

RAO Bulletin Update
15 April 2007

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== Veteran Legislation Status 13 APR 07 ----- (Where we stand)

Editor's Note: Attached is a listing of veteran legislation with current cosponsor status that has been introduced in the 110th Congress. To see any of these bills passed into law representatives need input from their veteran constituents to guide them on how to vote.

SERVERS BLOCK BULLETIN: Recent updates to a number of servers' programs have impacted on a number of reader's ability to receive their Bulletin Updates. This seems to be an industry wide approach to deal with spam which places greater demands on users to ensure their computers are set up properly to receive email they want to receive. Last year AOL initiated changes that resulted in my having to delete over 12,000 of their users from the Bulletin directory. Now many MSN & Hotmail users are being prevented from receiving their Bulletin. The methodology by which the server's are installing their changes prevents the sender or user from knowing a message has been blocked. The only way I know on this end is if a subscriber sends me a message asking me why he/she is no longer receiving the Bulletin. Recently about 300 of the 2,556 MSN & 5030 Hotmail users on my directory have sent messages. To ensure continued receipt of the Bulletin suggest all readers follow the guidance of the next article titled, "Making Sure You Get Your Email" if you did not receive any recent Bulletins. For those who are not currently having a problem you may want to retain the below for future use in the event you server starts blocking your email. If this does not work for you and calling your server does not resolve the situation you can always refer to

http://post_119_gulfport_ms.tripod.com/rao1.html to read the latest Bulletin or forward me another email addee to send to. [Source: Editor RAO Bulletin 14 Apr 07]

MAKING SURE YOU GET YOUR EMAIL: Because of spammers, many Internet Service Providers (ISPs) and mail services use filters to keep spam out of their customer's email inboxes. Unfortunately, in the ever-escalating war between spammers and ISPs/mail services, many are accidentally caught in their cross-fire. The result is that ISPs or mail services often filter out email that you specifically ask to receive, such as this Bulletin. After you subscribe to anything like the Bulletin, you should take the following "whitelisting" steps to ensure that you actually will receive it.

- "Whitelist" the Bulletin's Email addrees in the Email Program on Your Computer
- "Whitelist" the Bulletin's Email addrees in the Spam Filter Software on Your Computer
- "Whitelist" the Bulletin's Email addrees at your ISP (Earthlink, Comcast, etc.) or Mail Service (Hotmail, Yahoo mail, etc.)

1. Whitelisting in the Email Program on Your Computer (ex., Outlook, Eudora): Put the e-mail addrees (raoemo@sbcglobal.net & raoemo@mozcom.com) into your e-mail program's Address Book and any "approved senders list" or "whitelist" it uses. This will help to get the Bulletins through corporate mail filters and other less-than-sensible blockers: Most e-mail software now has both built-in spam-filtering and whitelisting features. You can also create your own special filters to accept and file incoming e-mail, and to trash other ones. See your software's help menu for information about spam filters,

whitelisting, and creating your own filters, so that you can indicate to your software to accept mail from addressees you want to receive.

2. Whitelisting in the Spam Filter Program on Your Computer (ex., McAfee SpamKiller):

If you are using third-party spam filter software on your computer (ex., McAfee SpamKiller) to augment your e-mail software, indicate to that filtering software to accept emails from raoemo@sbcglobal.net & raoemo@mozcom.com. Either add them to some kind of a white list (or a "good list" or similar name), or click to indicate that mail filtered into a "Junk" folder is not junk -- all systems follow similar patterns, but the names may change. It is usually pretty straightforward, but you may need to search the software's Help menu for a bit of direction.

NOTE: Since the e-mail software-and-filter on your computer is the very end of the line, the Bulletin may be filtered out before it even gets to your computer. If you don't get e-mail that you are expecting, your ISP or mail service may be responsible.

3. Whitelisting Internet Service Providers (ISPs): Increasingly, Internet Service Providers that deliver your email (ex., earthlink.net, comcast.net) and mail services (ex., Hotmail, Yahoo) are using filtering systems to try to keep spam out of customers' inboxes.

Sometimes, though, they accidentally filter the e-mail that you do want to receive. Even worse, they often do not tell you what they have filtered out, so you never know whether a legitimate email has been deleted. The volume of spam is enormous and the algorithms to figure out what is spam (and what is not) are complicated, thus mistakes frequently do happen. Here's how to add raoemo@sbcglobal.net & raoemo@mozcom.com to the "whitelist" of your ISP or mail service. However, the procedure varies from ISP/mail service to service, so find the one below that applies to you.

AOL - Place raoemo@sbcglobal.net & raoemo@mozcom.com in your Address Book. Check AOL help for details, if necessary. Different versions have different features. For example in version 7.0, go to Keyword Mail Controls -- after you select your screen name and left-click on "Customize Mail Controls For This Screen Name," enter the above domains in the section "exclusion and inclusion parameters." For AOL version 8.0, select "Allow email from all AOL members, email addresses and domains." Then left-click on "Next" until the Save button shows up at the bottom. Left click on "Save."

ATT.net - If Spam-blocker is enabled and if the e-mail message is legitimate and was screened as spam, forward the original message as an attachment to this-is-not-spam@worldnet.att.net.

ATTGlobal.net - Your Graymail folder contains all possible spam e-mail. The Graymail folder shows up on the Spam Control page only after you activate the "Filter" option. Before you activate that option, there is no Graymail folder. Once you have enabled the Spam Control feature, they have created an e-mail address for you to send your feedback. If you receive e-mail identified as <> and it is not spam, send that information to notspammal@attglobal.net.

Bellsouth.com - You must opt-out of MailGuard to receive e-mail from us. Once it is

received forward it (with full headers) to this_is_good@bellsouth.net to have raoemo@sbcglobal.net & raoemo@mozcom.com whitelisted.

Other ISPs - Each ISP is a little different, but the idea is the same. ISPs usually provide help or instructions about whitelisting. But... If you can't find how to add the Bulletin email addressee to a whitelist, call or e-mail your ISP's tech support or postmaster@your-isp.com and specifically ask how you can be sure to receive all e-mail from raoemo@sbcglobal.net & raoemo@mozcom.com.

4. Whitelisting Mail Services:

Hotmail or MSN - Place raoemo@sbcglobal.net & raoemo@mozcom.com on what they call your Safe List. The "Safe List" can be accessed via the "Options" link, situated to the far right of the main menu tabs. NOTE: Hotmail's "safe list" often does not work.

USA.net - Login to your e-mail account and click on Services in the left-hand Navbar. You can Whitelist there. To configure your personal white list filters, follow these steps: Determine what you would like done to the messages that match one of your filters. This generally fits into two categories, Override or Exclusive.

a.) Override allows you to override your spam filters, including system spam filtering, and is handy when you have mail that is occasionally incorrectly marked as spam by the system spam filters.

b.) Exclusive allows you to limit the mail you receive to only those messages that match your White List; all other mail messages will either be considered Junk Mail or automatically deleted. If you choose Exclusive, you will need to specify whether to keep the mail as Junk Mail or to delete the mail.

If you choose to delete all mail that does not match your White List, this mail cannot be recovered later.

Yahoo! Mail - If the Bulletin is filtered to your 'bulk' folder, open the message and click on the "This is not spam" link next to the "From" field. You can also create a "filter" at Yahoo that sends the Bulletin e-mail into your Inbox and not the Junk/Bulk Mail folder. Here's how:

- 1) Open your Yahoo e-mail. Left-click on "Mail Options" (right side of your screen). In the right hand column, under "Management," left-click on "Filters." And then, left-click on "Add Filter."
- 2) Call this filter "PCOS Health Review".
- 3) See where it says... "if all of the following rules are true ..."? Go to the top row labeled "From header," choose "contains" in the drop-down menu and type in raoemo@sbcglobal.net & raoemo@mozcom.com.
- 4) At the bottom, choose "Inbox" from the drop-down menu where it says "Move the message to:"
- 5) Finally, left-click on the "Add Filter" button.

Other Mail Services - Each mail service is a little different, but the idea is the same. If you can't find how to add the email addressees to a whitelist, try adding them to your address

book, or moving the messages from the Junk folder to your 'inbox' or forwarding the message to yourself (if you're getting it at all, that is). If e-mail continues to be filtered out, call or e-mail your mail service tech support or postmaster@your-mailservice.com and specifically ask how you can be sure to receive all e-mail from raoemo@sbcglobal.net & raoemo@mozcom.com.

[Source: <http://www.wnd.com/resources/whitelist.asp> Mar 07 ++]

AGENT ORANGE VAVA COMPENSATION: South Korean and Vietnamese veterans of the Vietnam War are demanding compensation from US manufacturers of Agent Orange, which they say has caused them ongoing illnesses. The veterans share a bitter past as well as present agony. What they claim are the lingering after-effects of the deadly defoliant sprayed by the US during the war. More than 4.7 million Vietnamese are said to continue to suffer from a range of illnesses, including birth defects, cardiovascular disease, cancer and nervous disorders because of the chemical defoliant dropped during the war in which South Korea fought alongside the U.S. troops. South Korean activists estimate the number of Korean victims of the chemicals at around 150,000. According to official data, South Korea dispatched about 320,000 soldiers to Vietnam to become the largest foreign contingent of U.S. allies fighting in the war, with 5,000 killed in action and nearly 11,000 others wounded.

