Aug 07 ++]

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> AF JROTC NEEDS RETIREES UPDATE 01: The JROTC program has been in operation since 1966, when it opened at 20 schools. Today, 48 states and DoD schools in nine foreign countries are involved in the program. Only Idaho and Montana do not participate because of the small size of the high schools in those states. More than 1,900 Junior ROTC instructors, who teach at 869 school units worldwide, recently finished their initial instructor training at Maxwell AFB Alabama. Jo Alice Talley, chief of JROTC instructor management at Air Force Officer Accession and Training Schools (AFOATS), said the newly hired instructors learned about unit management and teaching skills and procedures. Greg Winn, deputy director of Air Force JROTC (AFJROTC), said the two weeks of instruction also are provided to change the instructor's mindset from military to a high school environment. "An instructor's job requires a completely different focus," he said. "That's why many of the speakers we have for the initial training have doctorates in education. This helps with the mental transformation." Mr. Winn said the mission of JROTC is not recruiting, but to build "citizens of character" for the community. He said the feedback from teachers, parents and students indicates it is, "a great program that truly makes a difference in the lives of the 105,416 cadets currently enrolled in JROTC."

> For those interested in becoming an instructor now or further down the road, Ms. Talley said instructors must be retired military from any Air Force specialty with at least 20 years of active duty and have good morale character. "We accept retired technical sergeants to chief master sergeants on the enlisted side, and captains through colonels on the officer side," she said. "Officers have to have a bachelor's degree, and enlisted members have to complete an associate's degree within five years of being hired for JROTC duty."

> Ms. Talley said the fact that Airmen can come from any specialty is important because it allows anyone who is qualified to join JROTC. Among others, she has retired chaplains, dentists and astronauts working as JROTC instructors. She said AFOATS does not have a budget for recruiting instructors, so she uses any and all military publications when possible, and the instructors themselves are great at passing the word to friends and

former colleagues about the benefits of being an instructor. She is always looking for female and minority members to be instructors because these are the two fastest growing groups of JROTC cadets. Minorities currently comprise 53% of JROTC students, and females comprise 43% of the cadets, but only 5% percent of the instructors are female.

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> All instructors actually work for the school system in the areas where they teach, and a member's retirement pay is supplemented by the local school board or district. With the retirement pay, the amount an instructor is paid is the same sum the member would receive if on active duty. Ms. Talley said the rule of thumb is that a person has to join the JROTC ranks within five years of retirement, but waivers can be arranged for up to 10 years after retirement. Air National Guard and Reserve members can now participate in the program. Before a change in the law governing JROTC occurred last October, it was impossible to figure a base salary because Guard and Reserve members were not eligible for retirement pay until they were 60 years old. There is no age limit regarding JROTC instructors. The program maintains a "fill rate" of between 96 and 99% for instructor positions, but that still leaves 50 to 60 vacancies for both retired enlisted members and retired officers. Anyone interested in becoming involved in JROTC should call Ms. Talley at (866) 235-7682, Ext. 7742, or e-mail her at [junior.rotc@maxwell.af.mil](mailto:junior.rotc@maxwell.af.mil) <<mailto:junior.rotc@maxwell.af.mil>>. The AFOATS Web site <http://www.afoats.af.mil> has a link to access the AFJROTC page. There is also a video on the Web, done by Air University Television that tells the JROTC story. [Source: Air University Public Affairs Carl Bergquist article 15 Aug 07 ++]

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> PRESIDENTIAL DOLLAR COINS: Most folks can correctly name George Washington as the nation's first president. After that, things get tricky. The U.S. Mint is hoping its new dollar coin series will help refresh some hazy memories about the names of Adams, Jefferson and the rest. That could be a tall order, however, given the results of a poll the Mint commissioned to find out just how much Americans know about their presidents. According to the telephone poll conducted by the Gallup Organization last month, nearly all those questioned knew that Washington was the first president. However, only 30% could name Thomas Jefferson as the nation's third president, and memories of the other presidents and where they ranked was even more limited. Only 7% could name the first four presidents - Washington, Adams, Jefferson and Madison - in the correct order. While 94% knew Washington was first, only 8% knew James Madison was fourth. And when it came to the next four presidents - James Monroe, John Quincy Adams, Andrew Jackson and Martin Van Buren - only 16% of those surveyed could name any president in that group and only 2% could name them all. Mint Director Edmund Moy believes the new dollar coin series will be an antidote for that.

And he can cite a good precedent. The Mint's 50-state quarter program, the most popular coin series in history, has gotten an estimated 147 million people involved in collecting the quarters that are honoring the states in the order they were admitted to the Union.