Do Xuan Dien, 75-year-old former army major general and Vietnamese veteran, told Yonhap News Agency, "The past is bygone. South Korea and Vietnam are friends and partners for now and the future". Dien came to Seoul for a week-long stay in his capacity as vice president of the Vietnam's Association of Victims of Agent Orange (VAVA). He is heading a nine-member delegation from the VAVA, which paid homage to the fallen soldiers at the National Cemetery in Seoul, along with around 120 members of the South Korean group of Agent Orange victims. "We are preparing for a lawsuit against the makers of Agent Orange. So we want to learn from the South Korean group's experience." the grey-haired Vietnamese man said. Last year, a South Korean court ordered Dow Chemical Co. and Monsanto Co., two makers of Agent Orange, to pay US\$62 million in compensation to thousands of South Korean Vietnam war veterans and their families. [Source: Thanh Nien News 09 Apr 07 ++]

RC POSTAL EMPLOYEE BACK PAY: As many as 100,000 National Guard and Reserve members who worked at the U.S. Postal Service between 1980 and 2000 could be eligible for thousands of dollars in compensation because they were improperly charged for military leave, under a new policy. The Merit Systems Protection Board decision greatly expands the scope of a larger back-pay issue that ultimately could cost the government a billion dollars, said Matthew Tully, a New York attorney who is representing affected employees pro bono. Previous rulings have held that between 150,000 and 200,000 Guard and Reserve members who worked for executive ranch agencies between 1980 and 2000 are eligible for back pay because of an erroneous leave policy. In a 7 MAR ruling, *Miller v. U.S. Postal Service*, MSPB said Reservists who worked at the Postal Service also are covered because that agency used the same policy. Tully said, "Next to the Defense Department, the Postal Service is the largest single

employer of Guard and Reserve members. Complying with the decision could cost the Postal Service upwards of \$200 million. They're probably going to have to jack up the price of stamps 3 or 4 cents just to pay for the outcome of this decision."

The Postal Service did not immediately respond to a request for comment. The Postal Service could appeal the ruling to the U.S. Court of Appeals for the Federal Circuit, although that court in 2003 issued the landmark decision that employees were entitled to back pay because federal agencies improperly charged Reservists on military leave for days they were not scheduled to work at their federal jobs. The policy, which was changed in 2000, had charged reservists for every calendar day they were on military leave, instead of charging them for the actual work days they missed. Reservists who used their military leave because they were charged for weekends or other days they weren't scheduled to work had to use their own vacation days or take leave without pay to complete their annual training. [Source:, Military Times Tim Kauffman article Apr 07 ++]

VA POLYTRAUMA WEBSITE: VA's Polytrauma System of Care has a new website at <http://www.polytrauma.va.gov>. This site contains general information about Polytrauma and is home to a page for each of the four Polytrauma Rehabilitation Centers and 17 additional Polytrauma Network Sites (the Rehabilitation Centers are considered Network Sites as well). Additionally, there are Polytrauma Support Clinic Teams. Current plans estimate the final number of these teams will be near 75. Additionally, current fact sheets for both Traumatic Brain Injury and Polytrauma are available on the VA Communications Management Intranet site: <http://vaww.va.gov/webcom/guidance0307.asp>. The files are titled, "Polytrauma Fact Sheet," "TBI Talking Points," and "TBI News Release." [Source: NAUS Weekly Update 13 Apr 07 ++]

CANES FOR VETERANS: Can-Am Care, LLC, announced in APR the "HUGO Salutes Our Veterans" program to provide folding canes to World War II and Korean War Veterans. The HUGO Folding Canes with Interchangeable Handles will be provided at no charge to Veterans who may be in need of mobility assistance. According to Can-Am Care, the program is instituted to recognize the support and efforts members of the United States Armed Forces made for our country during World War II and the Korean War. Can-Am manufactures the HUGO Folding Cane and a number of related mobility assistance products. Veterans are encouraged to contact Can-Am Care at 1(888) 412-4992 M-F 08-1600 EST or refer to www.HUGOSalutes.com. Proof of service may be required. [Source: NAUS Weekly Update 13 Apr 07 ++]

WRAMC UPDATE 08: The Independent Review Group, created by Defense Secretary Robert Gates to identify shortcomings and needed improvements for patients and families at Walter Reed, Bethesda, and other casualty treatment centers, met on 11 APR to present draft findings and recommendations. The group identified significant shortcomings in

transition from inpatient care to outpatient care, and in leadership, policy and oversight. The final report will be submitted to the Secretary of Defense by 16 APR 07. Some of the recommendations were to:

- 1). Improve case management and assign a family advocate to assist family members.
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- 3). Create guidelines for screening and treating Traumatic Brain Injury (TBI) and Post Traumatic Stress Disorder (PTSD).
- 4). Jointly with the VA create a TBI and PTSD Center of Excellence to coordinate research, training, and clinical guidelines.
- 5). Completely overhaul the Medical and Physical Evaluation Boards into one DoD/VA solution. Fitness for Duty determinations should be made by DoD, while disability ratings should be made by the VA.
- 6). Improve care provided to Reservists for service-connected injuries and illnesses.
- 7). Accelerate current BRAC plans to construct a joint Army/Navy medical center at the Navy medical center in Bethesda to speed transition for the severely wounded.

[Source: MOAA Leg Up 1 Apr 07 ++]

VETERANS DISABILITIES HEARING: On 12 APR a rare joint Senate Armed Services and Veterans Affairs hearing on Capitol Hill was held to hear testimony on the Departments of Defense and Veterans Affairs disability rating systems and the transition of service members from DoD to VA. Several key senators also took the opportunity to voice concerns over the Army's new 15-month deployment schedule. Deputy Secretary of Defense Gordon England and other senior DoD and VA witnesses testified at the hearing. Lt. Gen. Terry Scott, Chairman of the VDBC, pointed out some preliminary data that the VDBC has received indicates that there is a very large gap in what the DoD awards in disability to service members deemed to be unable to continue their military service and what the VA awards. He noted that since the year 2000 the Army had discharged 13,000 members who by Army standards did not qualify for even a 10% disability rating but when these same members went to the VA for adjudication they were awarded an average of 56% disabilities.

He also cited significant disparities in disability ratings awarded by different services. Of 50,000 disability separations/retirements by the Army over the last 7 years, the Army granted 30-percent or higher disability ratings - which provides eligibility for disability retirement benefits - to only 13% of them. The disability retirement award rates for the Navy and Air Force were more than twice as high: 36% and 27%, respectively. The rate for the Marines was 18%. A number of senators questioned whether the Army in particular was "low-balling" soldiers' disabilities to save money. By policy, DoD's disability rating system limits the number of conditions rated and consistently rates lower than the VA. To fix the inequity, General Scott offered an initial recommendation that DoD should determine fitness for duty and the VA should then conduct a comprehensive physical and assign a disability rating.

This was quickly picked up by one of the Co-Chairs, Sen. Carl Levin (D-MI), Senate Armed Forces Committee Chairman who asked DoD Deputy Secretary Gordon England

to provide the Department's comments on this suggestion within two weeks. Additionally Scott pointed out the failures of the DoD and VA to come up with a viable solution to the problem of electronic transfer of medical records. Another committee member Sen. Hilary Clinton (D-NY) questioned why an entirely new system needed to be developed when one system, the VA's VISTA system, was up and running very well and in fact was consistently winning awards from groups outside of the government. She further stated that DoD should quickly develop what it needs in the way of "battlefield" applications and work with the VA to make sure it integrates well with the existing system. For more info on Lt. Gen. Terry Scott's testimony refer to <http://armed-services.senate.gov/statemnt/2007/April/Scott%2004-12-07.pdf>. [Source: NAUS Weekly Update 13 Apr & MOAA Leg UP 14 Apr 07 ++]

VA PERFORMANCE REPORT: Continuing its commitment to give veterans a clear, meaningful view of how the Department of Veterans Affairs (VA) is performing, VA was recently rated by an independent research center as having one of the best annual performance reports in the federal sector for the eighth year in a row. The findings of this prestigious research center show that it was among the best in the federal sector at providing meaningful information to the American public about their operations and performance. Since 2000, the Mercatus Center of George Mason University has examined the performance and accountability reports issued annually by federal agencies. This year, VA tied for second-best in the federal government, receiving 51 points on a 60-point scale. VA also tied for having the highest score in transparency, an example of the Department's commitment to provide information that is useful and easy to understand. The new Mercatus study named the "Eighth Annual Performance Report Scorecard: Which Federal Agencies Best Inform the Public?" found VA's reports are rich in information on efforts to improve programmatic and managerial performance. VA Secretary Nicholson said these findings show that VA has developed a management culture that sets high standards, measurable goals and accountability to the American public. VA published its latest performance and accountability report in NOV 06. It documents VA's progress toward ensuring that America's veterans and their families receive timely, compassionate, high-quality care and benefits. The Department's report can be found on the Internet at: <http://www.va.gov/budget/report>. Anyone wishing to receive e-mail from VA with the latest news releases and updated fact sheets can subscribe to the VA Office of Public Affairs Distribution List at http://www1.va.gov/opa/pressrel/opa_ListServ.asp. [Source: Federal Record 4/13/07 ++]

MOBILIZED RESERVE 11 APR 07: The Army, Navy, Air Force, Marine Corps and Coast Guard announced the current number of reservists on active duty as of 28 MAR 07 in support of the partial mobilization. The net collective result is 1,102 more reservists mobilized than last reported for 28 MAR 07. Total number currently on active duty in support of the partial mobilization for the Army National Guard and Army Reserve is 63,689; Navy Reserve 6,404; Air National Guard and Air Force Reserve 5,079; Marine Corps Reserve 5,514; and the Coast Guard Reserve 302. This brings the total National Guard and Reserve personnel, who have been mobilized, to 80,998, including both units

and individual augmentees. At any given time, services may mobilize some units and individuals while demobilizing others, making it possible for these figures to either increase or decrease. A cumulative roster of all National Guard and Reserve personnel, who are currently mobilized, can be found at <http://www.defenselink.mil/news/Apr2007/d20070411ngr.pdf>.

The Marine Corps' recent callup of some 1,800 Individual Ready Reserves (IRR) will near the limit of 2,500 IRR troops the Marines can put on active duty at one time. Nevertheless, Marine Commandant Gen. James Conway says he has no plans to ask the president to raise the limit. However, he told a Senate panel that the deployment tempo leaves Marines only enough time during their dwell period to conduct refresher training before re-deploying. He also acknowledged concern that the short turnaround time prevents the Corps from preparing for other contingencies because it is no longer conducting combined arms live-fire exercises at Twentynine Palms and said Marines are receiving little mountain-warfare, jungle or amphibious training. [Source: DoD News Release 11 Apr 07 ++]

WOUNDED WARRIOR USMC REGIMENT: Before the exposure of shoddy administration and lodging of wounded soldiers assigned to Walter Reed Army Medical Center, Marine Commandant Gen. James Conway already was creating the framework for a wounded warrior regiment. Marine Col. Gregory Boyle took command of the regiment at the Quantico VA headquarters 1 APR. The regiment will have a battalion at Camp Pendleton CA and one at Camp Lejeune NC locations where facilities already are in operation. Boyle said, "The regiment will provide unity and continuity of command, with one commander responsible for meeting the needs of the wounded. The unit will help patients with evaluation boards and insurance claims as well as track them through the administrative bureaucracy of their recovery. It also will help them transition from the military health system to that of the Department of Veterans Affairs, and will follow up with them throughout the country". [Source: Armed Forces News Issue 13 Apr 07 ++]

GREAT POND RECREATIONAL FACILITY: THE Great Pond Outdoor Adventure Center is a four season recreational facility located 140 miles Northeast of NAS Brunswick in Great Pond, Maine. This 375 acre reservation boasts excellent fishing, hiking, canoe & kayaking as well as magnificent scenic vistas. It is available for use by Active, National Guard, Reservists, Retired, 100% DAV, and DoD Civilians. This pristine site offers many opportunities to explore the Maine woods via canoe or mountain bike. The facility offers:

- . Wilderness campsites at \$10/night year round.
- . 18-site campground with water and electric hookups for campers. No sewer hookup at RV sites.
- . Five cabins that range from \$70/night to \$540/week depending on size. They come equipped with a kitchen, bathroom w/shower, two bedrooms, and a loft. Some cabins have a sleeper sofa or the staff will roll in a couple of beds to accommodate extra guests.
- . Bigelow Lodge from \$90/night up to \$750/week. Rooms include a kitchen, bathroom

w/shower, two bedrooms, a loft, and two pullout couches for up to 12 guests.

- . Two Yurts (a strong weather proof tent that can be used year round). One Yurt (\$25/night \$180/week) is located on Great Pond while the other is only accessible by boat on King's Pond.
- . Pets on a leash are allowed at Great Pond with a \$5/day or \$30 per week charge payable upon registration.
- . Recreational Hall offering movies and games with a large stone fireplace that is used nightly by guests.
- . Sailboats, kayaks, motorboats, and canoes are available for rent along with skiing and camping equipment, bed linen and towels.
- . A small on site store that sells the bare essentials including bug spray, ice, wood, snacks, etc.

The nearest town is an hour's drive (Bangor) and clear cellophane reception is only available in the middle of the pond. Visitors may want to travel south to explore Acadia National Park or visit Canada, 70 miles east on route 9. Reservations can be made up to 12 months in advance at (207) 584-2000, greatpondoac@rivah.net, or via mail to Great Pond Outdoor Recreation Center, 9 Dow Pines Road, Great Pond, ME 04408. A 50% deposit is required. When booking weekends you must book for both Friday and Saturday. For additional info refer to www.mwr.navy.mil/mwrprgms/cabins/great_pond_brochure_ME.pdf. [Source: www.militarycampgrounds.us Apr 07 ++]

TRICARE ANENCEPHALY ABORTION: Congress has ruled that no federal funds should be used to pay for an abortion except where the life of the mother is at stake. This issue was put to the test when a Navy family requested Tricare to pay for their abortion. The wife was pregnant with an anencephalic child, whose probability of surviving or of ever being conscious was zero. Anencephaly is the absence of all or a significant part of the fetal brain. It is untreatable and lethal. If a baby is not dead at birth, it might last a few days before succumbing. Tricare refused to pay the \$3000 the abortion would cost in accordance with the ruling of congress. The family sued, and a federal court ordered Tricare to pay, and the abortion went forward. Subsequently, the Justice Department sued the family to recover the \$3000. A panel of the Ninth Circuit ruled that, under a 1980 Supreme Court precedent upholding the Hyde Amendment -- a parallel provision to the one in question, but applying to Medicaid recipients rather than to military families -- the law was valid and the government didn't have to pay for the abortion. The court wrote that although it, and surely all humankind, feels great sympathy for any parent faced with the truly horrifying diagnosis of anencephaly, it found that the law was clear. Consequently, the family was ordered to pay the money back. [Source: http://pharyngula.org/index/weblog/comments/anencephaly_and_right_wing_moralizers Aug 05 ++]

TRICARE SUPPLEMENTAL INSURANCE UPDATE 01: One of the first things on a new retiree's checklist after leaving active duty is health care. If a second career is going

to be undertaken most likely your employer will have some type of a health care plan. If you decide to use it Tricare will become a second payer to it. You should also consider out of pocket expense incurred for medical care outside the military system. If you decide to stick with Tricare you are subject to its copays and deductibles up to \$3000 annual catastrophic cap limit per family. Private employers and some state governments are weighing the cost of providing optional Tricare supplemental Insurance as a way to save on the expense of benefits with the employer picking up the cost of the policy. It is cheaper for the employer who could save money and provide additional benefits in other areas. Tricare supplemental policies are offered by most military associations and some private firms and are designed to reimburse you for your medical bills, copayments, and deductibles after Tricare pays the government's share of the cost. In deciding whether or not to obtain a policy or to compare benefits in selecting one you should consider the following:

- Must a deductible be met before the plan pays?
 - Is there a maximum limit on benefits?
 - Is there a pre-existing condition clause?
 - Is there a waiting period before the policy becomes effective?
 - Will the plan cover amounts beyond what Tricare allows?
 - Does the plan pay for services that are not covered by Tricare?
 - Does the plan specifically not cover certain conditions?
 - Must certain types of care be approved before treatment?
 - Is inpatient care covered?
 - Is there outpatient or long term coverage?
 - Will the plan pay the Tricare outpatient deductible?
 - Will the plan pay Tricare cost share under the Tricare diagnosis-related group payment system?
 - Will the plan pay Tricare Prime enrollment fees or copayments?
 - Does the plan offer reduced premiums or adjustments for participation in managed health care plans?
 - Does the plan convert to a Medicare supplement?
 - Is so, must it be in force for a certain period of time before conversion?
 - Does the plan cover care overseas?
 - What are the membership/association fees required to be eligible for the policy?
 - Can your premium payments be increased?
 - Does the plan offer rates based on military status (Active duty/Retired) or on an age scale?
 - Does coverage continue for surviving spouses at no charge?
 - What are the time limitations, if any, for filing a claim?
 - Are their higher rates for smokers or involvement in certain activities?
- [Source: Navy Times Alex Keenan article 13 JUN 05 ++]

TRICHLOROETHYLENE (TCE) EXPOSURE: Trichloroethylene, or TCE, is found in toxic landfills and illegal dumps throughout the country. The EPA has reported that the colorless, sweet-smelling chemical has been identified as a major pollutant in 496

Superfund cleanup sites. Because of its solubility in water and its mobility in soil, TCE is the most frequently reported organic contaminant in groundwater. The chemical, which was once used as anesthesia, also is found in several household products, such as spot remover, rug cleaner and shoe polish. The EPA has set a maximum contaminant level for trichloroethylene in drinking water at 0.005 milligrams per liter (0.005 mg/L) or 5 parts of TCE per billion parts water. The EPA has also developed regulations for the handling and disposal of trichloroethylene. The Occupational Safety and Health Administration (OSHA) has set an exposure limit of 100 parts of trichloroethylene per million parts of air (100 ppm) for an 8-hour workday, 40-hour workweek. When TCE enters the environment it:

- Dissolves a little in water, but it can remain in ground water for a long time.
- Quickly evaporates from surface water, so it is commonly found as a vapor in the air.
- Evaporates less easily from the soil than from surface water. It may stick to particles and remain for a long time.
- May stick to particles in water, which will cause it to eventually settle to the bottom sediment.
- Does not build up significantly in plants and animals.

Exposure can occur by:

- Breathing air in and around the home which has been contaminated with trichloroethylene vapors. Most of the trichloroethylene used in the U.S. is released into the air from industrial or commercial degreasing operations.
- From shower water or household products such as spot removers and typewriter correction fluid.
- Drinking, swimming, or showering in water that has been contaminated with TCE.
- Contact with soil contaminated with trichloroethylene, such as near a hazardous waste site.
- Contact with the skin or breathing contaminated air while manufacturing trichloroethylene or using it at work to wash paint or grease from skin or equipment.

Exposure impact on humans:

- Breathing small amounts may cause headaches, lung irritation, dizziness, poor coordination, and difficulty concentrating.
- Breathing large amounts of TCE may cause impaired heart function, unconsciousness, and death. Breathing it for long periods may cause nerve, kidney, and liver damage.
- Drinking small amounts of TCE for long periods may cause liver and kidney damage, impaired immune system function, and impaired fetal development in pregnant women, although the extent of some of these effects is not yet clear.
- Drinking large amounts of TCE may cause nausea, liver damage, unconsciousness, impaired heart function, or death.
- Skin contact with TCE for short periods may cause skin rashes.