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> The new Jefferson dollar coin entered circulation 16 AUG when people could purchase them at banks and on the Mint's Web site. The Jefferson dollar follows the Washington coin, which was introduced in February, and the John Adams coin, introduced in May. The coin honoring James Madison will enter circulation NOV 07, and four more of the nation's presidents will be honored every year in the order they served in the White House. By having a rotating design on the new dollar coins, the Mint is hoping to keep interest high and avoid the famous flops of two previous dollar coins - the Susan B. Anthony, introduced in 1979, and the Sacagawea, introduced in 2000. The presidential coins are the same size as the Sacagawea, slightly larger than a quarter, and also golden in color. Skeptics, however, believe they will suffer the same fate as the Sacagawea unless the government gets rid of the \$1 bill, something Congress has strongly opposed. Moy insisted in an interview that the Mint has learned from the failures of the past dollar coins and that the new presidential series has a good chance for success, in part by finding niche markets such as vending machines, where a dollar coin will be more convenient than getting a pocketful of quarters in chang. " Vending machine companies are spending up to \$1 billion a year in maintenance costs due to paper jams," he said. "More use of dollar coins will mean less in maintenance costs." To bolster the coin program's educational aspect, the Mint has developed special lesson plans on its Web site <<http://www.usmint.gov>> for use by parents and teachers. The survey to determine people's knowledge of the presidents was based on telephone interviews with 1,000 adults conducted 18-25 JUL. It has a sampling error of plus or minus 4 percentage points. [Source: AP Martin Crutsinger article 15 Aug 07 ++]

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> MERCHANT MARINE WWII COMPENSATION: On 20 JUL 07 the House passed the "Belated Thank You to the Merchant Mariners of World War II Act of 2007". The bill now goes to the Senate for consideration and if passed by them as is would establish a fund to pay eligible Merchant Marine veterans through fiscal year 2012 a \$1000 monthly pension. Eligible individuals would be those who Before 1 OCT 09, submits to the Secretary of the Veterans' Affairs department an application containing such information and assurances as the Secretary may require; Has not received benefits under the Servicemen's Readjustment Act of 1944 (Public Law 78-346); and has engaged in qualified service. A person is considered to have met the qualified services requirement if, between 7 DEC 41, and 31 DEC 46, the person was a member of the United States merchant marine (including the Army Transport Service and

the Naval Transport Service) serving as a crewmember of a vessel that was:

- > - Engaged in qualified service.
- > - Operated by the War Shipping Administration or the Office of Defense Transportation (or an agent of the Administration or Office);
- > - Operated in waters other than inland waters, the Great Lakes, and other lakes, bays, and harbors of the United States;
- > - Under contract or charter to, or property of, the Government of the United States; and
- > - Serving the Armed Forces and while so serving, was licensed or otherwise documented for service as a crewmember of such a vessel by an officer or employee of the United States authorized to license or document the person for such service.

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> There is concern among some veterans' organizations that passage of this legislation would create disproportionality of the proposed benefits for merchant mariners, however honorable and meritorious their wartime service, compared to compensation afforded to and continuing inequities imposed on long-serving military veterans whose service caused them to suffer disability and death. For example:

> - A World War II military veteran who served 20 years and retired in 1955 at the grade of E-5 is entitled to a military retired pay check of only \$900 in today's dollars.

> - The Defense Department today pays a "Forgotten Widows" annuity of only \$212 per month to widows of World War II veterans who served a full military career and died before 1974 (when the military Survivor Benefit Plan took full effect).

> - A military veteran with a 60% service-connected disability receives only \$901 per month in VA disability compensation.

> - The House of Representatives, in the FY2008 Defense Authorization Bill, acknowledged the inequity of current law that deducts more than \$1,000 a month from SBP payments to 61,000 survivors of members who died of service-connected causes, but indicated it could afford only a \$40 monthly payment to such widows as a first step toward reversing that penalty.

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> Many believe the much greater inequities affecting multiple categories of US military veterans and survivors merit a significantly higher congressional funding priority than this initiative. If these legislation was ultimately approved by congress, the annuity payable for a single month of Merchant Marine service in World War II would significantly exceed those payable to thousands of World War II combat veterans who served far longer and suffered significant combat disabilities, and cast in a comparatively unfavorable light Congress' far more modest initiatives to ease longstanding compensation inequities for US military widows. This is a very controversial issue with many veterans seeking an equitable balance of benefits among all groups while honoring the service of our WWII merchant Marines. Veterans are encouraged to let their representative know their

feelings on this subject. One means to do this is to refer to  
<[http://capwiz.com/usdr/issues/alert/?alertid=10192076&queueid=\[capwiz:queue\\_id\]](http://capwiz.com/usdr/issues/alert/?alertid=10192076&queueid=[capwiz:queue_id])>

to forward legislators a preformatted letter or one of your own design.

[Source: USDR Action Alert 15 Aug 07 ++]

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> VA CLINIC OPENINGS UPDATE 07: In 2006 Congress froze funding for a new,

multimillion-dollar veterans clinic in Cape Coral last year which has delayed the project by one more year. U.S. Sen. Mel Martinez, who visited the Fort Myers VA clinic on 14 AUG, said he wants to ensure the Florida Division of Veterans' Affairs gets the rest of the money needed to complete the Cape Coral project, estimated at nearly \$132 million. Congress authorized \$65.1 million for the Cape Coral clinic in 2004 because of an expected increase in the number of veterans seeking treatment in Southwest Florida , but the cost of the project is more than twice the authorized amount: \$131.8 million. The project has been in the works as the demand for veterans' care in Southwest Florida continues to rise and wars in Afghanistan and Iraq rage on. Lee County is home to an estimated 64,000 veterans. The existing 90,000 square foot Fort Myers Veterans Outpatient Clinic saw 28,000 patients in 2006, an increase of nearly 5,000 patients, and has had 89,000 visits since 2000.