If you have recently been exposed to TCE, it can be detected in your breath, blood, or urine. The breath test, if it is performed soon after exposure, can tell if you have been exposed to even a small amount of TCE. Exposure to larger amounts is assessed by blood and urine tests, which can detect TCE and many of its breakdown products for up to a

week after exposure. However, exposure to other similar chemicals can produce the same breakdown products, so their detection is not absolute proof of exposure to trichloroethylene. This test isn't available at most doctors' offices, but can be done at special laboratories that have the right equipment. For additional information on this and other contaminants refer to www.atsdr.cdc.gov. [Source: Agency for Toxic Substances and Disease Registry Apr 07 ++]

PHILIPPINE DEERS REGISTRATION UPDATE 02: Effective immediately the DEERS/RAPIDS ID Card workstation located at window 3 in the Social Security and Veterans Affairs section at the U.S. Embassy Manila will be open on a first come, first served basis on Tuesdays and Thursdays. All questions should be directed to SPC Babcock @ 0920-911-8964 on TUE & THUR between the hours of 08-1700.

Workstation hours of operation are as follows:

- MON-WED-FRI Closed
- TUE & THUR 08-1100 & 1400-1630.
- Closed on all weekends and U.S./Philippine federal holidays.

The following personnel are eligible for DOD ID Cards:

- Active duty members, retired members, and members of the Reserve components not on active duty in excess of 30 days.
- Retired Reserve members who have reached their 60th birthday.
- Family members of military sponsors on active duty for more than 30 consecutive days.
- Family members of retirees (with pay).
- Family members of Ready Reserve (Selected, Individual and Standby Reservists)
- Family members of Retired Reservists, who have qualified for retired pay at age 60, yet have not reached age 60.
- Un-remarried or unmarried former spouses previously enrolled in DEERS.
- Medal of Honor recipients and their eligible family members.
- One hundred percent disabled veterans and their family members. One hundred percent must result from one or more rated disabilities. Those who receive 100% as a result of unemployable status are not eligible.
- Former members having reached age 60 and in receipt of retired pay for non-regular service, and their family members.

Also eligible are survivors of the following:

- Active duty members.
- Retired with pay members.
- Reserve members on active or inactive duty.
- Retirement-eligible reservists who died prior to transfer to the Retired Reserve (Reservists who were still participating).
- Retired reserve members who qualify for pay at age 60 but die before reaching age 60.

As a general guideline, it is highly recommended the sponsor be present when renewing ID cards. If the sponsor cannot be present, have the sponsor go to their nearest DEERS/RAPIDS ID Card section and print out a DD Form 1172 for whatever

dependents are having their ID cards renewed. The sponsor MUST be present when initially enrolling a dependent in DEERS. If not, the sponsor will have to enroll you in DEERS from whatever duty station he/she is currently serving or is closest and send you a DD Form 1172. Upon receipt you may come in to get an ID card. Bring at least three (3) forms of ID with you to the US Embassy as you will have to surrender two (2) of them to guard stations before coming to the Social Security section. If you do not meet any of the above requirements but believe you are entitled to benefits, do not hesitate to call. SPC Babcock will work with you in preparing an information packet and present it to a service project officer on your behalf. If they approve your case, you will receive all entitled benefits as well as an ID card. At no point will you be charged for anything inclusive of all ID cards, forms and assistance. If someone is trying to charge for something relating to DEERS/RAPIDS call 0920-911-8964 and advise Babcock of the details. [Source: JUSMAG SPC Babcock Apr 07 ++]

VA CLAIM FIXERS: The US Department of Veterans Affairs (USDVA) is receiving an increasingly number of claims for VA benefits from veterans or survivors who avail of the services of a "Claims Fixer". VA often finds these claims contain fraudulent evidence that has been submitted by the Fixer. When it is suspected that a claim involves a Fixer it is investigated with a resultant delay in processing the claim. If it is determined that fraud was committed, the veteran's right to VA benefits is forfeited. This is a lifetime forfeiture meaning the veteran and /or their dependents lose all rights to ever be considered for VA benefits for the rest of their lives. Claim Fixers have no connection within VA. If approached by someone claiming to have an "IN" with the VA, the VA office should be notified immediately. Claim Fixers cannot affect the outcome of your claim. They can only jeopardize your entitlement to VA benefits.

To protect yourself against Claim Fixers:

- Avoid them. Anyone charging a fee to assist you is a claims fixer.
- Do not sign any form unless it is completely filled out and all the information contained on the form is accurate. If possible, you should fill out the forms yourself.
- Do not sign any affidavits or statements unless they are accurate.
- Do not sign any statement in support of another person's claim unless the information is accurate.
- Do not submit any medical evidence or doctor's statements unless the information is factual.
- Do not allow any affidavits or statements to be submitted in support of your claim unless the information in the document is accurate.
- Do not pay someone the benefits you have earned in defense of your country. They have no right to those benefits.

If you have questions about VA benefits or services, contact the USDVA in your geographic area. The USDVA has representatives available to assist you with your claim. In the Philippines you may visit them at the US Embassy in Manila or call them at no charge on a PLDT line at 1-800-1888-5252. If you live in Metro Manila, you may dial 528-2500. You may also visit the website: <https://iris.va.gov> for more information. VA

doe not charge for any service or assistance they provide [Source: USDVA Manila Director Jon Skelly Apr 07 ++]

NATIONAL PARK PASSPORTS UPDATE 01: The National Park Service is an participant in the new Interagency Pass Program which was created by the Federal Lands Recreation Enhancement Act and authorized by Congress in DEC 04. Participating agencies include the National Park Service, U.S. Department of Agriculture - Forest Service, Fish and Wildlife Service, Bureau of Land Management and Bureau of Reclamation. The pass series, referred to collectively as the America the Beautiful Pass, went sale 1 JAN 07. It replaces the former Golden Age, Golden Access, and Golden Eagle pass. The new series consist of the following:

- America the Beautiful Annual Pass: This pass is available to the general public at a cost of \$80. It provides access to, and use of, Federal recreation sites that charge an Entrance or Standard Amenity Fee for a year, beginning from the date of sale. The pass admits the pass holder/s and passengers in a non-commercial vehicle at per vehicle fee areas and pass holder + 3 adults, not to exceed 4 adults, at per person fee areas. (children under 16 are admitted free) The pass can be obtained in person at the park, by calling 1(888) ASK USGS, Ext. 1, or via the Internet at <http://store.usgs.gov/pass>.

- America the Beautiful Senior Pass: This is a lifetime pass for U.S. citizens or permanent residents age 62 or over at a cost of \$10. The pass provides access to, and use of, Federal recreation sites that charge an Entrance or Standard Amenity. The pass admits the pass holder and passengers in a non-commercial vehicle at per vehicle fee areas and pass holder + 3 adults, not to exceed 4 adults, at per person fee areas (children under 16 are admitted free). The pass can only be obtained in person at the park. The Senior Pass provides a 50% discount on some Expanded Amenity Fees charged for facilities and services such as camping, swimming, boat launch, and specialized interpretive services. In some cases where Expanded Amenity Fees are charged, only the pass holder will be given the 50% price reduction. The pass is non-transferable and generally does not cover or reduce special recreation permit fees or fees charged by concessionaires.

- America the Beautiful Access Pass: This is a lifetime pass for U.S. citizens or permanent residents with permanent disabilities at no charge. Documentation is required to obtain the pass. Acceptable documentation includes: statement by a licensed physician; document issued by a Federal agency such as the Veteran's Administration, Social Security Disability Income or Supplemental Security Income; or document issued by a State agency such as a vocational rehabilitation agency. The pass provides access to, and use of, Federal recreation sites that charge an Entrance or Standard Amenity. The pass admits the pass holder and passengers in a non-commercial vehicle at per vehicle fee areas and pass holder + 3 adults, not to exceed 4 adults, at per person fee areas (children under 16 are admitted free). The pass can only be obtained in person at the park. The Access Pass provides a 50% discount on some Expanded Amenity Fees charged for facilities and services such as camping, swimming, boat launching, and specialized interpretive services. In some cases where Expanded Amenity Fees are charged, only the pass holder will be given the 50% price reduction. The pass is non-transferable and generally does not cover or reduce special recreation permit fees or fees charged by

concessionaires.

- America the Beautiful Volunteer Pass: This pass at no charge is for volunteers acquiring 500 service hours on a cumulative basis. It provides access to, and use of, Federal recreation sites that charge an Entrance or Standard Amenity Fee for a year, beginning from the date of award. The pass admits the pass holder and passengers in a non-commercial vehicle at per vehicle fee areas and pass holder + 3 adults, not to exceed 4 adults, at per person fee areas (children under 16 are admitted free).

Existing Golden series passes will no longer be sold or issued, but they will continue to be honored for as long as they are valid. The Forest Service, National Park Service, Fish and Wildlife Service, Bureau of Land Management, and Bureau of Reclamation will honor all three passes at sites where Entrance or Standard Amenity Fees are charged. In addition, the Corps of Engineers and Tennessee Valley Authority may honor the Senior and Access Passes. Passes cannot be replaced if lost or stolen; a new pass must be purchased. One goal of the new pass program is to install technology at each site that allows for tracking and replacements. Tattered and worn passes can be exchanged for a new one. Passes from previous pass programs cannot be exchanged or upgraded for the new passes. Bicycles are handled differently within the five agencies. Sometimes they are charged as a per person or walk-up fee; other times they are discounted at vehicle fee sites; while some sites allow them in at no charge. Because fees and rules vary regarding bicycles across the agencies and sites across the country, you should contact your site of choice directly for their regulation. For additional info refer to www.nps.gov/fees_passes.htm. [Source: www.nps.gov Apr 07 ++]

MEDICARE SCAMS UPDATE 01: Aggressive insurance salesmen offering alternative Medicare policies have persuaded hundreds of older people across North Carolina to replace their traditional coverage with private insurance that may cost more and do less. Reports suggested the problem had not become widespread, but state regulators said 28 MAR they are dealing with complaints in Wake, Guilford, Davidson, Robeson, Pitt and other counties. Poor agent training and misinformation bears some of the blame, but greed may also be at play, said Carla Obiol, deputy commissioner of the state Seniors' Health Insurance Information Program, known as SHIIP. Obiol said the private Medicare policies tend to pay agents hefty commissions. North Carolina's senior consumer fraud task force sent out a statewide trade practices alert about aggressive marketing to older people, some with dementia. SHIIP is also looking into several cases in which residents of rest homes and low-income housing were targeted, but would not release details. State regulators can take action against agents who are registered to work in North Carolina. But only the federal Centers for Medicare and Medicaid Services can restore traditional Medicare to people who have bought policies that don't benefit them, Obiol said. [Source: McClatchy Newspapers Thomas Goldsmith article 30 Mar 07 ++]

PREMIUM CONVERSION UPDATE 01: Rep. Tom Davis (R-VA) and Sen. John Warner (R-VA) are once again championing the military and federal civilian retirees' right to tax-exemption for premiums paid for federal health and dental plans (including

Tricare Prime enrollment fees and Tricare supplement plans). They have reintroduced legislation (H.R. 1110 and S. 773, respectively) that would amend the Internal Revenue Code to allow that. Currently, active federal workers are able to pay their health insurance premiums with pre-tax dollars. That has been authorized for Executive Branch workers since 2000, and for Legislative Branch and Judiciary employees since 2001. H.R. 1110 and S. 773 would extend the same benefit to retired federal civilian and military members. Rising health care costs affect all federal employees, civilian or uniformed, active or retired, and all have earned and deserve the same benefit. While the news bills are encouraging to correct this inequity, their cost has stymied action in Congress so far. Similar legislation was introduced in the three previous Congresses, but was not approved by the House Ways and Means Committee and Senate Finance Committee, which have jurisdiction over tax issues. Members of the military community can urge their senators and representative to cosponsor these bills by sending them a message expressing their desire to see this legislation pass. At <http://capwiz.com/moaa/issues/alert/?alertid=9598891&type=CO> can be found a suggested format and/or provide a means for automatic transmission of your message. [Source: MOAA Leg Up 6 Apr 07 ++]

CAFFEINE: After years of being viewed with suspicion, caffeine has pulled a scientific switcheroo. Besides helping students pull all-nighters and weekend warriors jumpstart their jump shots, there's now evidence that it defends against diabetes, Parkinson's, asthma symptoms, post-workout soreness, and even hunger pangs. However, it's not totally benign. The RealAge experts [www.realage.com] advise limiting yourself to about 250 mg a day (the average cup of coffee has about 100 mg) to avoid jitters and a possible boost in blood pressure. Caffeine can delay your sleep and cause you to wake up during the night. Avoid caffeinated drinks and foods (coffee, tea, cola, chocolate) after noon. You may want to try avoiding caffeine entirely and see if your sleep improves. Few labels list caffeine content, so it's hard to tell how much is in what. The following may be helpful:

Diet Coke - Everybody's default diet drink. Caffeine 45 mg, Calories 0, Other stuff: A lot of flavorings and colorings, not much else.

Water Joe - Plain H₂O with a jolt. Caffeine 60 mg 16.9-ounce bottle, Calories 0, Other stuff: Artesian water and caffeine. No additives, no carbonation.

Red Bull - The energy drink that started it all. Caffeine 80 mg per 8-ounce can, Calories 110, Other stuff: Has taurine, a "detox" amino acid; B vitamins; and lots of sugar.

Tab Energy - A revved-up version of old Tab cola. Caffeine 95 mg per 10.5-ounce can, Calories 5, Other stuff: Sweet and pink, it's spiked with ginseng and guarana, a mild caffeine-like stimulant.

Enviga - Controversial new green tea drink. Caffeine 100 mg per 12-ounce can, Calories 5,

Other stuff: Laced with 200 mg of calcium and green tea antioxidants but in trouble for claiming that it makes the body burn up extra Calories.

Rocket Chocolates - Candy with more zip than a cup of coffee. Caffeine 150 mg per piece, Calories 70, Other stuff: Comes in trendy flavors like mocha latte; individually

wrapped so you can carry in a pocket.

Fusion Energy - 7/Eleven's "functional" brew. Caffeine 250 mg per 12-ounce cup, Calories 0, Other stuff: Freshly-ground coffee brewed with an alertness-boosting blend of guarana, and yerba mate.

Starbucks - Coffee, just coffee. Caffeine 280 or so per 12-ounce cup, Calories 0, Other stuff: Starbucks coffee averages twice the caffeine of a regular 8-ounce cup of coffee, but the hit can vary wildly-in one study, by 200 mg on different days.

Spike Shooter - Heavy-hitter energy drink. Caffeine 300 mg per 8.4-ounce can, Calories 0, Other stuff: Spiked with tyrosine, yohimbine, and a huge dose of vitamin B12; label warns you not to drink more than one a day.

[Source: Yahoo Apr 07]

VA RETRO PAY PROJECT UPDATE 07: There are no plans for DFAS to publish a list of retirees who are eligible for The Disabled Military Retired Retroactive Pay Program (commonly called VA Retro). Retirees who are eligible should receive notices on a rolling basis. The retroactive payments mainly affect retired members with 20+ years of service who have retroactive or increased VA disability awards since 2004. Depending on the difficulty of the individual case (some complicated accounts are being audited by hand), the payment processing will run through the end of 2007. DFAS has said that while they continue to make progress on paying VA Retro, they continue to get thousands of new cases each month. [Source: MOAA Leg Up 6 Apr 07 ++]

AAFES MATCH IT PROGRAM: In addition to competitively low prices and sales tax free purchases, the Army and Air Force Exchange Service (AAFES) has recently improved their "We'll Match It!" price matching program. Now authorized shoppers who find a lower price at a "warehouse club" store can obtain the same price at their local PX or BX. If the difference is less than \$10 the cashier is authorized to match the price on the spot. If the difference exceeds \$10 the competitor's ad must accompany the request. The "We'll Match It!" policy applies to all AAFES retail stores including main stores, Shoppettes, Class Six, Car Care and troop stores. This is an enhancement to the AAFES policy that matches local competitor's prices on identical items. In addition, AAFES offers a thirty day price guarantee on any item originally purchased from AAFES and subsequently sold at a lower price by AAFES or another local competitor. The program does have some exceptions, AAFES does not price match website or catalog prices. Special offers, promotions, free-with-purchase offers, limited quantity offers, bundled promotions, special financing, "gimmick" promotions, special order automotive parts, gasoline, automotive labor/ service, double and triple coupons, clearance items, flat percentage off items and vending items are excluded. This program is only available in CONUS locations. Complete details concerning the price matching program are available online at aafes.com. Purchases from the Exchange generate funds for MWR programs. In the past 10 years, AAFES contributed more than \$2.4 billion to Army, Air Force, Marine Corps and Navy MWR programs. These funds are used in support of Youth Services, Armed Forces Recreation Centers, post functions and other quality of life initiatives enjoyed by military families on installations across the globe. [Source:

<http://www.aafes.com/pa/news/07news/07-013.htm> Feb 07]

ARMY SURVIVOR'S CALL CENTER (ALTFCM): The Army Families First Casualty Call Center (FFCCC), which assists families of fallen Soldiers, recently underwent several changes to better serve the those who seek support in the months and years following the loss of a loved one. These upgrades include a new interactive web site and a new name for the organization. Now known as the Long Term Family Case Management (LTFCM), this name change more accurately reflects how LTFCM assists families. Putting "families first" continues to be the number one priority in providing long-term support to families of fallen Soldiers by offering assistance and connecting survivors to services and programs 24 hours a day, seven days a week. Family members can access the new web site by visiting <https://www.hrc.army.mil/site/active/tagd/cmaoc/ffccc/index.htm>. The site includes enhanced features with detailed information on survivors' benefits, Soldier services, reports, and support programs. It also features interactive tools to determine whether a family is eligible to apply for the Death Gratuity or retroactive Servicemembers' Group Life Insurance (SGLI) benefits. Survivor's can also join the ALTFCM email list to receive periodic updates on available benefits and service. As a central point of contact in the months and years following a loss, LTFCM support coordinators continue to aid survivors with retroactive death benefits, entitlements like education and counseling (financial and emotional), and posthumous awards and citations for fallen service members. If you have further questions email ALTFCM@conus.army.mil or call 1(866)272-5841 24 hours a day, 7 days a week. [Source: U.S. Army Long Term Family Case Management msg. 4 Apr 07 ++]

TRICARE EOBs UPDATE 01: Tricare has issued a letter reversing the policy on TRICARE for Life Explanation of Benefits (EOB). It reads, "We appreciate the comments received from our customers regarding the April 1 change to eliminate the TFL Explanation of Benefits when the patient liability is zero. We have listened to our customers and will not be making the change at this time. You will continue to receive the TFL Explanation of Benefits as you have in the past. If you have registered on TRICARE4u.com to receive an email that a claim has processed, you will continue to receive that notification. However, you will also continue to receive the TFL Explanation of Benefits through the mail.