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> Congress has spent \$9.9 million to purchase land on Diplomat Parkway and Corbett Road in Cape Coral for the 225,000-square-foot ambulatory/surgery outpatient diagnostic center. It also authorized \$6.5 million for planning and design, set for completion before the end of 2007.

The new clinic will have expanded pharmacy, prosthetic, laboratory, audiology, dental and optometry services. Patients will be able to have Computed Tomography, or CT, scans completed there instead of having to travel to St. Petersburg or go to another local agency, VA officials have said. The Cape Coral clinic is now set to open in early- to mid-2011, and once that one opens, the Fort Myers clinic will close according to Green said Kaye Green, FDVA's associate health care system director. [Source: Southwest Florida News-Press Betsy Martinez article 15 Aug 07 ++]

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> RETIREE SEMINARS 2007: There are several retiree conferences and seminars

held each year throughout the country, as well as in a few foreign locations. These seminars provide an opportunity for retirees to hear about current retired and annuitant legislative matters and activities, get questions answered and account changes made, gather information from other participating agencies (such as DVA and Tricare), as well as enjoy camaraderie with fellow retirees and annuitants. The 2007 Retiree Seminar

schedule below has been updated as of 1 JUL. Note the number of seminars has grown from 24 to 46, including the additions of NAS Millington TN this month, and NAS San Diego and Army Germany in October. There is a seminar planned for Northeast Ohio in October but the date has not been finalized.

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- > 09/07/07 Ft. McCoy, WI ---- POC: 608-388-3716
- > 09/07/07 NAS Kitsap, WA ---- POC: 360-315-3055
- > 09/08/07 NAS Whidbey Island, WA ---- POC: 360-257-8044
- > 9/13 thru 15/07 Ft. Sill, OK ---- POC: 580-4422645
- > 09/15/07 Scott AFB, IL ---- POC: 618-256-5092
- > 09/15/07 NAS Lemoore, CA ---- POC: 559-998-2977
- > 09/15/07 Camp Pendleton, CA ---- POC: 760-725-9789
- > 09/17thru 19/07 Cebu Republic of Philippines ---- POC: DSN 315-724-6195
- > 09/22/07 Nellis AFB, NV---- POC: 702-652-2578
- > 09/28/07 Duluth, MN ---- POC: 218-725-5285
- > 09/29/07 Ft. Campbell, KY ---- POC: 270-798-5280
- > 09/29/07 Twin Cities, MN ---- POC: 763-566-2219
- > 09/29/07 Selfridge ANGB, MI ---- POC: 586-307-5580
- > 10/06/06 Cleveland, OH ---- POC: 216-204-2309
- > 10/08 thru 10/07 AUSA Conv/Ft Detrick, MD ---- POC: 301-619-3381
- > 10/13/07 Ft. Monmouth, NJ ---- POC: 732-532-4673
- > 10/18/07 Ft. Monroe, VA ---- POC: 757-788-2970
- > 10/20/07 NAS Pensacola, FL ---- POC: 850-452-5990 Ext 3111
- > 10/20/07 Heidelberg, Germany ---- POC: 06221-57-3347 or 0049-6221-57-3347

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- > 10/20/07 NAS Willow Grove, PA
- > 10/20/07 Groton, CT
- > 10/21/07 Offutt AFB, NE
- > 10/25/07 Benelux, Belgium ---- POC: 065-44-4575 or 0032-65-44-4575 \*
- > 10/27/07 Grafenwoehr, Germany ---- POC: 09641-83-8539 or 0049-9641-83-8539

\*

- > 10/27/07 Rock Island, IL ---- POC: 563-322-4823
- > 10/27/07 Ft. Leavenworth, KS ---- POC: 913-684-2425
- > 10/26 & 27/07 Ft. Rucker, AL ---- POC: 334-255-9125
- > 10/27/07 Ft. Hamilton, NY ---- POC: 718-630-4552
- > 10/27/07 NAS San Diego, CA ---- POC: 619-556-8987
- > 10/27/07 Ft Hood, TX ---- POC: 254-287-5210
- > 11/02 & 03/07 Redstone Arsenal, AL ---- POC: 256-876-2022
- > 11/03/07 Ft. Gordon, GA ---- POC: 706-791-2654
- > 11/03/07 Hampton Roads, VA ---- POC: 757-322-9105

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> Note: Phone numbers with a star at the end of it identify the number you must call if you are calling from outside of that country.

> [Source: DFAS Retired Pay Newsletter Aug 07 ++]

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> VETERAN LEGISLATION STATUS 30 AUG 07: The House and Senate have both adjourned for the August recess and will not return till 4 SEP. For a listing of Congressional bills of interest to the veteran community that have been introduced in the 110th Congress refer to the Bulletin attachment. 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, 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 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 30 Aug 07 ++]

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>  
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>  
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