If you do not wish to receive notification through email, you can disenroll by updating your TRICARE4u profile page. If you have not registered on TRICARE4u.com giving you the ability to receive an email notification and an electronic TFL Explanation of Benefits, the process is very easy. Simply log onto www.TRICARE4u.com and click on "Register as a Beneficiary/Sponsor". If you have questions about the registration process, please contact us toll-free at 1-866-773-0404. For those requiring a Telecommunications Device for the Deaf (TDD) please contact us toll-free at 1-866-773-0405." [Source: NAUS Weekly Update for 6 Apr 07 ++]

NAVY PERSONAL DATA BREACH UPDATE 03: Three password protected laptop computers are missing from the Navy College Office at Naval Station San Diego. While the Navy College Office does not have complete information about information that was on the laptops, it could include Sailors' names, rates and ratings, social security numbers, and college course information. This potential compromise could impact Sailors and former Sailors home ported on San Diego-based ships from JAN 03 to OCT 05 and who were enrolled in the Navy College Program for Afloat College Education. The Naval Criminal Investigative Service is investigating the incident as a possible theft, working with the San Diego police department to recover the computers. Individuals who believe they may be affected may contact the Navy Personnel Command Customer Service Center at 1(866) 827-5672 or via email at CSCMailbox@navy.mil. Because of continued failure by the government in protecting veteran's personal data, veterans are my want to seek personal protection against identity theft. Companies that offer such protection for a fee can be located on the internet by inserting "Identity theft Insurance" into their search engine. [Source: Armed Forces News Issue 6 Apr 07 ++]

COMBAT ZONE DEATH TAX REPORTING: Publication 3 - Armed Forces' Tax Guide for use in preparing 2006 returns covers special tax situations of active members of the US Armed Forces. Members serving in an area designated or treated as a combat zone are granted special tax benefits. In the unfortunate event a member of the U. S. Armed Forces dies while in active service in a combat zone or from wounds, disease, or other injury received in a combat zone, the decedent's income tax liability is forgiven for the tax year in which death occurred and for any earlier tax year ending on or after the first day the member served in a combat zone in active service. Any forgiven tax liability that has already been paid will be refunded, and any unpaid tax liability at the date of death will be forgiven. The death gratuity paid to a spouse or a family member of the US Armed Forces who died after 10 SEP 01, is \$100,000. The full amount is nontaxable.

To obtain a copy of Pub 3 for use in preparing 2006 returns, go to the IRS web site www.irs.gov to print a copy. Click on Forms and Publications on the left. Then go to Download forms and publications by clicking on Publication Number. Scroll down to select Publication 3, click on Retrieve Selected Files. When mailing a tax return for a service member killed in action address it as follows: Internal Revenue Service Accounts Management Office 310 Lowell Street Stop 661, Andover MA 01812. Write "Iraqi Freedom or Enduring Freedom-K.I.A." on top of the return in red. If you would like further information regarding this article contact Judith Powers, National Killed in Terrorist Action/Killed in Action (KITA/KIA) Program Manager, at (978) 474-5408/5953F between the hours of 8:00 AM and 4:30 PM EDT or via email Kathleen.M.LaPlume@irs.gov. [Source: Armed Forces News Issue 6 Apr 07 ++]

VA PERSONAL DATA: VA Form 10-10EZR, Health Benefits Renewal, is for your use to update the information you have on file at the VA. This form enables you to update or report changes to your address, phone number, name, health insurance and financial information when these changes occur. If you are not charged copay for medications or

your health care or are charged a reduced inpatient copay you should update and report your financial information to VA each year to prevent your status from lapsing. VA will remind you when it is time to renew the information. If you are not charged medication copay because you have low income, you should also update your financial information to VA each year to have your ability to pay copay reassessed. If you want to check on this you can access a table of Financial Income Thresholds for VA Health Care Benefits at www.va.gov/healtheligibility/Library/pubs/VAIncomeThresholds/

It is not necessary to wait for the annual renewal period to provide VA your updated information. You may update your information whenever your financial or personal information changes. Simply complete VA Form 10-10EZR to provide your updated information. A PDF version of the form can be completed and downloaded at www.va.gov/vaforms/medical/pdf/vha-10-10ezr-fill.pdf. You will need to complete the form and mail it to your local facility for processing. Be sure to sign and date the form. If the form is not signed and dated properly, VA will return it to you for completion. If it's been a while since your information was updated, when VA contacts you to remind you of your upcoming scheduled appointment they may question you on the currency of the information they have on file. [Source: www.va.gov/healtheligibility/ Apr 07 ++]

AIR FORCE EMAIL FOR LIFE: Air Force Communications Agency officials are launching an initiative called E-Mail for Life, or E4L. The first step in this multiple-phase consolidation effort is to give everyone an e-mail address with a universal extension of @us.af.mil, and every Air Force user will keep that address for as long as they are associated with the Air Force. For those working in joint billets or who are currently working at other .mil or .gov sites, an E4L address will be issued as well. Users will receive an e-mail in APR 07 notifying them that their new E4L account has been issued. The e-mail will explain how people can access an online self-service portal page, and how they'll be able to update their E4L information once fully operational. For most people, updating their personal information will automatically adjust as they move from base to base, but for cases where it can't, the self-service portal page can be used to forward the e-mails accordingly. The change for the most part will be transparent to people who use the Global Address List (GAL) since their name, rank and unit designations will still show.

While this new address will be active when they receive the notification e-mail, it will not affect their current e-mail address, and in fact, any items sent to the E4L address will automatically be forwarded to the current address. Also, the E4L address will not show up on the GAL until mid-summer when the initiative reaches full operating capability. The actual e-mail address will appear as the person's firstname.lastname, such as: john.smith@us.af.mil. The Air Force will issue users with the same name a numerical identifier based on seniority. For instance, if two people have the name John Smith, then the most senior person as of January 2007 will be assigned the address john.smith@us.af.mil, and lower ranking individuals named John Smith will be assigned a numerical identifier such as john.smith.2@us.af.mil, and so on. Another address identifier will be given for contractors who will have a .ctr after their names, such as

john.smith.3.ctr@us.af.mil. [Source: Air Force Communications Agency Karen Petitt article 23 Mar 07 ++]

SPACE "A" TRAVEL POLICY: Changes are on the way for the thousands of servicemembers, families and military retirees who use space-available travel in and out of Europe. New eligibility standards, the elimination of one route and changes to several others are all scheduled in the next seven months, according to the Air Mobility Command, which manages the Air Force's massive cargo and passenger airlift operations. Thanks to demand, a regulation change in June should make it easier for families to travel without their military sponsors. Currently, families are allowed to use available seats to travel on the planes, but generally need to do so with the military member present. Some also have been able to travel at a lower priority and others based in Europe were able to do so under a waiver requested by the U.S. European Command. That waiver has come under dispute, though. A change to DOD regulations is coming, though, that will allow eligible military dependents to travel as long as they have a letter from the servicemember approving it.

So far this year more than 11,000 passengers have traveled Space-A in, out or through Europe. In all of 2006, that number was around 31,000. Just where passengers will be able to travel changes somewhat beginning 1 OCT. The Patriot Express currently operates eight weekly routes that pass through Europe. All but one of them fly on to countries that the military refers to as "Southwest Asia" before returning back through Europe to the States. That one other route which originates in Baltimore, with stops at Lajes Field in the Azores and Aviano Air Base in Italy is disappearing at the beginning of the new fiscal year. However, Aviano has been added to a route that connects Baltimore with Ramstein and Al Udeid, Qatar. Also, Lajes has been added to three other routes and will join Ramstein as the most visited spot in Europe. Stops in Rota, Spain, and Souda Bay, Crete, have been eliminated. In an e-mail, Tony Joyner, an AMC public affairs officer, said Aviano, Lajes, Sigonella, Naples, Souda Bay and Rota all were scheduled to lose stops in fiscal 2008. But a survey of use by duty passengers convinced the command to retain most of those stops.

The Patriot Express' main mission is ferrying those duty passengers. Space-A travel is limited to seats left after duty passengers have boarded and isn't offered to Turkey or any of the forward-deployed locations in combat zones. The Patriot Express uses commercial jets leased by the Department of Defense. Space-A travel also is available on some military cargo planes, but such routes aren't scheduled with the same regularity. For more information on Space-A travel, visit the AMC Web site at www.amc.af.mil. Click on "Questions" then click on "Space Available Travel" to download a 14-page document that contains general information, eligibility rules and contacts.

In late March, Secretary of Defense Gates approved a new policy for stateside Space-A travel. It opens seats on ANY DoD aircraft in CONUS supporting DoD senior officials travel to active duty members who have been injured in a combat zone and are receiving treatment. If traveling TDY the individual will be manifested as Space Required and if in

a leave status will have priority over all other space-a passengers. The policy includes immediate family members traveling with the Wounded Warriors. [Source: Stars & Stripes Kent Harris article 26 Mar 07 ++]

PTSD UPDATE 12: California Governor Arnold Schwarzenegger has signed into law the country's first state alternative sentencing program in the nation for war on terror veterans suffering from post traumatic stress disorder (PTSD). The new law provides judges with the option of alternative sentencing for Veterans diagnosed with PTSD, substance abuse or other psychological problems stemming from a combat tour. The convicted Veteran may be placed on probation and enter a voluntary treatment program at the federal, state or private nonprofit level. More information about the bill refer to www.leginfo.ca.gov. To find more information and resources for PTSD, refer to <http://www.military.com/benefits/resources/ptsd-overview>. [Source: Military.com 2 Apr 07 ++]

VET JOB WEBSITE: Active or former veterans and their spouses looking for day work or full time employment will be interested in checking out www.hirepatriots.com. Here you can check out what is available nationwide by just punching in your current locality or the locality you would like to work in. Most of the jobs pay \$10 or more an hour. There is no charge for job searches by military members and their spouses. Nor is there any limitation on the number of times you can use the site. Employers and individuals offering jobs to veterans can also post them at this site at no charge. HirePatriots is available to all military personnel regardless of their location. However, most of the current jobs are based in San Diego and Orange County California.

The site's concept began in FEB 05 as a website to serve the Marines at Camp Pendleton CA. The name of that site was HireMarines.com. It was a success from the start and grew from 500 visitors in its first month to 15,000 visitors by its third month. The media picked up the story and features done for the local network news were shown across the country by their affiliates. As a result the site started receiving E-mails from military personnel from bases across the country who wanted to be included. In just six months from the site's inauguration, HireMarines.com expanded to include every military branch and base in the nation and changed its name to HirePatriots.com. The founders of the site Mark and Tori Baird's goal is for every citizen and business to offer their chores and jobs to a troop or their spouse first. They want to reinvigorate Americans' love for country and their appreciation and respect for this nation's troops and their families. Anyone having questions regarding the site's services should contact the Baird's at 4519 Cove Drive, Ste.7, Carlsbad CA 92008 Tel: (760) 730-3734 Fax: (866) 541-9062 or email HirePatriots@yahoo.com. [Source: HireMarines.com Apr 07 ++]

WW1 VET SEARCH UPDATE 02: In 1916, Charlotte L. Winters called on the secretary of the Navy and asked why women weren't allowed to enlist. A year later, she had begun her military career. On 27 MAR Mrs. Winters - the nation's oldest female military

veteran and last female World War I veteran - died in her sleep at the Fahrney-Keedy life care community in Boonsboro MD. She was 109. Since the beginning of 2007, six World War I veterans have died. Lloyd Brown, the last known surviving World War I Navy veteran, died on 2 APR in Charlotte Hall MD. He was 105. His death, at the Charlotte Hall Veterans Home, was confirmed by his family and the United States Naval District in Washington. With the number of known living American veterans of World War I now standing at four, the Department of Veterans Affairs (VA) is seeking public assistance in determining whether others are still alive. VA usually knows about the identity and location of veterans only after they come to the Department for benefits. None of the four known surviving World War I veterans has been on the VA benefits rolls. The Secretary asks members of the general public who know of a surviving World War I veteran to contact VA. To qualify as a World War I veteran, someone must have been on active duty between April 6, 1917 and 11 NOV 18. VA is also looking for surviving Americans who served in the armed forces of allied nations. Information about survivors can be e-mailed to ww1@va.gov; faxed to 202-273-6702, or mailed to the Office of Public Affairs, Department of Veterans Affairs (80), 810 Vermont Ave., NW, Washington, DC 20420. About 4.7 million men and women served in the U.S. armed forces during World War I. About 53,000 died in combat, with another 204,000 wounded. The four known surviving World War I veterans are John Babcock, 102, from Puget Sound, Wash.; Frank Buckles, 106, Charles Town, W.Va.; Russell Coffey, 108, North Baltimore, Ohio; and Harry Landis, 107, Sun City Center, Fla. Babcock is an American who served in the Canadian Army. The other three survivors were in the U.S. Army. [Source: VA News Release 4 Apr 07 ++]

DEPLETED URANIUM (DU) UPDATE 02: The death toll from the highly toxic weapons component known as depleted uranium (DU) has reached unanticipated numbers. Of the 580,400 soldiers who served in Gulf War I 11,000 have died of causes that could be attributed to DU as of OCT 06. By the year 2000, there were 325,000 veterans or 56% on permanent medical disability. The disability rate for veterans of the world wars of the last century was only 5%, rising to 10% in Vietnam. Terry Johnson, public affairs specialist at the VA, reported that veterans of both Persian Gulf wars now on disability total 518,739. In an article published by Global Research Arthur Bernklau, executive director of Veterans for Constitutional Law in New York, reported that the source of the malady that thousands of our military have suffered and died from was identified as early as 2000 and there is no longer any need for further guessing on the issue. In 2000 a special report published by eminent scientist Leuren Moret named depleted uranium (DU) as the definitive cause of 'Gulf War Syndrome'. According to Bernklau the long-term effect of DU is a virtual death sentence.

DU is a radioactive by-product of uranium enrichment used to coat ammunition such as tank shells and "bunker busting" missiles because its density makes it ideal for piercing armor. In the manufacture of tank and bunker busting shells/missiles depleted uranium, non-depleted uranium, titanium and tungsten all meet the dense metal criteria. However, titanium and tungsten are not normally used as they are more expensive than depleted uranium which is in abundance. The world uranium industry has over one

million tons of depleted uranium to dispose of. Tungsten is difficult to manufacture because it is 1.75 times harder than uranium and has a much higher melting point at 3422 degrees Celsius than depleted uranium at 1132 degrees Celsius. Moreover, depleted uranium is preferred because it burns fiercely in air making it effective as an incendiary device. Uranium can be engineered to be "self-sharpening" so that when it hits a target, it retains its punching point as material erodes off the warhead. Titanium and tungsten will not do this. Uranium's molecular structure can be re-formed, using metallurgical and "nanotechnologies" to deliver a selected range of ballistic features, including kinetic, thermal, pyrophoric, liquid metal and high-pressure/high-heat, plasma effects. Uranium (whether NDU or DU) offers unique structural features and the chemistry best suited for the defeat of deep, bunkerized targets, multiple types of targets in area denial munitions, and penetrating composite ceramic and metal armored targets.

Thousands of DU shells and bombs have been used in Yugoslavia, Afghanistan, the 1990-91 Gulf war, and the ongoing conflict in Iraq. Scientists say even a tiny particle of DU can have disastrous results once ingested, including various cancers and degenerative diseases, paralysis, birth deformities and death. DU has a half-life of 4.5 billion years, meaning it takes that long for just half of its atoms to decay. The radiation released through DU use in conflicts is believed to be more than ten times the amount dispersed by atmospheric testing. If you served in these conflicts and are experiencing any of the symptoms of ingesting DU you should consider submitting a disability claim to the VA and be evaluated.

Note: The Centre for Research on Globalization (CRG) is an independent research and media group of writers, scholars and activists. It is a registered non profit organization in the province of Quebec, Canada. The Global Research webpage at www.globalresearch.ca based in Montreal publishes news articles, commentary, background research and analysis on a broad range of issues, focusing on social, economic, strategic, geopolitical and environmental processes. [Source: American Free Press James Tucker article 29 Oct 06 ++]

VA HOSPITAL CARE UPDATE 01: The typical hospital patient is given the wrong medication or the wrong dose at least once a day, according to the Institute of Medicine, a research organization that advises Congress. The good news is that these mistakes are less likely to happen at a hospital run by the Department of Veterans Affairs. Recent news accounts about the shameful conditions at Walter Reed Army Medical Center - a hospital unaffiliated with the Department of Veterans Affairs - might lead you to believe that VA hospitals are a national embarrassment. That may have been true at one time. But VA hospitals have undergone a remarkable turnaround in the last decade and, on average, earn higher marks for patient safety and quality of care than most other hospitals in the United States. For example, the VA system is well ahead of most hospitals in protecting patients from medication errors. The VA has adopted a system in which a nurse scans a barcode printed on the patient's bracelet, indicating the name and dose of each medication the patient should be getting. The nurse then scans the pre-packaged medication to make sure it's a match.

Another new technology - computer physician order entry (or CPOE) - is designed to stop doctors from prescribing the wrong medication. With CPOE, a doctor enters the prescription at a computer terminal instead of scribbling it on a pad. The computer identifies incorrect doses or a medication that conflicts with other meds the patient is taking. If the computer sounds an alarm, the physician has to override it. In Australia, Britain, New Zealand and much of Western Europe, hospitals have adopted CPOE, but most U.S. hospitals have resisted. An exception is the VA, which has installed CPOE nationwide. The VA has also pushed ahead of most hospitals in the U.S. by investing in electronic medical records, allowing a patient's medical history to be accessed in a few seconds. The VA database is a resource for medical researchers and the envy of the private sector. Dr. James Bagian, director of the National Center for Patient Safety at the Department of Veterans Affairs, points out that the VA is a leader in safety initiatives ranging from preventing injuries related to falls to fighting one of the most feared, drug-resistant hospital infections, methicillin-resistant *Staphylococcus aureus*. In 2002, the VA Pittsburgh Healthcare System launched a pilot program that reduced such infections a stunning 85% by enforcing meticulous hand hygiene, patient screening and precautions against spreading bacteria on gloves, clothing, wheelchairs and stethoscopes. The VA is instituting the same approach nationwide.

Patients in VA hospitals are also more likely to receive optimal care than patients in other hospitals. In the late 1990s, the VA re-engineered its healthcare system, using information technology to track and measure the care each patient is given. The result is significantly higher compliance with best practices. According to a 2003 study in the *New England Journal of Medicine*, patients in VA hospitals received better care in 12 out of 13 measures compared to Medicare-eligible patients in nongovernment hospitals. Measures included care for diabetes, depression and congestive heart failure and cancer screenings. The American Customer Service Satisfaction Index (based at the University of Michigan) shows that patients in VA hospitals are more satisfied with their care (84% vs. 74%) than patients in private-sector hospitals. Not all 1,400 hospitals operated by the Department of Veterans Affairs are models of excellence. A recent internal VA report acknowledged that some hospitals need repair because of mold, leaky roofs or defective plumbing. Recent studies have revealed substandard conditions at three VA hospitals around the country. But the news about Walter Reed should not obscure the truth about the standard of care for most veterans. Facility shortcomings aside, the VA delivers better care than most hospitals. [Source: Los Angeles Times Betsy McCaughey article 1 Apr 07 ++]

CIGARETTE FIRE-SAFE LAW: New Hampshire is joining four other states in requiring that all cigarettes sold within its borders extinguish themselves if left to burn. About 800 people are killed annually in the United States by fires started by unattended cigarettes. Such fires typically occur when a smoker falls asleep while smoking or drops a lit cigarette into an upholstered chair, where it can smolder for hours before causing a fire. In 2004, New York became the first state to require unattended cigarettes to be self-extinguishing. A similar Vermont law took effect this year. A California law will take

effect next year, an Illinois law is scheduled to start in 2008, and New Hampshire's law will take effect on 1 OCT 07. Cigarette manufacturers argue there should be a single, nationwide standard for fire-safe cigarettes rather than various state regulations, but Congress has not passed legislation. The New Hampshire law would automatically be repealed if federal standards are enacted. Experts at the Harvard School of Public Health have prepared an investigative report which concludes that all cigarettes can and should be self-extinguishing. [Albert HR and others. "Fire Safer" Cigarettes: The Effect of the New York State Cigarette Fire Safety Standard on Ignition Propensity, Smoke Toxicity and the Consumer Market. January 2005"

www.hsph.harvard.edu/press/releases/cigarettes/cigarettes.pdf . A Canadian law has been in effect since 1 OCT 05. [Source: Consumer Health Digest 6 Jun 06]

TRICARE AMBULANCE SERVICE CLAIMS UPDATE 01: Guidelines for honoring claims for ambulance services are contained in the Tricare Policy Manual 6010.54-M C5 1 Aug 02 Chap 8 Sec. 1-1. Tricare defines ambulance service as transportation by means of a specifically designed vehicle for transporting the sick and injured that contains a stretcher, linens, first aid supplies, oxygen equipment, and such other safety and life saving equipment as is required by state and local law and is staffed by personnel trained to provide first aid treatment. As of JAN 07 Coverage is limited to the following:

- a.) Emergency transfers to or from a beneficiary's place of residence, accident scene, or other location to a civilian hospital, MTF, or VA hospital and transfers between MTFs, VA hospitals and civilian hospitals whether ordered by civilian or military personnel.
- b.) Ambulance transfers from a hospital based emergency room to a MTF, VA hospital or other civilian hospital more capable of providing the required care whether ordered by civilian or military personnel.
- c.) Transfers between a MTF, or civilian hospital or skilled nursing facility and a freestanding or another hospital based outpatient therapeutic or diagnostic department/facility whether ordered by civilian or military personnel.
- d.) Ambulance services by other than land vehicles (such as a boat or airplane) may be considered only when the pickup point is inaccessible by a land vehicle, or when great distance or other obstacles are involved in transporting the patient to the nearest hospital with appropriate facilities and the patient's medical condition warrants speedy admission or is such that transfer by other means is contraindicated.
- e.) A claim for ambulance service to a USMTF will not be denied on the grounds that there is a nearer civilian institution (hospital) having appropriate facilities to treat the patient.
- f.) Ambulance transfer to and from skilled nursing facilities when medically indicated.
- g.) Payment of services and supplies provided by ambulance personnel at an accident scene may be allowed when the patient's condition warrants transfer to an inpatient acute setting and medical services and/or supplies are provided solely to stabilize the patient's condition while awaiting the arrival of a more urgent means of transfer; e.g., air ambulance services. Refer to Tricare Reimbursement Manual, Chapter 8, Section 2, paragraph IV.C.13.e

Conditions under which claims for ambulance services may be denied are:

- 1.) Ambulance service used instead of taxi service when the patient's condition would have permitted use of regular private transportation.
- 2.) Transport or transfer of a patient primarily for the purpose of having the patient nearer to home, family, friends, or personal physician. Except as described in item (c.) above, transport must be to the closest appropriate facility by the least costly means.
- 3.) Medicabs or ambicabs which function primarily as public passenger conveyances transporting patients to and from their medical appointments.

[Source: Tricare Area Office-Pacific Feb 07 ++]

VA SOCIAL WORKERS: The VA website advises you will find social workers in all program areas in VA medical centers who are ready to help you with most any need. If you have questions or problems, the social worker will be able to help you or can refer you to the right person for help. Some of the things that VA social workers are available to help veterans with are:

- . Financial or housing assistance
- . Getting help from the VA or from community agencies, such as Meals on Wheels, so you can continue to live in your own home
- . Applying for benefits from the VA, Social Security and other government and community programs
- . Making sure your doctor and other VA staff on your treatment team know your decisions about end-of-life issues, generally called advance directives and living wills. Things like whether you want to be on life support equipment, whether you are an organ donor, and which family member or other person you have chosen to make decisions on your behalf when you are unable to make those decisions yourself.
- . Arranging for respite care for your caregiver so he/she can have a break or go on vacation without worrying about who will be caring for you.
- . If you are having marriage or family problems
- . If you would like help with moving to an assisted living facility, a board and care home or a nursing home
- . If someone close to you has passed away and you want to talk about it.
- . If you have problems with drinking or drug use
- . If you feel that someone is taking advantage of you or if you feel mistreated in a relationship
- . If you are a parent who feels overwhelmed with child care
- . If your parent or spouse is in failing health
- . If you are feeling stress because of your health or because your medical condition interferes with your daily activities
- . If you are feeling sad, depressed or anxious
- . If you really aren't sure what you need, but things just don't feel right.

If you need social work assistance regarding a veteran, contact a Social Worker at the nearest VA Medical Center which can be located at

<http://www1.va.gov/directory/guide/home.asp?isFlash=0>. [Source: www.va.gov 29 Mar

VA SOCIAL WORKERS UPDATE 01: Upon request VA social workers will help veterans with problems and concerns. The first step is generally for the social worker to meet with you, and often with your family. The social worker will ask you questions about your health, your living situation, your family and other support systems, your military experience and the things you think you need help with. The social worker will then write an assessment that will help you and your VA health care team make treatment plans. Subsequent steps could be:

- Crisis intervention - In a crisis situation, social workers can provide counseling services to help you get through the crisis. The social worker will then help you with more long-term needs. The social worker can help you apply for services and programs in your community and through the VA to meet emergent needs.

- High-risk screening - Social workers work particularly closely with those veterans who are at high risk, such as those who are homeless, those who have been admitted to the hospital several times, and those who cannot care for themselves any longer.

- Discharge planning - When you are admitted to a VA hospital, the social worker will help you make plans for your discharge back home or to the community. If you need services in your home or if you can no longer live at home by yourself, the social worker can help you make arrangements for the help you need.

- Case management - Social workers often provide long-term case management services to veterans who are at high risk of being admitted to a hospital, those who have very complex medical problems, and those who need additional help and support. They are available when needed to provide and coordinate a variety of services you may need, including counseling or support services or just helping you figure out what you need and how to get it.

- Advocacy - Sometimes it can be hard for a veteran to speak up for himself or herself. And sometimes veterans are confused by such a big, bureaucratic agency like the VA. Social workers can advocate for you and go to bat for you when you have a hard time doing it by yourself.

- Education - Social workers can help educate you and your family about your health care condition, what services and programs are available to you, how you can live a more healthy life, how you can deal with stress and loss, and how you can find support groups and other self-help programs in your community. Social workers also educate other staff in the medical center and in the community about VA programs and services and about how problems veterans may be having in their personal lives can impact their health.

VA social workers can help you with all of these types of services, plus many, many more. If you have a problem or a question, just ask a social worker. [Source:

www.va.gov 29 Mar 07 ++]

HOUSEHOLD HINTS:

- * Ants: Block their path by drawing a chalk line on the door sill, around the windows or on the floor.

- * Appliance cords: Use empty toilet paper roll to store appliance cords. It keeps them neat and you can write on the roll what appliance it belongs to.
- * Artificial flowers: Clean by pouring some salt into a paper bag and add the flowers. Shake vigorously as the salt will absorb all the dust and dirt and leave your artificial flowers looking like new
- * Blood stains: To remove from clothes pour a little hydrogen peroxide on a cloth and wipe.
- * Candles: Candles will last a lot longer if placed in the freezer for at least 3 hours prior to burning. To remove old wax from a glass candle holder put it in the freezer for a few hours. Then take the candle holder out and turn it upside down. The wax will fall out.
- * Celery: Wrap in aluminum foil when putting in the refrigerator and it will keep for weeks.
- * Corn on the cob: When boiling add a pinch of sugar to help bring out the corn's natural sweetness.
- * Crayon marks: Remove from walls with a damp rag dipped in baking soda.
- * Envelopes: Open a sealed envelope by placing in the freezer for a few hours and then slide a knife under the flap. The envelope can then be resealed.
- * Flying insects: Spray with hairspray and they will take a quick dive.
- * Headaches: Take a lime, cut it in half, and rub it on your forehead. The throbbing will go away.
- * Icy door steps: In freezing temperatures put Dawn dishwashing liquid in warm water and pour it over the steps. They won't refreeze.
- * Mirrors: Use air-freshener to clean. It does a good job and better still leaves a nice smell to the shine.
- * Mosquito bites: To get rid of itch try applying soap on the area for instant relief.
- * Odors: Spray a bit of perfume on the light bulb in any room to create a light scent in each room when the light is turned on. Place fabric softener sheets in dresser drawers and your clothes will smell freshly washed for weeks to come. You can also do this with towels and linens.
- * Permanent marker: Remove from appliances/counter tops with rubbing alcohol on a paper towel.
- * S.O.S Pads: Eliminate rusty and smelly pads by cutting them in half with scissors when initially purchased. Doubling the quantity allows throwing them away after each use. Also, scissors are sharpened in the process. An alternative is to freeze after each use and run under hot water when you want to use.
- * Skillet: To easily remove burnt on food add a drop or two of dish soap and enough water to cover bottom of pan and bring to a boil on stovetop.
- * Splinters: Put scotch tape over the splinter and then pull it off. Scotch tape removes most splinters painlessly and easily.
- * TUPPERWARE: Spray with nonstick cooking spray before pouring in tomato based sauces to prevent staining.
- * Windows. Use vertical strokes when washing windows outside and horizontal for inside windows. This way you can tell which side has the streaks. Straight vinegar will get outside windows really clean. Don't wash windows on a sunny day. They will dry too quickly and will probably streak.
- * Wine: Freeze leftover wine into ice cubes for future use in casseroles and sauces.

[Source: Various Apr 07]

VETERAN LEGISLATION STATUS 13 APR 07: Refer to the Bulletin attachment for a listing of Congressional bills of interest to the veteran community that have been introduced in the 110th Congress. 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 members in his/her chamber (i.e. House or Senate) to sponsor a bill or amendment. The first member to sign onto a 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 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. The key to increasing cosponsorship is letting our representatives know of veterans 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.

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